

Brain drain and Care drain: Responsibility of the North?

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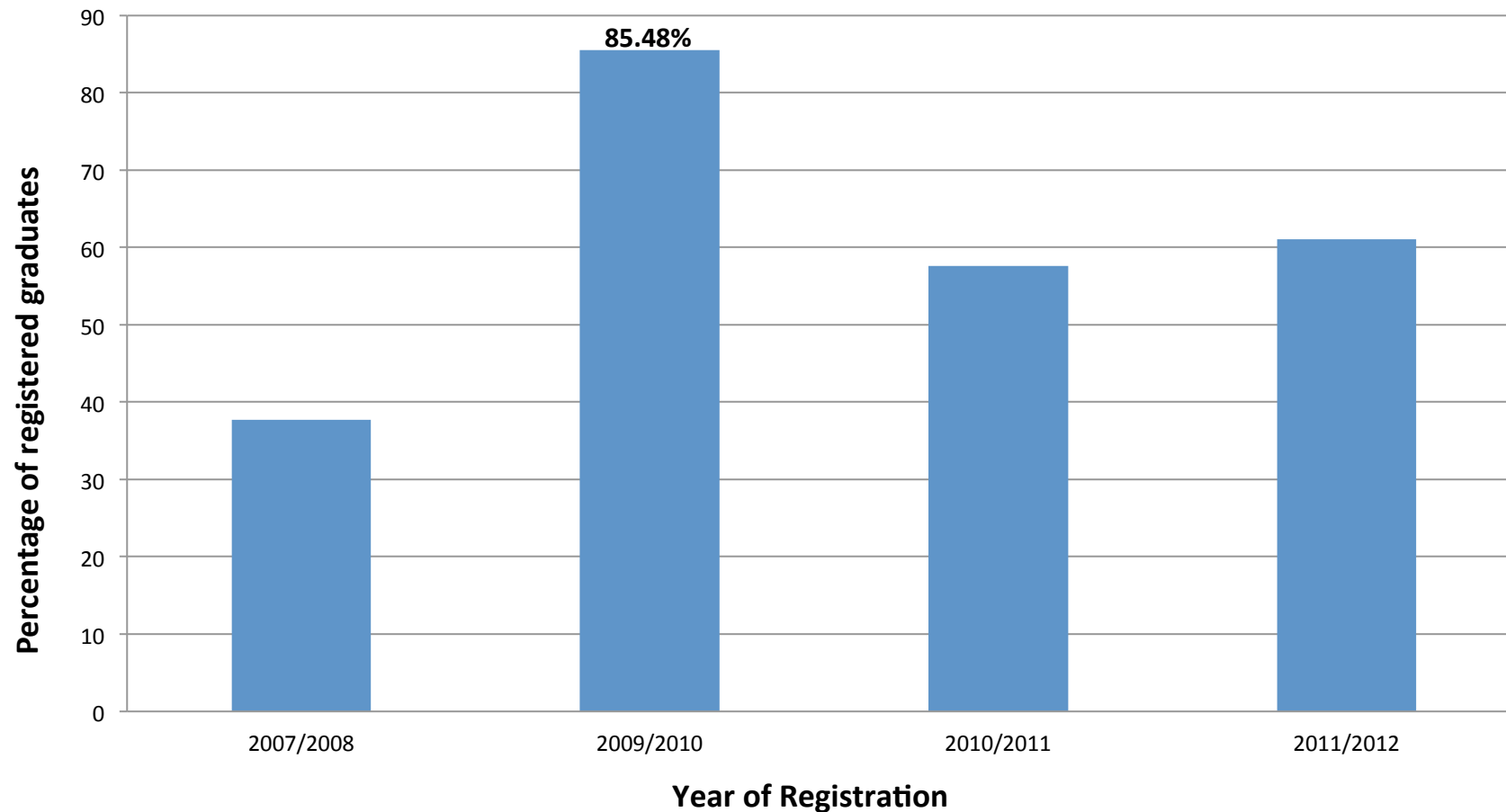
Introduction I

- ❖ We live in capitalist, competitive economies: It is legal to find the best people in order to be the best; thus, each country needs (top) skilled labor.
- ❖ **Major** challenge to almost all Southern countries: **retaining** skilled labor and stop global movement of skilled women and men from Global South to Global North which, for instance, deprive patients from health care and also leaves many children behind without parental care!
- ❖ My basic argument: To **recruit, train and retain** skilled labor through adequate payment and proper work environment is the solution to fight brain drain from the Global South
- ❖ It is the **core responsibility of the Governments of the countries in the Global South, in the first place**, where such labor is to be trained properly and to be employed properly!

Introduction II

- ❖ Skilled labor migrate so as to reduce poverty or seek better future (e.g. migrating parents leaving their children behind at the cost of neglected care, affection and love)
- ❖ Is it wrong if people do so? Is the North responsible for that?
- ❖ **What are the pulling – and what are the pushing factors?**
- ❖ **Ask yourself!** Why is there a coexistence of shortage of skilled labor on one hand, and **unemployed skilled labor** roaming the streets, on the other?
- ❖ Example of Human Resource in Health Care Systems (HRH) – the case of Tanzania!

Registered Graduates in Tanzania I (2007/2008 - 2011/12)



Registered Graduates in Tanzania II

- ❖ Since **2014/2015** (i.e. my intake), the Government has not employed any medical doctor!
- ❖ More than **600** medical doctors are unemployed
- ❖ **THIS is what fuels Brain Drain**
- ❖ **2015/2016**: Another new cadre of medical doctors who just finished internship waiting to be employed
- ❖ **Will they just stay idle until the Governments decides to employ them???**
- ❖ Yet, Tanzania is one amongst **57** countries with **critical shortage of health workers** (as shown in the map overleaf); Health Minister claims: There is **NO shortage!**

Figure 1.5 Countries with a critical shortage of health service providers (doctors, nurses and midwives)

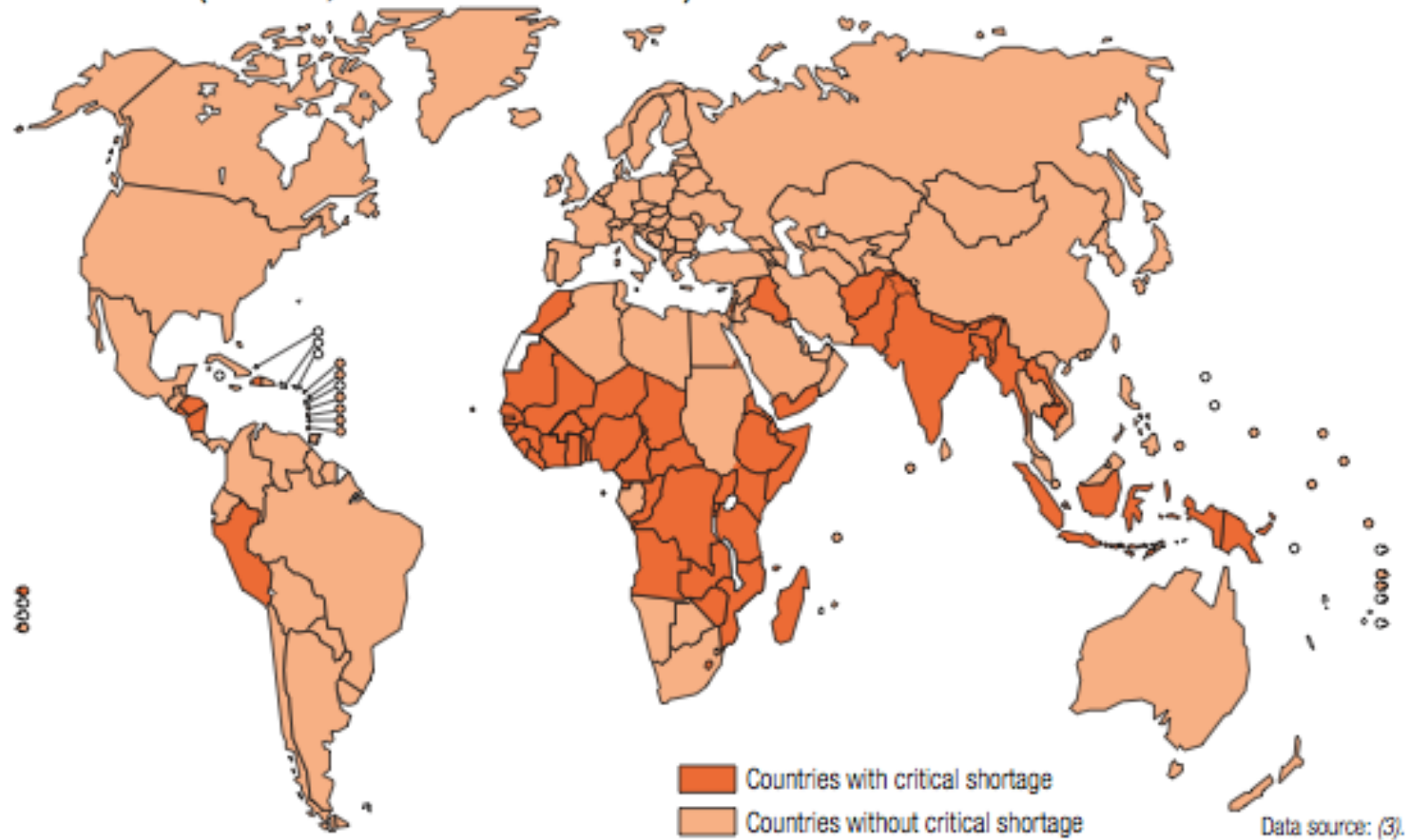
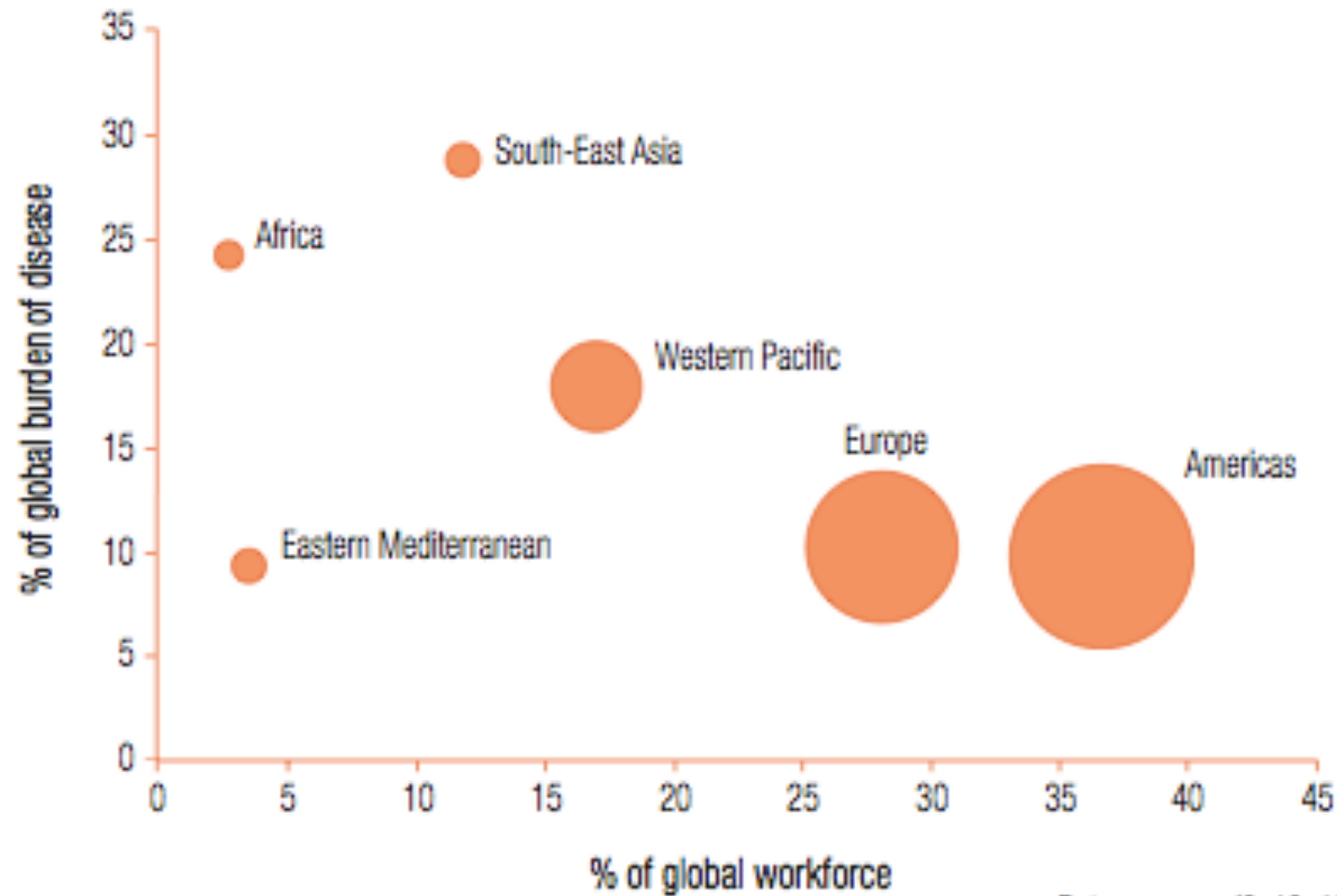


Figure 1.2 Distribution of health workers by level of health expenditure and burden of disease, by WHO region



Data sources: (3, 18, 19)

Challenges facing deployment

- ❖ Budgetary constraints [health care sector budget competes with budget from other sectors]
 - ❖ fueling brain drain [internal and external]; hence even greater loss of health work force to be expected
 - ❖ low absorption of graduated human resources in health

- ❖ Governmental bureaucracy
 - ❖ Decision on deployment handled by another ministry rather than ministry of health and social welfare

- ❖ Poor human resource management and planning:
 - ❖ *Example I and Example II*

Way Forward(Global south)

- ❖ Multi-sectoral involvement is necessary for realization of retaining skilled labor in the countries of origin (reduce unemployment).
- ❖ Norway and Ireland – the two recent European winners of the Health Worker Migration Policy Council award – are good examples
- ❖ Deliberate efforts on recruitment of academic staffs and provide more opportunity for further training
- ❖ Implementation of the available policies (motivation and improvement of working environment) e.g. Zambia

Way forward(global North)

Core responsibility of the North in fighting Brain Drain from the Global South:

- ❖ Make very transparent arrangements with Southern partner countries on high-level training schemes for skilled labor.
- ❖ Involve local professional associations, labor organizations and religious institutions when negotiating with Southern Partner Governments
- ❖ Investments in both vocational training and business or sector development **have to go hand in hand**
- ❖ Help Governments to truly track record their human resource development and **employability of skilled labor** beyond celebrating output figures, only

Cont.....

- ❖ **Incentivize Southern trainees** to return to their countries of origin.
- ❖ Assist Southern partner countries to **absorb those people you trained exactly where there is critical shortage** by prior arrangements and adequate guidelines.
- ❖ **Incentivize your “native” specialists** to remain in Northern countries or return after overseas assignments so as to narrow the gap in which Southern skilled labor would seek & find employment!

Cont....

Checking migration policies in the European Union:

- ❖ **Allow for circular migration**; thus, have skilled labor of Southern (or Eastern) countries work for some years in the EU
- ❖ Right from the beginning: **Do incentivize circular labor migrants to return to their country of origin**
- ❖ Circular labor migrants will have gained a lot of job experience and professional skill useful for their original labor markets, especially in the health sector
- ❖ Thus, REVERSE “brain gain” to make much called-for “Triple Win-Win” a Reality!

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