

International migration of nurses

In nearly all OECD countries, the proportion of foreign-trained nurses is much lower than that of foreign-trained doctors. However, given that the overall number of nurses is usually much greater than the number of doctors, the absolute number of foreign-trained nurses tends to be greater than that of foreign-trained doctors (OECD, forthcoming).

OECD countries vary widely in the number and share of foreign-trained nurses working in their health system (Figure 5.17). While there are almost no foreign-trained nurses working in countries such as Estonia, Turkey, Slovenia and the Netherlands, these make up nearly 25% of the nursing workforce in New Zealand, and between 10% and 20% of the nursing workforce in Switzerland, Australia, the United Kingdom and Israel. The share of foreign-trained nurses also exceeds 5% in Norway, Canada, the United States, Germany and Italy. In absolute numbers, the United States has by far the highest number of foreign-trained nurses (with almost 250 000 nurses trained abroad in 2013), followed by the United Kingdom (86 000 foreign-trained nurses in 2014) and Germany (70 000 foreign-trained nurses in 2010, latest year available).

The number and share of foreign-trained nurses has increased over the past ten years in several OECD countries, including New Zealand, Australia, Canada and Italy (Figure 5.18). In Italy, the increase in the immigration of foreign-trained nurses since 2000 was primarily driven by the arrival of a large number of nurses trained in Romania, who are now accounting for nearly half of all foreign-trained nurses (Figure 5.19). The movement of Romanian nurses to Italy preceded Romania's entry in the European Union in 2007, but has continued since then.

In the United Kingdom, in 2014, nearly half of all foreign-trained nurses came from Asian countries, mainly from the Philippines (26%) and India (19%). But a growing number of foreign-trained nurses also come from other EU countries, such as Spain, Portugal, Romania and Poland. In 2014, more than 5 600 nurses trained in Spain were working in the United Kingdom, and there were also more than 4 000 nurses trained in Portugal and Romania, and over 2 500 nurses trained in Poland.

In other EU countries such as France and Belgium, the percentage of nurses trained abroad remains low compared with the United Kingdom, but their numbers have increased rapidly. The number of foreign-trained nurses more than doubled in France between 2000 and 2013. About half of these foreign-trained nurses received their diploma from Belgium (in many cases, these were French citizens who went to study to Belgium before coming back), but

there has also been a strong growth in the number of nurses trained in Portugal (with the number rising to over 1 100 in 2013, up from less than 100 in 2008) and in Spain (rising to over 1 600 in 2013, up from 1 100 in 2008). In Belgium, there has been a strong rise in the number of nurses trained in Romania (exceeding 1 000 in 2014, up from 150 in 2008), Portugal (with the number reaching 500 in 2014, up from 10 only in 2008) and to a lesser extent Spain (with the number reaching 300 in 2014, up from about 50 in 2008).

In 2014, more than 6 500 nurses trained in Portugal and more than 9 200 nurses trained in Spain were working in other EU countries, with a majority of them working in the United Kingdom.

Definition and comparability

The data relate to foreign-trained nurses working in OECD countries measured in terms of total stocks. The OECD health database also includes data on the annual flows for most of the countries shown here, as well as by country of origin. The data sources in most countries are professional registries or other administrative sources.

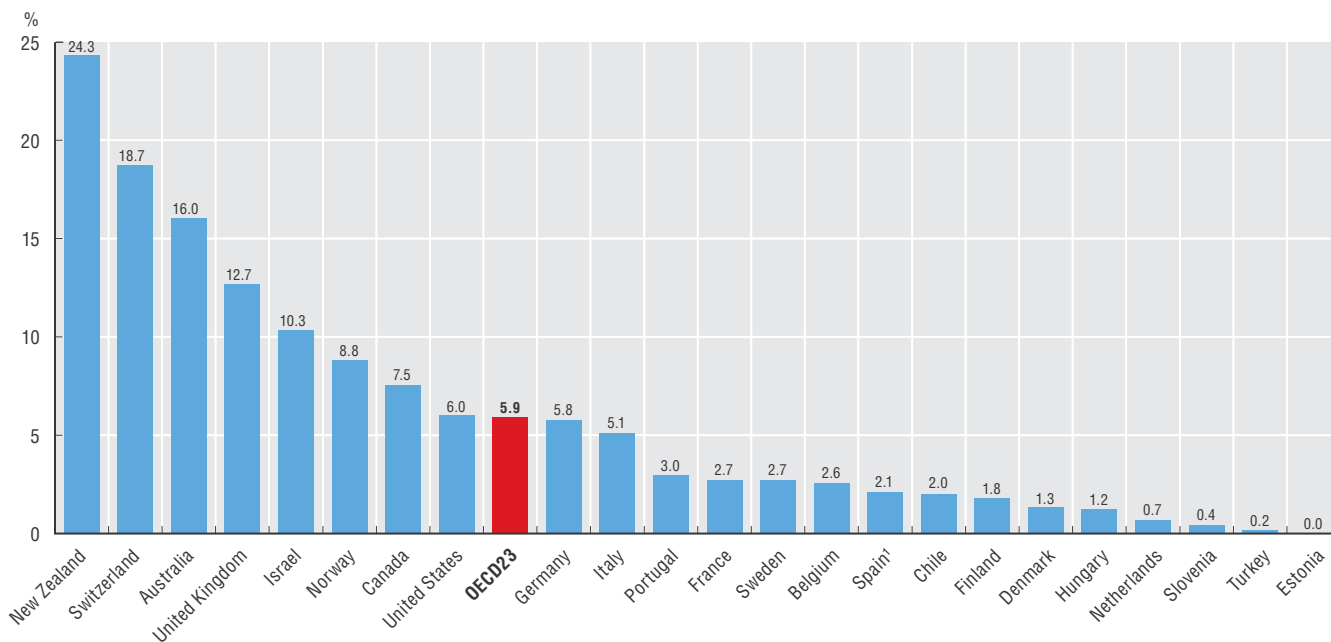
The main comparability limitation relates to differences in the activity status of nurses. Some registries are regularly updated, making it possible to distinguish nurses who are still actively working in health systems, while other sources include all nurses licensed to practice, regardless of whether they are still active or not. The latter will tend to over-estimate the number of foreign-trained nurses, although it will also over-estimate the total number of nurses (including the domestically-trained), so the impact on the share is not clear.

The data for some regions in Spain is based on nationality or country of birth, not the place of training.

References

OECD (forthcoming), *Health Workforce Policies in OECD Countries: Right Jobs, Right Skills, Right Places* (preliminary title), Chapter on "Changing patterns in the international migration of doctors and nurses", OECD Publishing, Paris.

5.17. Share of foreign-trained nurses in OECD countries, 2013 (or nearest year)

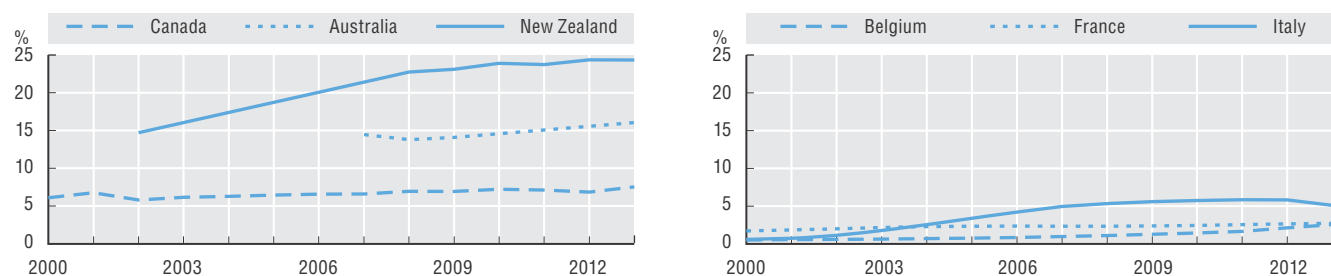


1. Data for some regions in Spain relate to foreign nationality or country of birth, not the place of training.

Source: OECD Health Statistics 2015, <http://dx.doi.org/10.1787/health-data-en>.

StatLink <http://dx.doi.org/10.1787/888933280940>

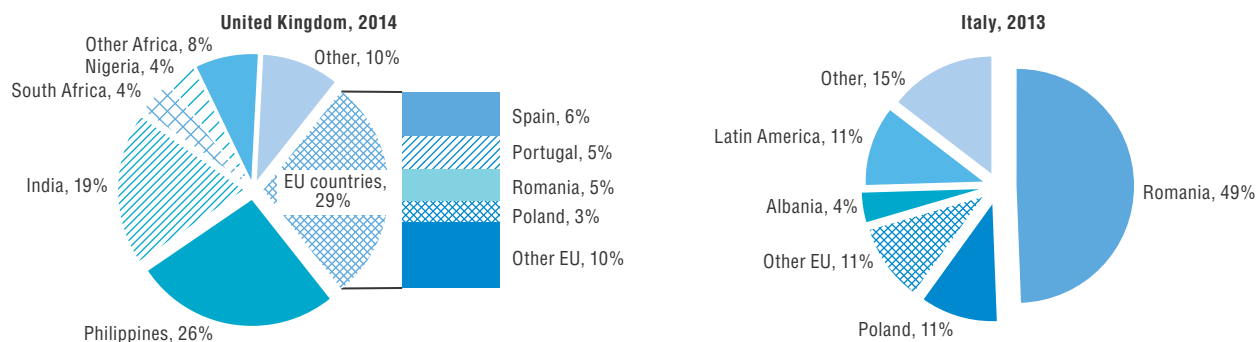
5.18. Evolution in the share of foreign-trained nurses, selected OECD countries, 2000 to 2013 (or nearest year)



Source: OECD Health Statistics 2015, <http://dx.doi.org/10.1787/health-data-en>.

StatLink <http://dx.doi.org/10.1787/888933280940>

5.19. Main countries of training of foreign-trained nurses, United Kingdom and Italy



Source: OECD Health Statistics 2015, <http://dx.doi.org/10.1787/health-data-en>.

StatLink <http://dx.doi.org/10.1787/888933280940>

Information on data for Israel: <http://oe.cd/israel-disclaimer>



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