

#### **IV Ibero-American Meeting on Migration of Health Professionals (Montevideo, 17-18 November 2011)**

### **CONCLUSIONS**

- This meeting and its conclusions are part of a project begun in 2006 with the creation of the Healthcare HR Migration Working Group within the framework of the Ibero-American Health Ministers' Conference (SEGIB)<sup>1</sup> headed by the Uruguayan Ministry of Health, which, in addition to these annual meetings, conducts other activities associated with health worker migration.
- Also worth noting is the role played by the Pan-American Health Organisation (PAHO), which, through its Programme for Health Human Resources, has worked in conjunction with countries to foster responsible management of migration of healthcare professionals, and has helped to organise these meetings both from its headquarters and its regional delegations.
- We also wish to recognise and express our gratitude for the support given this process in the past three years by the "Professional Migrations – Opportunities for Shared Development"<sup>2</sup>, scheme financed by the European Union within the framework of its Thematic Programme for Cooperation with Third Countries in the Areas of Migration and Asylum, which is encouraging already-intense cooperation between the PAHO and the Working Group, along with the Andalusian School of Public Health (EASP).
- Four issues related to health worker migration and of concern to policymakers were discussed during the meeting:
  - o The working conditions of healthcare professionals in the 21<sup>st</sup> century.
  - o The code<sup>3</sup> and the consequences of its implementation.
  - o Bilateral agreements on migration of health workers.
  - o The role development aid organisations may play in this area.
- The health professional migration phenomenon underscores the need for devising strategies for retaining and securing the loyalty of health personnel as a means of safeguarding the healthcare workforce in countries that have invested in workers' training. To this end, this phenomenon should encourage efforts to improve:

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<sup>1</sup> Cologne Declaration. VIII Meeting of Latin American Health Ministers.

<sup>2</sup> Migration of Health Professionals between Latin America and Europe. Opportunities for Shared Development ([www.mpdc.es](http://www.mpdc.es)).

<sup>3</sup> *Global Code of Practice on the International Recruitment of Health Personnel*. The Code was adopted on 21 May 2010 at the 63<sup>rd</sup> World Health Assembly.

- Health workers' job conditions, with particular emphasis on social spending cuts which often arise during periods of economic crisis.
  - Adaptation of training curricula to ensure more practical and decentralised training standards based on a PHC model.
- At the same time, it should be emphasised that the priority is not to change migration flows, but rather to work to regulate them and maximise the potential benefits stemming from migration. In this regard, it is important to stress that promoting circular migration and the re-integration of returning migrant workers also contributes to improving countries' healthcare systems.
- The migration phenomenon requires multi-sector cooperation and coordination (migration, health, labour, etc.) in both sending and receiving countries in order to safeguard workers' rights during the migration process and to ensure equal treatment when they arrive in receiving countries.
- The adoption of the Global Code of Practice on the International Recruitment of Health Personnel was regarded as an excellent framework for international cooperation efforts. Its implementation requires the deployment of appropriate information systems detailing each country's healthcare workforce and migration process, and the forging of bilateral and multilateral agreements based on transparency and the pursuit of common benefits deriving from migration trends.
- The proposed guidelines for enacting the WHO's code were deemed highly complex, and an English version, made available for public consultation in Latin American countries, drew a response only from Mexico. This does not reflect the arduous work on the health worker migration issue conducted in Central and South America since 2004. Nevertheless, it underscores the fact that the initiative and the European policy framework in which it has emerged have helped to cement a common European position, which in the debate process for approving the code was followed, among others, by Spanish ministerial officials, members of the migration working group and of this initiative, fostering the code's approval during the period in which the initiative was underway.
- It is essential to encourage political dialogue and strategies for making progress on establishing registries of professionals to enable monitoring of the migration phenomenon and improve management of healthcare human resources. To this end, countries' pre-existing information systems should be tapped, bearing in mind the peculiarities of each country's system, assuming that in general these registries are controlled by professional or academic institutions and that they are either incomplete or not comprehensive. While some systems are shared with political institutions, organisers of this initiative urge health ministries to make progress on establishing professional registries using standardised shared criteria which can facilitate improved knowledge, planning

and management of the health worker labour force and of patterns in its domestic and international movements.

- The proposed framework for the Ibero-American Ministerial Network of Health Professional Migration (RIMPS)<sup>4</sup> drew approval as an instrument for continuing to build on a description of the health worker migration phenomenon and on the search for viable solutions to the issues stemming from it. The RIMPS will continue to enjoy the support of the PAHO and WHO during this initial phase of its development. Uruguay plays the lead role in promoting the RIMPS and organising meetings of member countries.
- The RIMPS was praised as an instrument for implementing the code by creating and cementing a space for political and technical dialogue in keeping with the code's recommendations for strengthening international dialogue, in this case in a geographic region as large as Latin America.
- Specific examples of bilateral agreements between countries in the region and other countries outside the region were presented, such as an agreement between the governments of Uruguay and Portugal, which offer inputs suitable for replication among other countries after they are tailored to suit different countries' individual situations.
- Also insisted upon was a need for seeking compensation mechanisms, not only for countries but also for educational institutions themselves.
- The results of the study were analysed with experts in development aid, highlighting, on one hand, the prevailing consensus on possible intervention strategies from the bilateral and multilateral aid standpoint -primarily in sending countries, but also in receiving countries-, underscoring the benefits the process produces on both sides, which should be encouraged, as well as the drawbacks, which must be controlled. On the other hand, the difficulty of integrating health/aid sector policies in funding countries was highlighted, as it must be tackled through a dialogue focusing on the need for addressing the imbalances generated by health worker migration. These processes must be geared towards addressing planning deficits and shortages of an adequate workforce in countries that recruit such labour.
- The European action's initiative to improve health planning processes and the quality of the planning manual drew praise. Recommendations included adapting and replicating the first online course currently in development to enable it to be repeated in the region in coming years, as the planning deficit issue is deemed a critical area for improvement in coming years.
- The final results of the "Migration of Health Professionals between Latin America and Europe. Opportunities for Shared Development," funded by the

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<sup>4</sup> [www.mpdc.es/mapas/mapas/otrosdocumentos/documentos/PropuestaMarcoRIMPS/index.html](http://www.mpdc.es/mapas/mapas/otrosdocumentos/documentos/PropuestaMarcoRIMPS/index.html)

European Union, were presented and are available at the following link:  
<http://www.mpdcc.es/mapas/mapa.html>

- Consortium member institutions were urged to continue the efforts made so far and to attempt to obtain additional funding to pave the way for progress on specific strategies for creating bidirectional flows deriving from migration trends, which may serve as models for best practices for subsequent replication, if successful.