

Immigration of Nurses : Problems, Prospects and Challenges

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Ravenstein (1885) father figure of migration defined a migrant as a person who came as a settler not as a tourist or visitor in to another country.

There is a lot of enthusiasm among nurses to grab the opportunities available abroad the trend seems to be "maximum benefit effort". Migration has direct and indirect impact on sender and receiver populations.

Problems

Professional Prospects

- ♦ Restricted freedom in practice of profession
- ♦ Few assistants are provided in nursing care
- ♦ Second citizen attitude of patients and native co-workers
- ♦ Cheating of agents regarding job destinations
- ♦ No safety and security felt by nurses in private hospitals.
- ♦ Problems are faced in higher education especially in Gulf countries
- ♦ "Son of the soil" is always preferred in the administrative posts who may be having less experience than immigrant nurse which makes dissatisfaction among immigrants.
- ♦ Delay in understanding cultural differences and practices of patients.

Formality Delays in Immigration

There are different visa categories like H1 B, L, E and TN. Persons with temporary visa categories are

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legally authorized to remain in the US only as long as they are employed with that particular employer noted in the visa applications. Some agents deduct major percentage of nurse salaries for the contract period with minimum required to the nurse by states Laws. Successive restrictions on immigrations and redefinitions of citizenship have weakened the positions of Asians abroad. Preference of certain religious groups is yet another problem. Potential emigrants have to raise the pay for no objection certificate. Visa and travel which will be five times the average monthly income sending country.

Demographic Parameters

Due to more migration of females and also to obey rules of the receiving institutions, immigrant families assume lower pregnancy rates which sometimes causes personal problems. It is also associated with lower parity progression rates and lower fertility rate which may be hindering migrants personal wishes.

Discriminatory Problems

Evidence is increasingly suggesting that racism and discrimination are not uncommon in Gulf and European countries. The Financial Times (13th November 1983). There are limitations in welfare and benefits of immigrants. They are not allowed to take part in political process of the receiving country.

Familial Problems

It is commonly alleged that disease ridden old persons are often left alone to take care of their sickness due to immigration of their children. Elderly has to travel alone

and lead an isolated life unsubstantiated.

Commonly known as 'Dubai Syndrome' is prevalent in immigrants (Ahmed 1984 and Walles 1985) which has got three stages.

Pre Dubai Phase : Intense jealousy towards other migrants leading to anxiety and acute depression.

Dubai Phase : Manages to immigrate

Post Dubai Phase : Deprived of personal wishes, he/she minimizes expenditure, saves money and sends home.

Economical Problems

Case studies in Kerala indicate (Mathew and Gopinathan Nair (1978) that around half of the emigrants finance their move by raising loans predominantly from friends and relatives and sometimes through banks and moneylenders will reach 120% per annum.

The other major sources of capital for emigration are personal savings and the sale or mortgaging of belongings or land.

Social Consequences

- ♦ The absence of women from home places males in care giver role.
- ♦ Increase in land prices by around 100% in a 5 year period (Mathew and Gopinathan Nair)
- ♦ Economic power of immigrants family tends to increase in society so they can challenge political hierarchy.
- ♦ Problem of frustration among those family members and relatives who do not receive their remittances.

Return migration problems

- ♦ Induce feelings of relative dep-

rivation and frustration.

- ♦ Difficulties in finding suitable employment on return
- ♦ Causes frustration with local ways of doing things, such as corruption and bureaucracy.

Health problem of Immigrants

- ♦ Increased incidence of kidney stones and kidney problem attributed to high salinity of water in some immigrant countries.
- ♦ High cholesterol levels and problem of over nutrition and obesity
- ♦ Anxiety and depression
- ♦ Dubai or Gulf syndrome

Prospects

Demographic Prospects

In K.M.C. study, conducted by Zacharia K.C et al found that there are more male immigration in Kerala state. Since majority of nurses are from female group their migration is favoured more. Population growth rate has curtailed due to lower parity progression ratio secondary to separation of couples.

Interval between births is larger for immigrants. Thus migration leads to decline in fertility due to behavioral factors.

Migrants desired family size tends to be smaller since cost of living is higher in receiving countries. Also they obey family planning norms of those countries.

Decrease in mortality due to improvement in education nutrition and greater use of hospital facilities.

Professional Prospects

Nurses from India are preferred internationally.

Nurses receive extra skills by working abroad in high end settings.

Sincere correct time payment,

annual leave.

- ♦ High money value and savings.
- ♦ Tax exemption for NRI's offered by Govt of India.
- ♦ Free benefits are offered by many receiving employees like air ticket food water, uniform supply, medical check up accommodation etc.
- ♦ High quality in service education
- ♦ Skill acquisition in practicing high end equipments and supplies
- ♦ Surplus of supplies e.g. disposable items
- ♦ One can work smoothly according to the principles of nursing
- ♦ No brain drain, instead brain overflow since vast experience is gained
- ♦ Job descriptions are issued for each post for working and it avoids errand jobs.
- ♦ Knowledge update with the recent advances in medical science with continuing education programmes.
- ♦ Team work spirit is there among medicos, physiotherapists, respiratory therapist, psychologist, dietician, social workers etc.
- ♦ According to job evaluation increments are given
- ♦ Provides opportunities for qualified inexperienced individuals.
- ♦ Computerized nursing functions e.g. : X-ray etc
- ♦ Computerized documentation
- ♦ High level of cleanliness is maintained by hospitals.

Remittances as one of the prospects

- ♦ Remittances from emigrants have contributed nearly 10% the states gross domestic product, 3 times what the state received from the centre as

budget support and 4 times the foreign exchange from sea food export and 8 times that from spices export.

- ♦ The amount of remittances will be greater if the migration decision was linked to the needs of the households members. The opposite is true in case of independent decision.
- ♦ Remittances represent a significant flow of capital and goods.
- ♦ Remittances are a net gain to societies, resources.
- ♦ Remittances have a potential to improve income distribution.
- ♦ Cumulative economic growth and social change occurs due to expatriate remittances.
- ♦ Remittances helps to improve local status of migrants through the acquisition of land and superior accommodation.
- ♦ 12% of remittances are invested either in savings or industrial and agricultural concerns.
- ♦ Remittances are more than economics where they prove to be strong links which exist between a migrant and his homeland as a commitment to the traditions and culture of sending society.

Social Prospects

The proportion of population under the poverty line had declined by about 3% points and the number of unemployed among the labour force had declined by over 30%. In India it is a policy of government not to publish data on private remittances. Migration has considerably cured the unemployment problem in the state.

Improvement in Health Prospects

A high proportion of emigrant households are aware of and are practicing vaccination, folic acid pills during pregnancy R.D.A'S etc.

High cost diagnostic measures as shown in Kerala migration study by Zachariah K.C. et al.

Family Prospects

Many young persons in Kerala prepare themselves for eventual work outside the state. Such preparations include postponement of marriage, postponement of having children etc. Once they migrate innumerable obstacles would stand in the way of their getting married and having children. Such behavioral changes tend to increase the age at marriage and depresses the number of children desired by them. A corny witticism is that separation from spouses is an effective temporary contraceptive.

Prospects of Elderly on Immigration

- ♦ Economic security is high among elderly of migrant households.
- ♦ Ownership of land and buildings are higher among elderly of migrant families.
- ♦ In case of bank account, migration status shows a marked difference among the elderly. 19.4% in migrant households kept account in contrast to 8.3% in non migrant households.
- ♦ Health status monitoring and maintenance is higher among elderly in immigrant household.

Challenges

Migrants are indeed a challenge to the national order. They are present where they should not be in the host country and they are absent from where they should be in their country of origin.

- ♦ Practice of language of immigrant population is a real challenge.
- ♦ Migrant countries are preferring graduate nurses with spe-

cialization. So higher education liberalizations is needed by the state. Seats for male nurses have to be increased.

- ♦ In order to avoid short cuts and to raise the standard of nurses to international levels proper migration monitoring system has to be employed by Government of India.
- ♦ The objectives of MMS would principally be to collect and disseminate information on:
 - > Statistics on immigration
 - > Average annual remittances
 - > Accounts of technical competence and work experience of return migrants.
 - > Re-absorption and rehabilitation of return migrants.
 - > Conditions of voluntary and involuntary return migration (repatriation) of emigrant and policies followed by the state Govt to serve interest of the return migrants.
 - > Sample surveys should be conducted about migration on nurses in order to establish on M.M.S in the profession so as to disseminate statistical and analytical information about migration situation of nurses in the country.
 - > Establish proper care home and

assistance for children and elderly of migrant is a need which is felt by society e.g. agencies monitoring their needs.

- > Understanding migration trends and institution policies to maintain the flow of migration is more important.
- > Corrective policies can be urgently made to raise the competitive edge of our nurses.
- > Large benefit will be received by society by a planned resettlement of the return immigrants.
- > Long term prospects of restructuring the educational system to cater the needs of receiving society (e.g. more geriatric nursing hours in syllabus) and short term prospects to improve jobs skills of prospective nurse emigrant is instituted.

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