

**Pulling them Out of Poverty  
or  
Pushing them Abroad for Business? Exodus of  
Nurses from India**

**Binod Khadria  
Jawaharlal Nehru University,  
New Delhi**

**DRC Workshop on  
“Building Migration into Development Strategies”,  
Royal Society, London, 28-29 April 2008**

# Global Skills: Generic Categories of Knowledge & Service Workers

<b>Knowledge Workers</b>						
<i>Career-specific</i>	<i>Education</i>	<i>Know-ledge</i>	<i>Experi-ence</i>	<i>Train-ing</i>	<i>Activity</i>	<i>Generic Category</i>
Scientists, Doctors, Engineers	Third Level R & D	O	o	o	Invention, Innovation	Creators, <b>Doctors, IT Professionals</b>
Educators, Trainees	Third Level S & T	O	o	o	Communication, Transformation	Teachers, <b>Tertiary Students</b>
Executives, Supervisors	Third Level Business, Commerce	O	O	O	Finance, Management	Managers, <b>Nurses</b>
<b>Service Workers</b>						
Semi-Professionals, Technicians, Craftsmen	Second Level - Vocational	o	o	O	Facilitation, Operation, Correction	Operators
Semi-skilled, Unskilled	First level - Literacy	o	o	o	Production, Construction	Labourers
<b>Knowledge: Know-why</b>		<b>Experience: Do-how</b>		<b>Training: Know-how</b>		

## Destination USA: Percentage Distribution of Foreign Nurse Applicants, country-wise, 2003

Rank	Country	Percentage Share of nurse applicants
1	Philippines	32.6
2	Canada	22.0
3	Africa (South Africa and Nigeria)	7.4
4	Korea	7.1
5	India	5.8
6	U.K.	4.4
7	Russia	2.2
8	Australia	1.3
9	China	1.3
10	Poland	1.0
11	Taiwan	0.8
12	Jamaica	0.7

Source: Buchan J et al (2003), International Nurse Mobility: Trends and Policy Implications

# Destination UK: Overseas-trained Nurse Registrations, Country-wise annual, 1998-2003

(Excluding the European Union and some other countries)

Country	1998-99	1999-2000	2000-01	2001-02	2002-03	2002-03 % distribution
Philippines	52	1052	3396	7235	5594	47.7
<b>India</b>	<b>30</b>	<b>96</b>	<b>289</b>	<b>994</b>	<b>1883</b>	<b>16.1</b>
South Africa	599	1460	1086	2114	1480	12.6
Australia	1335	1209	1046	1342	940	8.0
New Zealand	527	461	393	443	292	2.5
US	139	168	147	122	89	0.8
Canada	196	130	89	79	53	0.5
Pakistan	3	13	44	207	172	1.5
Kenya	19	29	50	155	152	1.3
West Indies	221	425	261	248	57	0.5
Nigeria	179	208	347	432	524	4.5
Zimbabwe	52	221	382	473	493	4.2

Source: Nursing and Midwives Council (NMC) [www.nmc-uk.org](http://www.nmc-uk.org)

Cited in: Bach, Stephen (2003), International Migration of Health Workers: Labour and Social Issues, Working Paper, ILO, Geneva, July

## Ratio of Registered Nurse-to-Population, in Major Destination and Source countries, in Transition Decades to 21<sup>st</sup> century

Destination Country	RNs per 100,000 population (Reference Year)	Source Country	RNs per 100,000 population (Reference Year)
Australia	941(1999)	South Africa	472(1996)
<b>UK</b>	<b>847(2001)</b>	Philippines	418(1996)
New Zealand	841(2002)	Zimbabwe	129(1995)
<b>US</b>	<b>782(2000)</b>	Nigeria	66(1992)
Canada	741(2001)	<b>India</b>	<b>45(1992)</b>

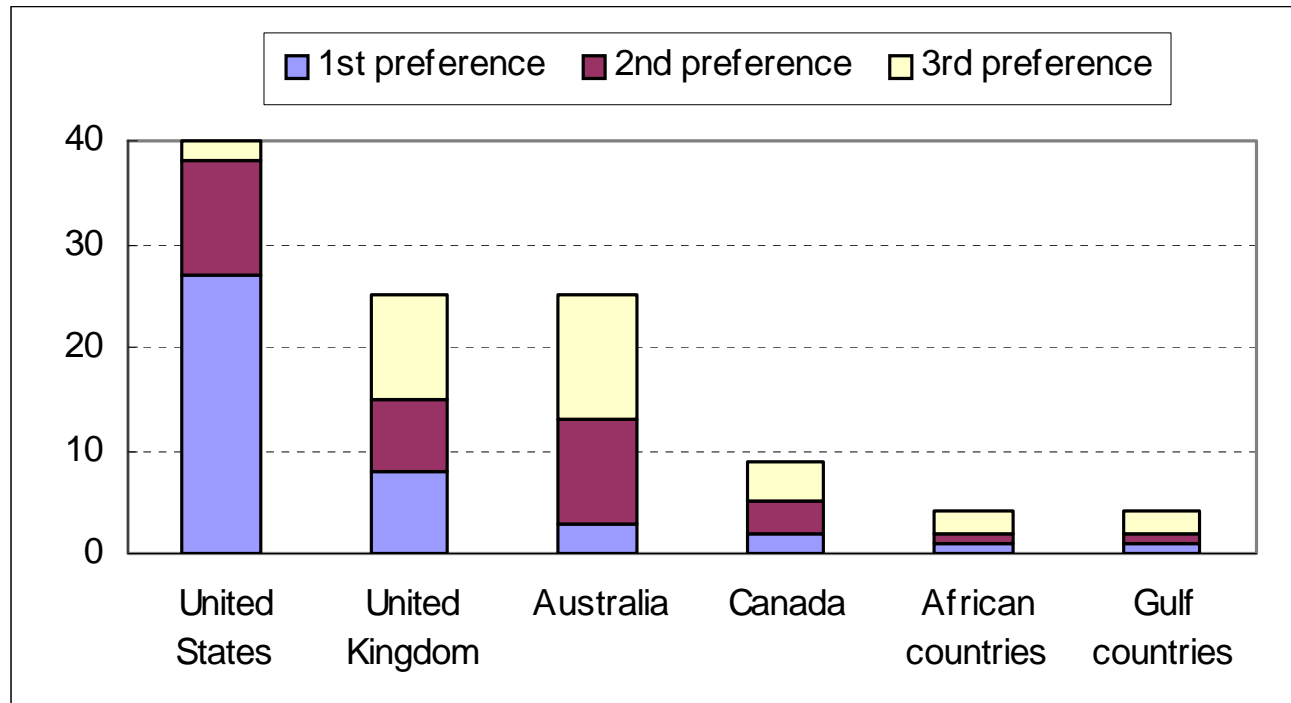
cited in: Barbara L. Brush, Julie Sochalski and Anne M. Berger (2004), Imported Care: Recruiting Foreign Nurses To U.S. Health Care Facilities.

# Selected Health Status Indicators, India

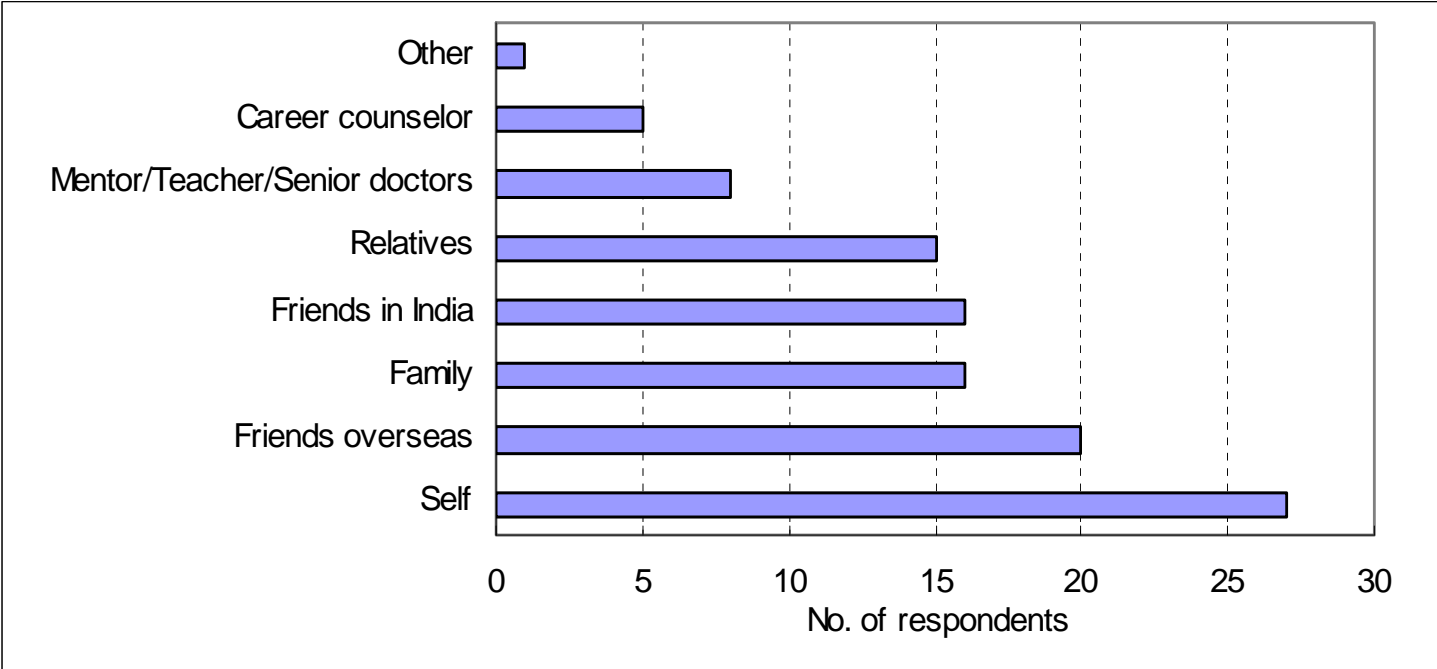
S.No.	Parameter	1951	1981	1991	More Recent	
1.	Crude birth rate (per 1000 population)	40.1	33.9	29.5	25.0 (2002)	
2.	Crude death rate (per 1000 population)	25.1	12.5	9.8	8.1 (2002)	
3.	Total fertility rate (TFR) (per Woman)	6.0	4.5	3.6	3.1 (2001)	
4.	Maternal mortality rate (MMR) (per 1000 live births)	NA	NA	437 (1992-93)	407 (1998)	
5.	Infant mortality rate (IMR) (per 1000 live Births)	146 (1951-61)	110	80	63 (2002)	
6.	Life expectancy at birth	Male	37.2	54.1	59.7 (1991-95)	63.9 (2001-06 estimate)
		Female	36.2	54.7	60.9 (1991-95)	66.9 (2001-06 estimate)

Source: Economic Survey-2004-2005, Government of India

# First Small-sample Survey in Delhi (n=40), Revealed Preference of Destinations,



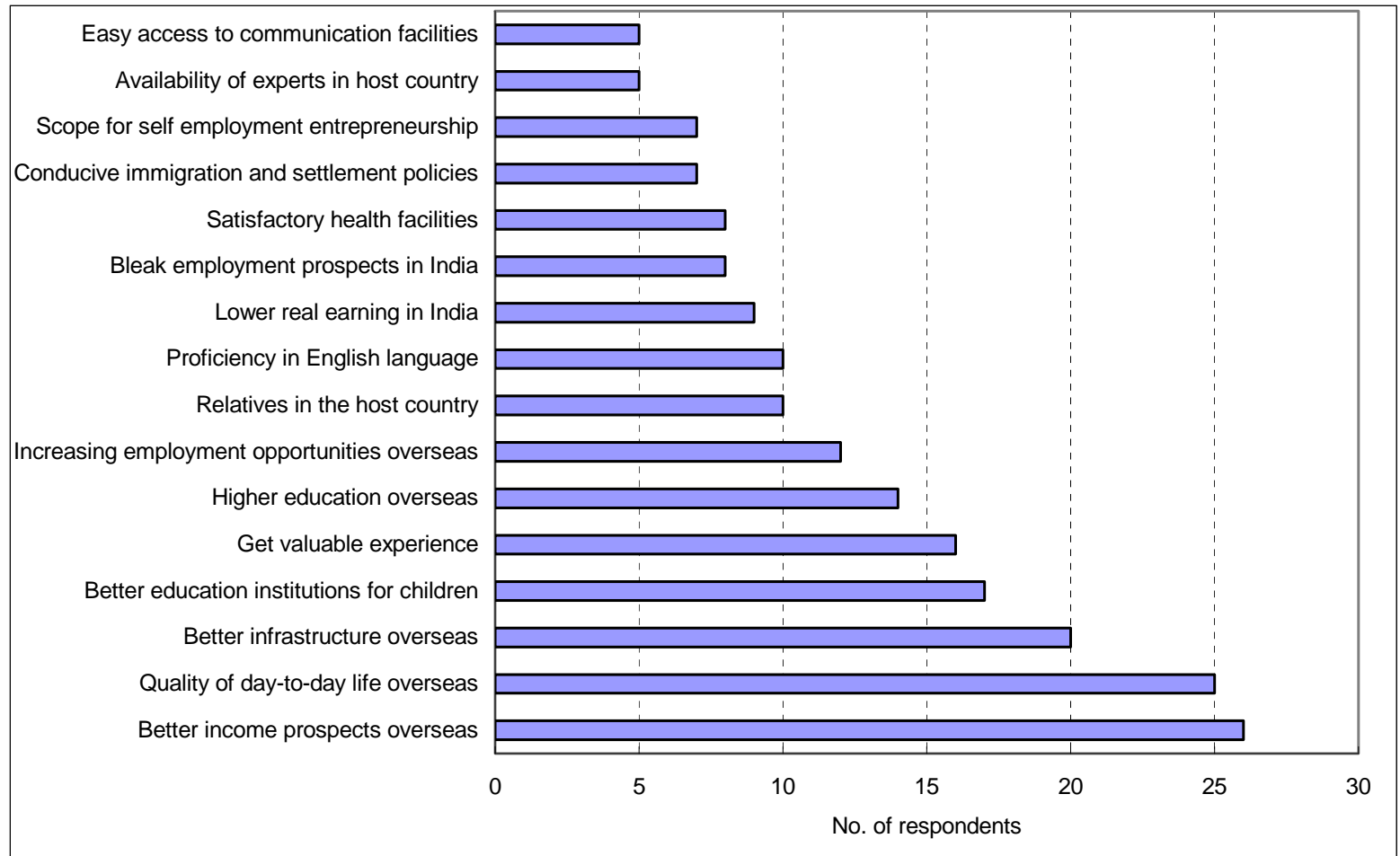
# First Sample survey: Decision to Emigrate





# First Sample survey:

## Motivating pull-factors for out-migration of nurses



## First Sample survey: Salaries of Nurses in India as a Push Factor

*Initial years of nursing career:*

Rupees per month	Frequency	Percentage
1000 – 3000	5	16.7
3000 – 5000	5	16.7
5000 – 10000	1	3.3
10000 & above	1	3.3
Not mentioned/Not applicable	18	60.0
Total	30	100.0

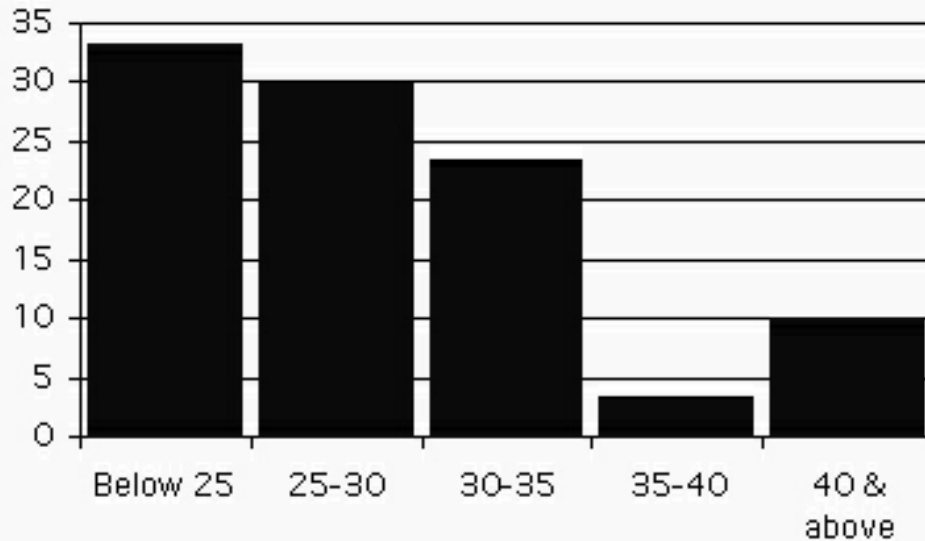
*Current or last year:*

Rupees per month	Frequency	Percentage
3000 – 5000	2	6.7
5000 – 10000	4	13.3
<b>10000 &amp; above</b>	<b>13</b>	<b>43.3</b>
Not mentioned/Not applicable	11	36.7
Total	30	100.0

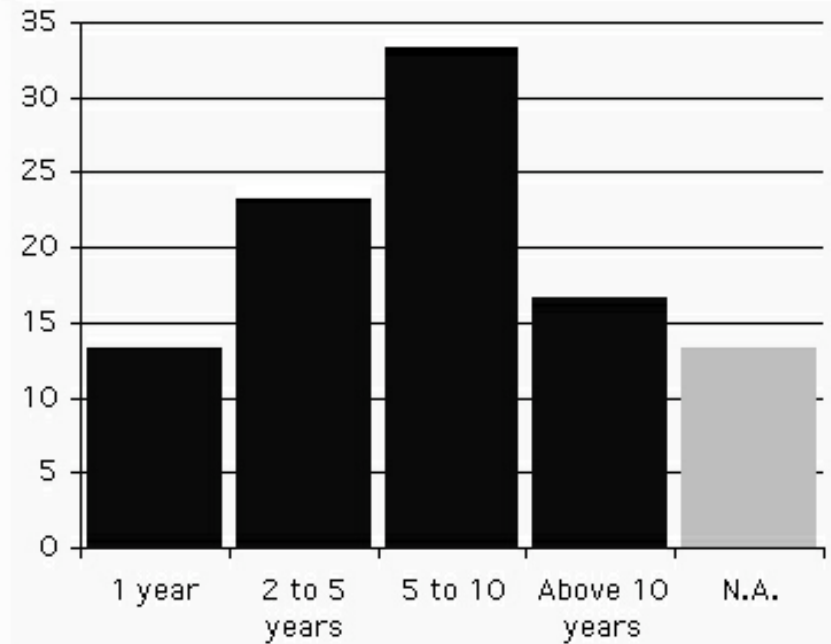
## Second Sample Survey, 2005 ( n=30) Educational Qualification of Sample Nurses

Degree/Diploma	Frequency	Percent
Four-years B.Sc. (Honours in Nursing) Degree	5	16.7
<b>Three-years Diploma in Nursing</b>	<b>25</b>	<b>83.3</b>
Total	30	100

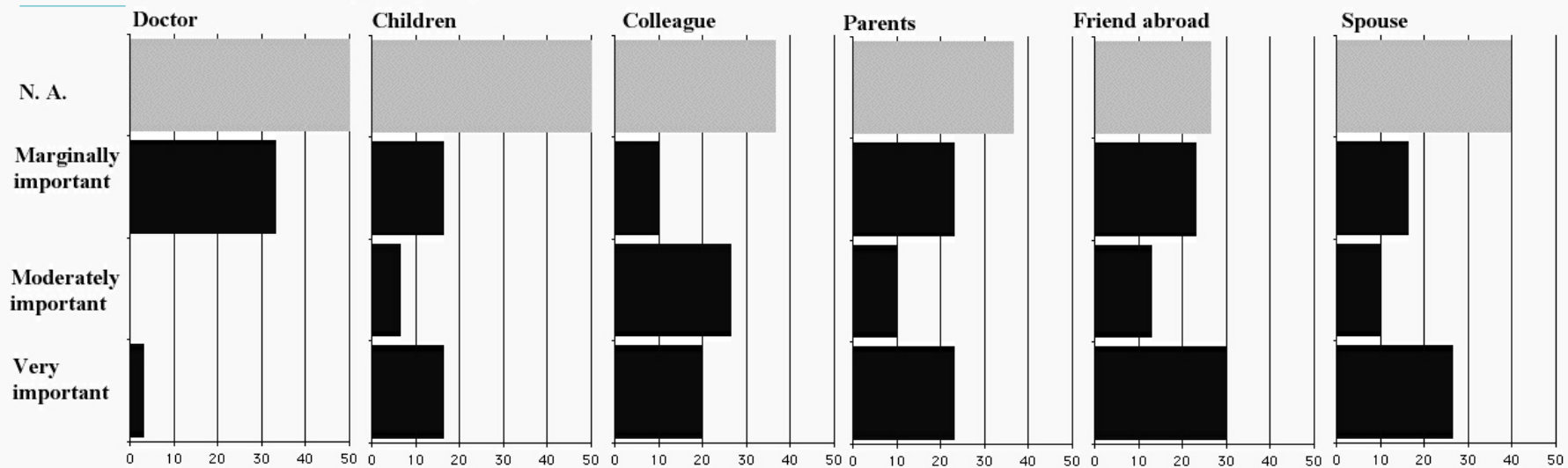
**Fig 8: Age range of nurses**



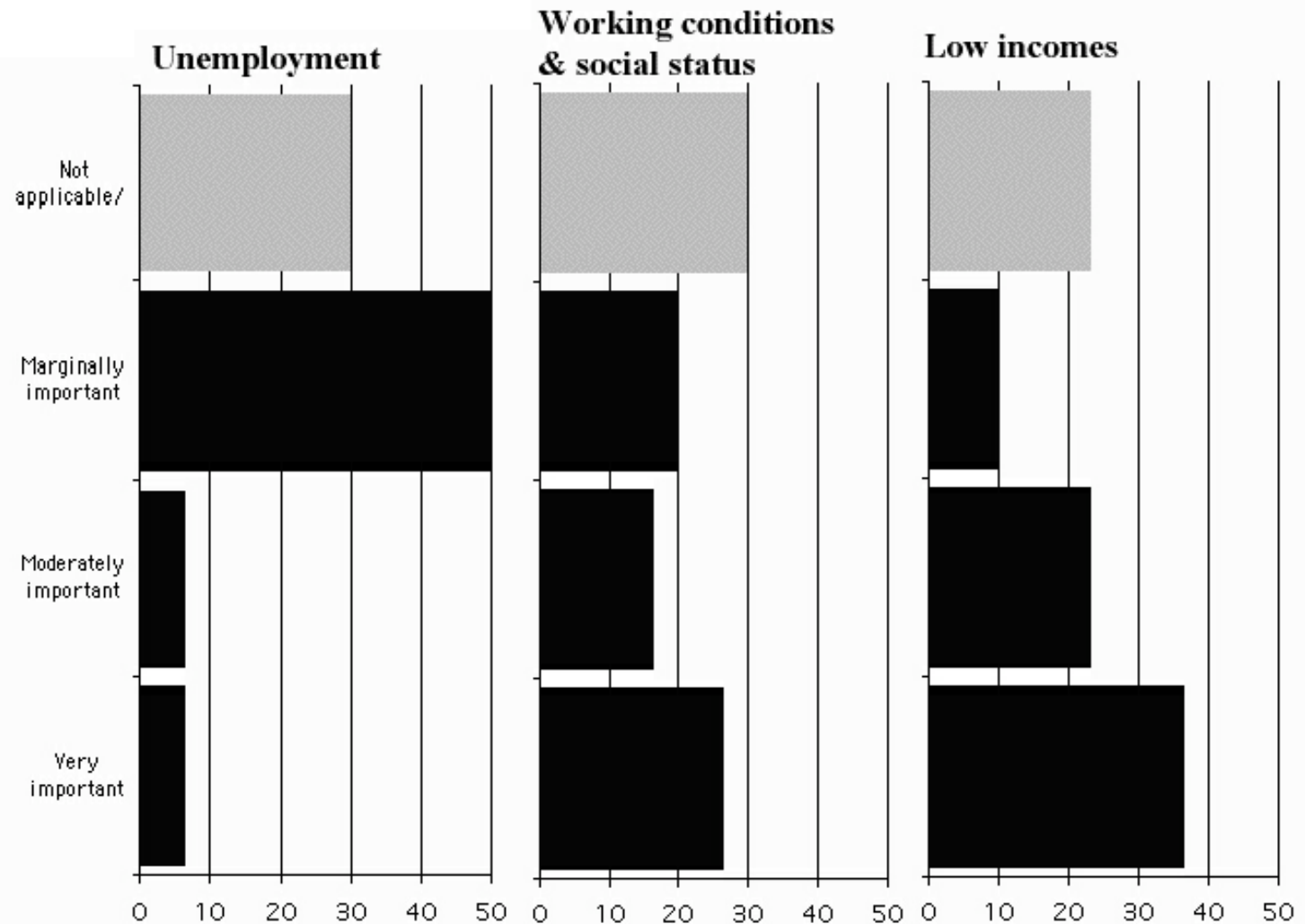
**Fig 10: Work experience of aspiring migrant nurses**



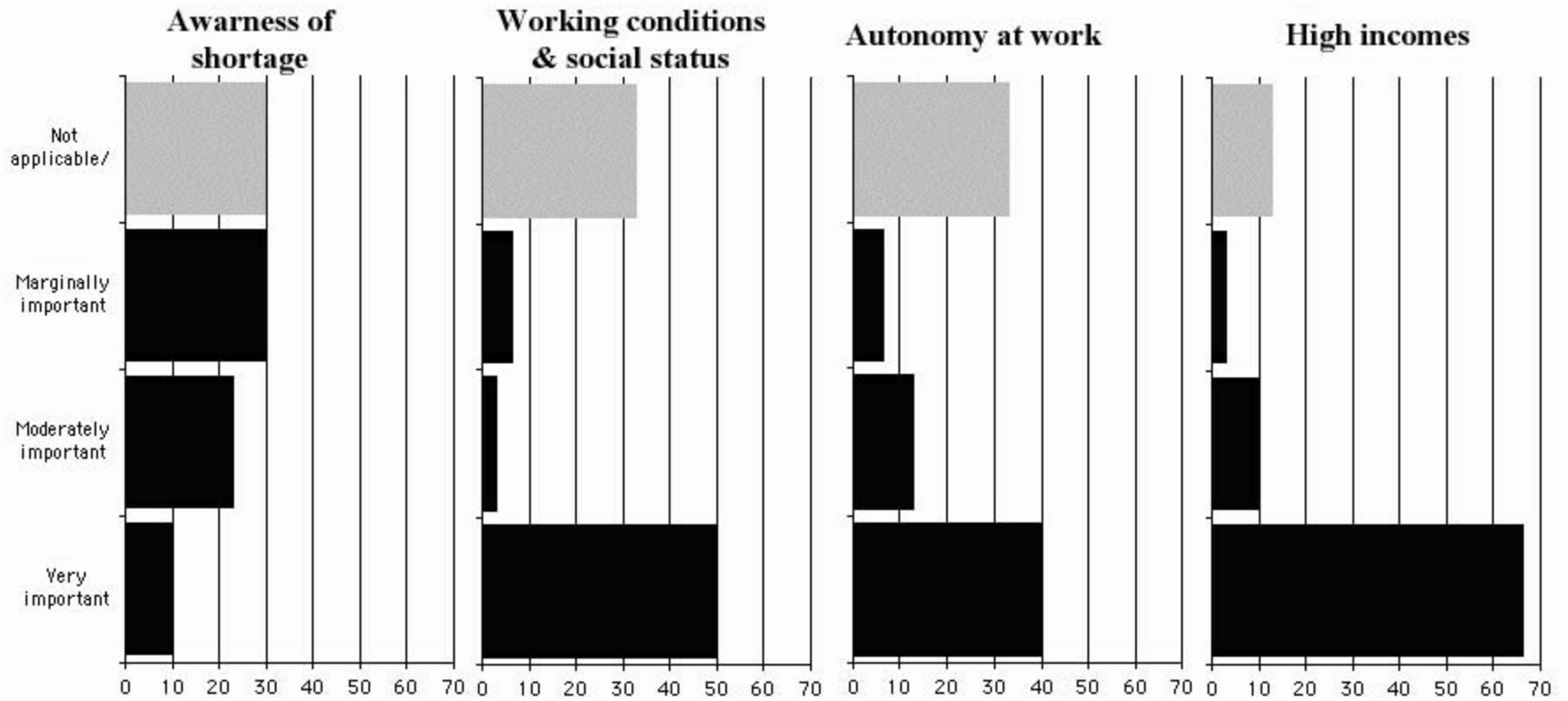
**Fig 17: Motivators in Inspiring migration**



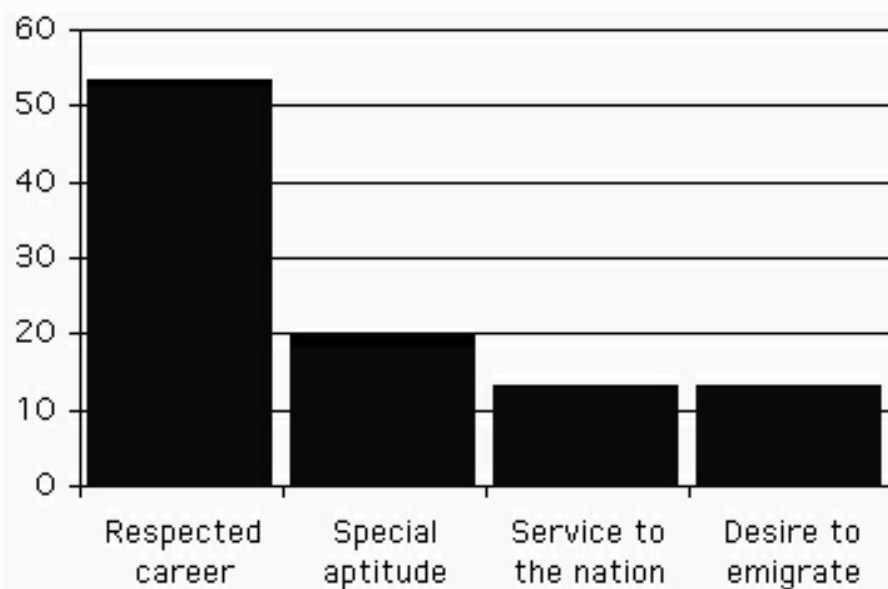
**Fig 15A: Ranking of Push factors (%)**



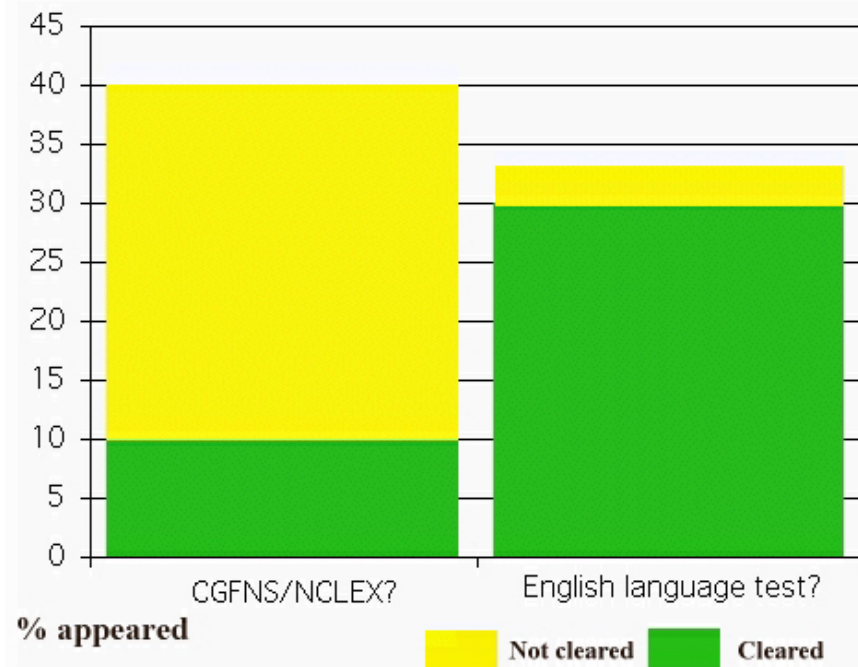
**Fig 15B: Ranking of Pull factors (%)**



**Fig 13: Why nursing career?**



**Fig 14: Preparation for emigration**



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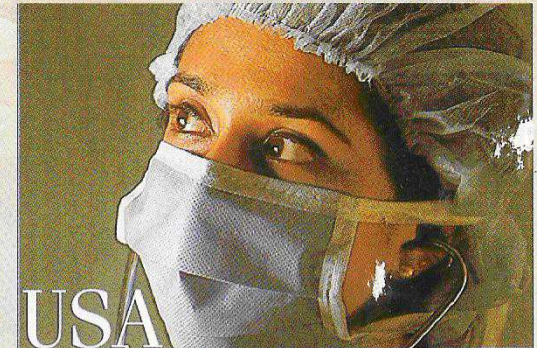


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## How Nurses Assess and Perceive a Training-cum-Recruitment Agency

*Why did you select this institution for the recruitment process?*

<b>Why this institute?</b>	<b>Frequency</b>	<b>Percentage</b>
<b>Better track record</b>	<b>13</b>	<b>46.4</b>
Convenience	1	3.6
By chance	1	3.6
Good study facilities	7	25.0
Any other	6	21.4
Total	28	100.0

*Do you know about other institutions engaged in the same process?*

<b>Knowledge of other institutions</b>	<b>Frequency</b>	<b>Percentage</b>
<b>Yes</b>	<b>15</b>	<b>53.6</b>
No	13	46.4
Total	28	100.0

*Are you paying any fee to Max Health Staff for the coaching?*

<b>Paying Coaching fee?</b>	<b>Frequency</b>	<b>Percentage</b>
Yes	5	17.9
<b>No</b>	<b>23</b>	<b>82.1</b>
Total	28	100.0

# Time Management by Nurses between Work and Coaching

*Are you working?*

<b>Are you working?</b>	Frequency	Percentage
<b>Working</b>	<b>23</b>	<b>82.1</b>
Not working	5	17.9
Total	28	100.0

**How are you able to manage both – coaching and working?**

How managing?	Frequency	Percentage
After Duty hours	9	32.1
<b>After duty and also taking leave</b>	<b>14</b>	<b>50.0</b>
Not applicable/not mentioned	5	17.9
Total	28	100.0

## Nurses' Knowledge of Bond Agreement & Other Provisions

### Do you know the institution/hospital in US where you would work as per the agreement?

Agreement institution	Frequency	Percentage
Yes	4	14.3
<b>No</b>	<b>24</b>	<b>85.7</b>
Total	28	100.0

### Is there any provision for visas to your family (Spouse and children) in the agreement?

Family visa provision	Frequency	Percentage
<b>Yes</b>	<b>20</b>	<b>69.0</b>
No	9	31.0
Total	29	100.0

### Do you know the expected salary provisions abroad (in dollars per hour, Min. and Max)

Salary per hour	Frequency	Percentage
<b>Minimum salary</b>		
<b>\$ 15 to \$ 20</b>	<b>5</b>	<b>17.2</b>
<b>\$ 20 to \$ 25</b>	<b>10</b>	<b>34.5</b>
Not mentioned/ not applicable	14	48.3
Total	29	100.0
<b>Maximum salary</b>		
<b>\$ 20 to \$ 25</b>	<b>7</b>	<b>24.1</b>
<b>\$ 25 to \$ 30</b>	<b>6</b>	<b>20.7</b>
<b>More then \$ 30</b>	<b>2</b>	<b>6.9</b>
Not mentioned/ not applicable	14	48.3
Total	29	100.0

## ...Bond Agreement and other provisions

### Do you know if social security would include health, education and accommodation etc.?

Social security provision	Frequency	Percentage
Yes	8	27.6
<b>No</b>	<b>10</b>	<b>34.5</b>
Not applicable	11	37.9
Total	29	100.0

### Are the social security provisions implicitly included in the salary package?

Social security in salary package	Frequency	Percentage
<b>Yes</b>	<b>9</b>	<b>31.0</b>
<b>No</b>	<b>9</b>	<b>31.0</b>
Not applicable	11	37.9
Total	29	100.0

### Are you going for permanent migration?

Permanent migration	Frequency	Percentage
<b>Yes</b>	<b>17</b>	<b>58.6</b>
No	8	27.6
Not sure/don't know/cant say	4	13.8
Total	29	100.0

# Stock Indicators of Select Health Care Resources in India: 1951, 1981, 2003

	1951	1981	2003	(Ref Period/Source)
Dispensaries and Hospitals (all)	9,209	23,555	38,031	(2004)
SC/PHC/CHC <sup>1</sup>	725	57,363	163,196	(January 1, 2002-CBHI <sup>3</sup> )
Hospital Beds (Private and Public)	117,198	569,495	914,543	(2004, MCI <sup>4</sup> )
Doctors (Modern allopathic)	61,800	268,700	625,131	(January 1, 2002-CBHI <sup>3</sup> )
<b>Nursing Personnel</b>	<b>18,054</b>	<b>143,887</b>	<b>836,000</b>	<b>(March 2002-RHS<sup>2</sup>)</b>

*Notes:*

1. SC/PHC/CHC- Sub-Centres/Primary Health Centres/Community Health Centres.
2. RHS- Rural Health Statistics
3. CBHI- Central Bureau of Health Intelligence
4. MCI- Medical Council of India

*Source:* As collated by the *Economic Survey 2004-2005*, Government of India.

# Double bias in Nursing Education

GOVERNMENT OF N.C.T. OF DELHI  
**GURU TEG BAHADUR HOSPITAL**  
(SCHOOL OF NURSING) DILSHAD GARDEN, DELHI - 110 094  
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## ADMISSION NOTICE

Applications are invited for admission to three & half year Diploma Course in General Nursing and Midwifery course from unmarried or widowed without encumbrances female candidates on prescribed form attached with prospectus and obtainable from the office of Principal, School of Nursing, Guru Teg Bahadur Hospital, Govt. of N.C.T. of Delhi, Dilshad Garden, Delhi-95 on payment by Demand Draft of Rs. 100/- (Rs. One Hundred only) drawn in favour of Medical Superintendent, GTB Hospital from 6.6.05 to 20.6.05 between 10.00 AM to 1.00 PM working days (Monday to Friday). The form can also be downloaded from hospital's website and can be submitted in Principal's office along with DD for Rs.100/- as mentioned above.

**Seats available - 45** (inclusive of 3 ST category seats, to be reallocated)

State	U.R.	S.C.	Destitute	Remark
Delhi	27	08	02	Destitute seat is open to the candidate nominated by Directorate of Social Welfare, Govt. of NCT of Delhi only.
Outside Delhi	05	01	-	

Reservation under ST category is not admissible in Delhi as per court order. Three seats under ST category shall be temporarily reallocated to U/R/SC category, till final decision in this matter.

**ELIGIBILITY:** The candidate must fulfil the following conditions.

**QUALIFICATION:** The candidate must have passed 10+2 examination or its equivalent from a recognized board/University with minimum of 45% marks. Relaxation of 5% marks shall be admissible to candidate belonging to SC category.

**AGE LIMIT:** Minimum age of candidate will be 17 years and above 22 years as on 1st August, 2005. Upper age relaxation for SC candidate is admissible upto 5 years.

**SELECTION CRITERIA:** The selection shall be strictly on the basis of aggregate % of marks in best four subjects out of Physics, Chemistry, Biology, English, Home Science, Hindi, Economics, Commerce, Sociology, Psychology, Geography, History, Political Science, Mathematics. **WEIGHTAGE** of 5% will be admissible to the candidate who have passed 10+2 examination with Physics, Chemistry and Biology/ANM.

**CLOSING DATE:** Application form duly completed in all respect with attested photocopies of all certificate should reach to the office of Principal, School of Nursing, GTBH, Delhi-95 by 20.6.05 upto 1.00 PM. The photocopies of application profoma/incomplete application will not be entertained.

**MERIT LIST:** The list of selected and wait listed candidates shall be displayed on the notice of school of Nursing on 15.07.2005 as well as on hospital website.

Selected candidates shall have to deposit their original 10th and 12th certificates and mark sheet along with the character certificate at the time of admission. The seat will be offered to next candidate in waiting list if any candidate fails to deposit the above said documents, in original, by the closing date. No correspondence shall be entertained in this regard.

Admission will be confirmed only after verification of original certificates from CBSE/Exam. Board.

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# Double bias in Nursing Education

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Saturday, June 4, 2005  
Hindustan Times, New Delhi

More on the Web  
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16

Thursday, June 9, 2005  
Hindustan Times, New Delhi

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Applications are invited from unmarried females, widows, divorced candidates without any encumbrances and satisfying the following conditions for admission to three & half year Diploma Course in General Nursing and Midwifery commencing from 1st August 2005. The reservation for S/C & S/T candidates will be as per Government Rules out of the Total no. of seats made available for admission.

**Age:** 17 years to 22 years as on 31st July 2005 (Upper age limit relaxable up to 5 years in case of S/C & S/T candidates and up till 35 years for Auxiliary Nurse Midwives).

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### Date for sale of prospectus

15th June 2005 - 25th June 2005 by hand or by post between 10.00 A.M. and 12.00 Noon on all working days.

Dates for receipt of complete application forms (by post only) till 30th June 2005 at 4.00 P.M. "NO COURIER SERVICES WILL BE ENTERTAINED" Candidates will be required to appear for written test and successful candidates will be interviewed for final selection.

**NOTE:** Incomplete application will not be entertained and no further correspondence will be made in this regard. No TA/DA will be paid for appearing in the test/interview. It is in the interest of the candidates to send the application through Registered/Speed Post to avoid any delay.

davp 7554(4)2004

(1010553\_1)

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### PANNA DAI SCHOOL OF NURSING

Applications are invited for admission to Three & a Half Years **General Nursing & Midwifery Course** from unmarried or widowed female candidates on the prescribed form which is attached with the Prospectus obtainable from **School of Nursing, DDU Hospital on payment of Rs. 100/- (Rupees One Hundred only) by cash (Non-refundable)** to be deposited at the counter between 10 AM & 1 PM on all working days except Saturdays and other holidays from 13.06.2005 to 24.06.2005. The candidate should fulfill the following conditions:

1. **QUALIFICATIONS:** The candidate should have passed 10+2 Examination or its equivalent from a recognized Board/University with 50% or more marks in the aggregate of best of four subjects which are English, Psychology, Geography, History, Political Science, Home Science, Hindi, Economics, Commerce, Sociology, Mathematics, Physics, Chemistry and Biology and must have passed in each subject. Relaxation of 5% marks will be given to candidates belonging to Scheduled Caste / Scheduled Tribes.

Preference will be given to the candidates who have passed the examination with Science (Physics, Chemistry and Biology combined only) / ANM. 5% marks will be added to their aggregate and then their names will be entered in the Merit List.

2. **AGE LIMIT:** Age should not be below 17 years and more than 22 years as on 1st August, 2005. Upper age relaxation for SC / ST candidates is 5 years.

### 3. NO. OF SEATS: 25 Seats

- 85% seats are reserved for candidates who have passed 10+2 or its equivalent exam from Delhi, out of which 5% is reserved for destitute girls from Directorate of Social Welfare, Delhi Administration, Delhi.
- Rest 15% of seats are reserved for candidates who have passed 10+2 or its equivalent exam from outside Delhi.
- Out of the above categories - 15% seats are reserved for SC candidates. 7½% seats are reserved for ST candidates from outside Delhi only. Reservation under ST category is not admissible in Delhi as per High Court Order.

### 4. DISTRIBUTION OF SEATS

Delhi : 85% (General-17, SC-03, Destitute-01)  
Outside Delhi : 15% (General-02, SC-01, ST-01)

5. Admission will be confirmed only after verification of Original 12th Mark sheet from CBSE / Examination Board.

Application forms duly completed in all respect along with copies of certificates should reach the office of School of Nursing, DDUH, Delhi by 24.06.2005, Friday 4.00 PM. Incomplete applications will be summarily rejected.

Sd/  
MEDICAL SUPERINTENDENT  
DEEN DAYAL UPADHYAY HOSPITAL

DIP/358/2005-06



## Dichotomy, Risks, and Challenges

### There is a dichotomy between:

- Indifference of public policy makers to international recruitment of nurses in India.
- Enthusiasm of private commercial agencies to engage in BPO in this sector.

### Serious risks are:

- Selective depletion and imbalance of HR in health sector.
- Critical requirement is to collect and analyze the data on production, employment and mobility, and retention of nurses in India.

### India is faced with a double challenge:

- Producing more nurses for emigration.
- Filling nurse vacancies within India.

# Future Tense: Nurses in onshore BPO?

## Wanted: Doctors, nurses in BPOs

### Healthcare outsourcing is the new buzz

Suprotip Ghosh and Venkatesh Ganesh  
Mumbai, April 14

A TEAM of nurses and paramedics led by two doctors in Noida are busy studying profiles of elderly patients to prepare risk reports for insurance companies.

Nothing unusual about this scenario except that the patients and the insurance companies are 15,000 km away — in the US.

More and more outsourcing firms in India are now hiring medical professionals — doctors and nurses — as they look for new areas of business to supplement shrinking incomes from sectors that have traditionally opted for outsourcing, like finance and banking.

Noida-based BPO Xansa deals with the insurance and legal aspect of settling medical claims. "We have a team of doctors, equipped with a specialised skill set, who

assess prognosis, underwrite and evaluate the mortality rate of customers and the risk involved," said Arijit Chandra, senior transition manager. He added that most medical outsourcing business takes place in Bangalore.

Four other outsourcing firms — Wipro BPO, TCS, Cognizant and HCL — told Hindustan Times that they are hiring doctors, nurses and paramedics. About 16-18 people come on board every month, said officials, though at the moment, companies are reluctant to reveal the exact figures.

The pay obviously depends on experience and quality of work done, but it's common for these BPOs to offer the doctors double of what they have been making. So, the average salary could start from Rs 45,000 and go up to Rs 3 lakh per month, said industry sources.

Continued on Page 16



### CARRY ON, DOCS

**THOSE WITH** pharmacy, medicine, dentistry, nursing, homeopathy, degrees in demand

**RS 50,000 CR** is the total Indian BPO sector revenue for 2007-08.

**RS 1.54,000 CR** is estimated expense of US healthcare sector on outsourcing

## Doctors, nurses wanted in BPOs

Continued from Page 1

The perks are many for doctors who are used to putting in anywhere between 16 to 18 hours daily at public hospitals. "The timings are decent," said a 32-year-old doctor who joined Wipro's BPO recently after practising for three years at a Chennai clinic. "A doctor's salary is meagre, and there's no way I can start my own practice considering the high cost of setting up a clinic. This is a good option." He used to earn Rs 25,000 a month, now his salary is Rs 45,000.

It's a good alternative for BPOs too. As the US heads towards recession, business from financial services does not look promising. But the healthcare sector, particularly for senior citizens, has remained untouched. "The US is getting older, and insurance companies need to keep track of the health of their elderly clients," said Sanjay Kapur, senior vice-president and head, Pami BPO, the business process outsourcing arm of Mumbai-based Patni Computer Systems.

In 2006, the US had over 3.74 crore people over 65 years for whom the state spent close to \$401.2 billion (Rs 16 lakh crore) as per US census data. The spend is growing by 18.6 per cent every year, says Patni.

With inputs from Nivedi Butalia  
suprotip@hsh.Indiatimes.com

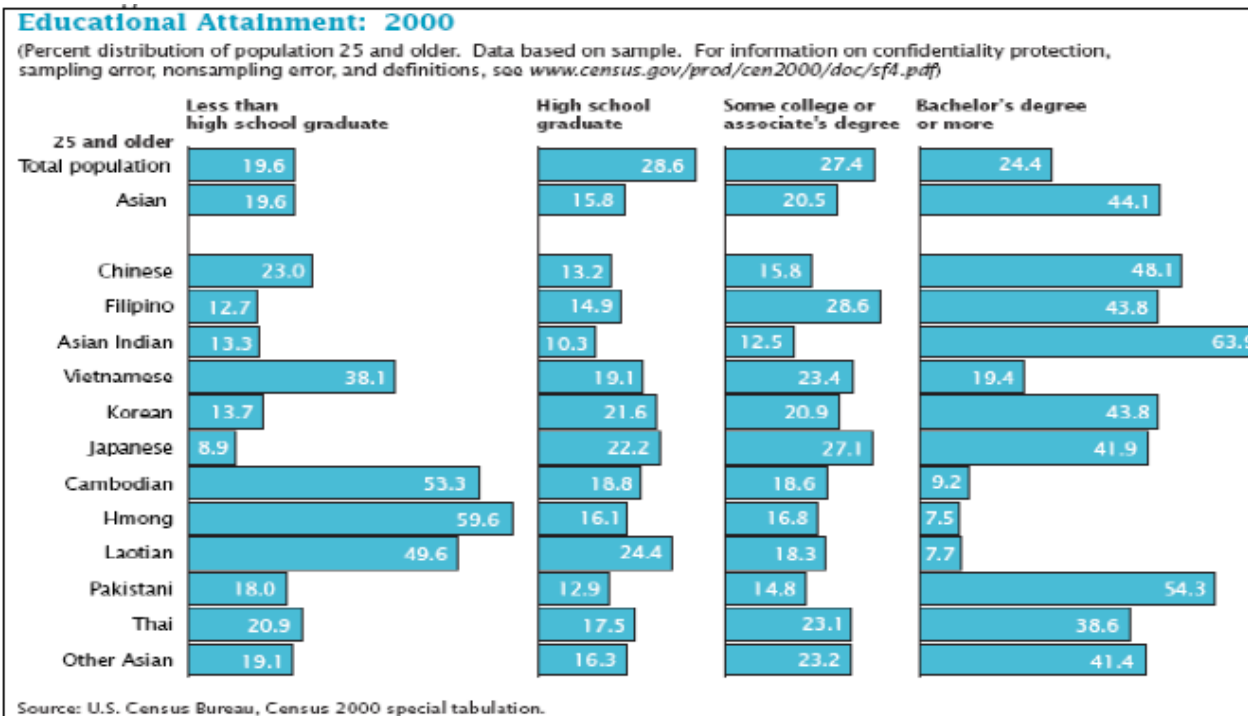
Hindustan Times

Thank you

## **Comparative Perspective on Generic Skill Migration: Outflow of Indian Students in the US (2001-2003)**

<b>Years</b>	<b>Indian Students admitted in the US</b>	<b>% of Indian in All Asian</b>	<b>All Asian Students</b>	<b>% of Indian in all foreign</b>	<b>All Foreign Students</b>
2001	48,809	12.34	395,511	6.99	698,595
2002	48,708	14.05	346,672	7.79	624,917
2003	48,708	13.95	364,753	7.88	646,016

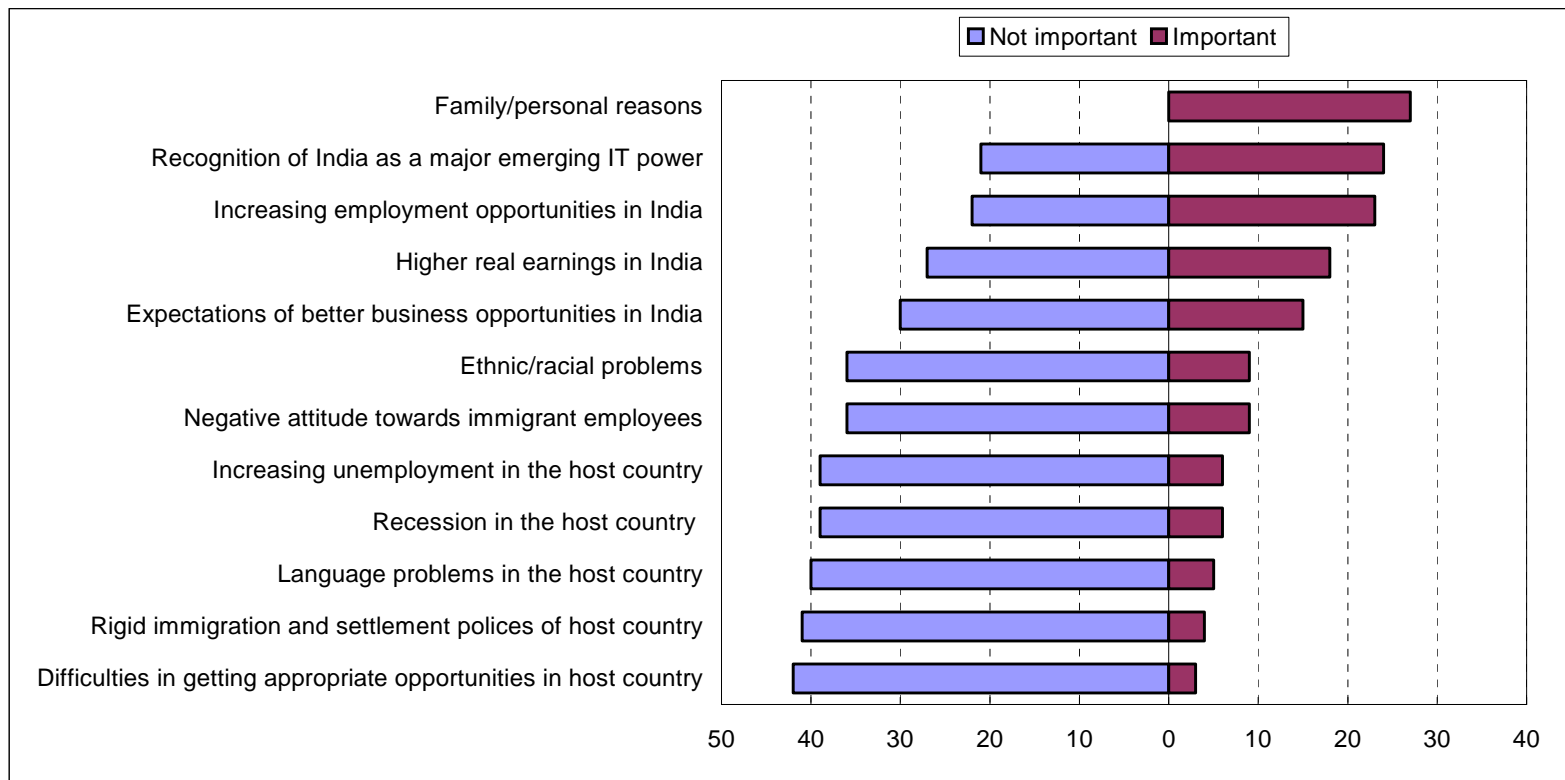
# Educational Profile of Indians in the US:



# Comparative Perspective on Generic Skill Migration: Motivating factors for out-migration of returned IT Professionals in Bangalore



# Comparative Perspective on Generic Skill Migration: Enticing factors in the Return of IT Professionals to City of Bangalore:



# Comparative Perspective on Generic Skill Migration: Motivating factors for out-migration of doctors

