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Migrant Nurses Need More Support

Article in The New Zealand nursing journal. Kai tiaki · June 2016

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Migrant nurses need more support



By Jed Montayre

hen I first came to New Zealand in 2011 to practise nursing, the message resonating was that New Zealand needed internationally qualified nurses (IQNs). The process of becoming an IQN was a considerable personal journey, including gaining registration, and its associated costs, severing family ties, assimilating into a new culture – all these factors must be considered by IQNs.

I consider myself and my international migrant nursing peers to have contributed to the so-called "international migration" of health professionals, in particular nurses. The international migration of nurses, in response to global and specific country nurse shortages, fuelled by ageing and chronicity of conditions of given populations, is a well-researched phenomenon. However, there are still some grey areas that need to be addressed. One of these is examining how countries in need of nurses attract and retain IQNs in the future.

Push and pull factors

Globally, countries such as the United States have estimated a further 1.2 million nurses will be required in the next five to 10 years.¹ In the United Kingdom, approximately 50 per cent of the current nursing workforce are predicted to retire by 2025.² Similar patterns of an ageing nursing workforce and rapidly ageing populations requiring long-term care, appear in Canada, Australia and Middle Eastern and European countries.^{3,4} The push and pull factors of host and destination countries for migrant nurses are complex. They include prospects of improved salaries, which flow through to families back home, better career prospects and a better life for one's children.

The World Health Organization (WHO) health workforce mobility centres view IQNs as complementary to the current and projected nursing workforce of their host societies.⁵ Yet, 27 per cent of the New Zealand nursing workforce is composed of IQNs.⁶ It is further projected there will be an increased need for more migrant nurses within the next few decades.⁷ The recruitment, assimilation and retention of IQNs within the New Zealand nursing workforce must be explored.

IQNs are considered experienced nurses but they are not necessarily experienced in the New Zealand workforce and socio-cultural context. Commonly, IQNs work in a very different healthcare environment, with a different model of health-care delivery and different political and cultural paradigms from their country of origin. They often

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work in agedcare facilities. But in my case, as a migrant nurse from the

nurse from the Philippines, I did not have experience in aged care, as aged care is not formally institutionalised in the Philippines. This is due to other more pressing health-care issues and because older people are traditionally cared for by thei

older people are traditionally cared for by their families. While all registered nurses are generally prepared for global practice, IQNs still require a high level of support during their transition to professional practice here.

The competence assessment programme (CAP) is part of IQN support and preparation for New Zealand nursing registration. However, more support in the clinical environment and from employers such as district health boards and, specifically, private health-care providers, is critical.

Support for IQNs as they transition to New Zealand workplaces is commonly at least four to six weeks of structured orientation and preceptorship. They are then deemed ready to practise independently within a supportive environment. While this process works well for most IQNs, it is not the case for everybody. Formal workplace programmes to support IQNs during their transition stages have been shown to have a considerable impact on overall satisfaction in work environments, and to increase staff retention.₈ Lack of support has been shown to lower self-esteem and increase feelings of isolation among IQNs.₉ The support needed ranges from work-related information to new clinical skills and cultural orientation. I remember being asked by an IQN, new to the clinical environment, "What does it mean when a patient responds to my question about how they are feeling, saying a 'box of fluffies' "? Perhaps common Kiwi expressions and idioms should be a part of the orientation programme.

IQNs will stay in their destination countries if they feel supported and valued. One way to attract IQNs is to make them feel welcome and to help them advance their nursing careers. While it is common thinking that nurses migrate to seek better pay, what has not been examined are the incentives of improved professional and career pathways.₁₀ IQNs contribute positively to the future of the nursing workforce and multi-cultural patient care settings. In New Zealand, most IQNs are in the younger age groups,₆ making future

workforce planning a little easier. As an IQN myself, as well as a

nursing lecturer, I have devoted my career to the education of future nurses who will shape the nursing profession of this country. I am a firm believer that New Zealand should train more nurses. However, the message I would like to convey is to increase support for IQNs, given the invaluable contribution they make to our multi-cultural health-care system. And, if they stay, they will help lessen the impact of the retirement of thousands of ageing nurses from the workforce over the next 10 years.

However, there are critical factors that need some re-thinking and planning at policy level. The following questions are paramount:

Are we producing enough New Zealand-trained nurses and how do we retain them?
What is the projected impact of the ageing population on the demand and supply of nurses, and in which nursing specialties?
Where does New Zealand stand when benchmarked with other nurse-importing countries in attracting and retaining IQNs? •

* References for the editorial are on p33.

Jed Montayre, RN, DPS, Dip Tchng, is a nursing lecturer and researcher at AUT University. He is also the chair of the research committee for the Filipino Nurses Association of New Zealand. Copyright of Kai Tiaki Nursing New Zealand is the property of New Zealand Nurses Organisation and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.