

## Migration News in Brief

### ICN Forum: Nurse Staffing Cuts a Risk to Patients, Society

At the 19th International Council of Nurses Workforce Forum held on October 28, 2013, nurse leaders warned that nurse staffing levels are dangerously low and called for governments and employers to protect communities by providing safe nurse staffing levels to ensure quality-assured patient outcomes.

Forum delegates expressed concerns about budget cuts and staffing moratoriums and encouraged nurses to speak out, to draw attention to unacceptable working conditions and other barriers to quality patient care. Nurse staffing affects the length of hospital stays, morbidity and mortality and the patient's reintegration into the community.

The forum topics included safe staffing levels, the 24/7 work environment within the continuum of care and the economic value of nurses to society.

The key principles of the policy statement on safe staffing, was highlighted at the Forum. These include but are not limited to,

ensuring the safe delivery of patient care, reflecting the skills, experience and knowledge required to administer patient care and achieving safe staffing levels by using informed up-to-date evidence between staffing, patient outcomes, service efficiency and effectiveness.

Sources:

<http://news.nurse.com/article/20131031/NATIONAL06/110310053/0/ALL04#.UoKYitwo7cs>

<http://news.nurse.com/article/20130725/NATIONAL06/107290022/0/frontpage#.UoKPHNwo7ct>



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## Momentum for Human Resources for Health (HRH) Grows Ahead of the Third Global Forum

Significant strides in achieving Millennium Development Goals (MDGs) preceded the Third Global Forum on Human Resources for Health (HRH), November 9-13, 2013 in Recife, Brazil.

In September, at the 68th United Nations General Assembly (UNGA) held in New York, world leaders reaffirmed their commitment to “Every Woman Every Child,” a movement launched in 2010, by the UN Secretary-General, Ban Ki-moon, to marshal global action on women’s and children’s health.

Various side conferences also provided opportunities for countries and non-governmental organizations (NGOs) to discuss issues related to global health. Case studies and reports were provided on the importance of frontline health workers for the achievement of the MDGs and universal health coverage.

Ethiopia was widely praised for reaching a developmental goal of reducing child mortality, at a conference assembled by The Global Health Workforce Alliance Partner, Johnson and Johnson, titled “Promising Practice: Working Together to Strengthen the Healthcare Workforce.” The Health Extension Worker (HEW) initiative enabled training and deployment of more than 36,000 community health workers.

A case study on HRH development in Malawi demonstrated that the Emergency Human Resource Programme (EHRP), launched in 2004 by the Government of Malawi in collaboration with development partners, provided resources which contributed



Third Global Forum on  
Human Resources for Health  
10 - 13 November 2013  
Recife, Brazil

to the increase of health workers, saving 13,000 lives. Malawi is now on track in reducing child and maternal mortality rates.

Nurses and midwives being the largest group of health professionals recognize their role and responsibility in achieving the goal of Universal Health Coverage (UHC). With that in mind those present at the 3rd Global Forum on Human Resources for Health collaborated on and drafted a document which outlined their commitment. The document addressed issues related to policy, practice, education, leadership and management where nurses and midwives will work with others in advancing UHC

Sources:

[http://www.icn.ch/images/stories/documents/news/press\\_releases/2013\\_PR\\_19\\_Global\\_Health\\_Forum.pdf](http://www.icn.ch/images/stories/documents/news/press_releases/2013_PR_19_Global_Health_Forum.pdf)

*Momentum for HRH grows ahead of the Third Global Forum.* <http://www.who.int/workforcealliance/media/news/2013/iERG2013/en/index.html>

*Country Case Study, Malawi.* [http://www.who.int/workforcealliance/knowledge/case\\_studies/CS\\_Malawi\\_web\\_En.pdf](http://www.who.int/workforcealliance/knowledge/case_studies/CS_Malawi_web_En.pdf)

*2nd Report of the independent Expert Review Group (iERG) on Information and Accountability for Women’s and Children’s Health.* [http://www.who.int/woman\\_child\\_accountability/iERG/reports/2013/en/index.html](http://www.who.int/woman_child_accountability/iERG/reports/2013/en/index.html)

*2nd Report of the independent Expert Review Group (iERG) on Information and Accountability for Women’s and Children’s Health.* [http://www.who.int/woman\\_child\\_accountability/iERG/reports/2013/en/index.html](http://www.who.int/woman_child_accountability/iERG/reports/2013/en/index.html)

## Global Health Workforce Alliance Members’ Platform Regarding the WHO Global Code of Practice

“Massive gains on health worker migration could be lost,” stated authors Dr. Francis Omaswa, Executive Director of the Centre for Global Health and Social Transformation (ACHEST), Chair of the African Platform on Human Resources for Health and Lord Nigel Crisp, Independent member of the House of Lords and former Chief Executive of the UK’s National Health System (NHS).

This article, originally published by the Global Health Workforce Alliance, speaks to the victory on global health policy and the challenges of implementing the global codes of practice on the international recruitment of health personnel. Due to staff reduction at the World Health Organization (WHO), there is a

danger that this initiative may fall low on the list of priorities. There needs to be a renewal of the 2010 commitment as there are varying levels of implementation across countries and regions.

The core aims of the Code are to improve domestic health workforce policy and planning, support a sustainable approach to health worker recruitment, and to assert equal rights for migrant health workers and improving health workforce metrics and monitoring.

Source: <http://www.aspeninstitute.org/policy-work/global-health-development/news/massive-gains-health-worker-migration-could-be-lost>

# Migration News in Brief

## Monitoring the Implementation of the WHO Global Code of Practice on International Recruitment of Health Personnel

Authors: Amani Siyam, Pascal Zurn, Otto Christian Rø, Gulin Gedik, Kenneth Ronquillo, Christine Joan Co, Catherine Vaillancourt-Laflamme, Jennifer dela Rosa, Galina Perfilieva & Mario Roberto Dal Poz.

The WHO Global Code of Practice on the International Recruitment of Health Personnel (“the Code”) was adopted in 2010 by all 193 Member States of the World Health Organization (WHO). The Code was formed as a global framework for dialogue and cooperation on issues concerning health personnel migration and the strengthening of the health system. The guiding principle is that everyone has a right to the highest attainable standard of health and that all individuals, including health workers, have the right to migrate from one country to another in search of employment.

Every three years, Member States are to report to the Secretariat, on measures taken to implement the Code, as well as the challenges and accomplishments experienced to demonstrate how the objectives are being achieved. In order to monitor its implementation, WHO requested that Member States designate a national authority to facilitate an exchange of information.

Out of the eighty-five countries that selected national authorities, fifty-six countries reported on the status of implementation.

Of these, thirty-seven countries had taken steps towards implementing the Code, primarily by engaging relevant stakeholders.

In 90% of countries in compliance, the principle of the Code is being achieved. Migrant health professionals are enjoying the same legal rights and responsibilities as nationally trained health personnel. A greater collaboration among state and non-state actors is needed to raise awareness of the Code and reinforce its relevance.



## World Health Organization

Sources:

*Abstract:* <http://www.who.int/bulletin/volumes/91/11/13-118778-ab/en/index.html>

*Article:* <http://www.who.int/bulletin/volumes/91/11/13-118778/en/index.html>

## Early Implementation of WHO Recommendations for the Retention of Health Workers in Remote and Rural Areas

Authors: James Buchan, Ian D Couper, Viroj Tangcharoensathien, Khampasong Thepannya, Wanda Jaskiewicz, Galina Perfilieva & Carmen Dolea

With an already existing shortage of health care workers, an unequal distribution between urban and rural areas can create a dramatic impact, barring access to health services and universal coverage. This leads to high mortality rates, overcrowding of urban health facilities as the rural population seeks health care where available, and cost increases at urban hospitals. As there are higher levels of staff in urban area health facilities, there is the risk of underutilization of skilled personnel who may consider emigration to seek better employment opportunities, wages and working condition abroad.

The World Health Organization (WHO) addressed these concerns by issuing global recommendations on recruitment and retention of the health workforce. This article captures the

experiences and lessons learned in regards to the implementation of those recommendations, from two countries, The Lao People’s Democratic Republic and South Africa. It also provides a broader perspective from Asia and Europe.

From the perspective of a country’s implementation, the use of the recommendations facilitated a structured, focused dialogue on policy leading to the development of more relevant evidence-based policies. From the regional perspective, the recommendations gave rise to cross-country policy assessment and joint learning. Assessments and evaluations that focus on the relations between rural availability of health workers and UHC, is needed.

Sources:

*Abstract:* <http://www.who.int/bulletin/volumes/91/11/13-119008-ab/en/>

*Article:* <http://www.who.int/bulletin/volumes/91/11/13-119008/en/>

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## WHO Global Code of Practice on the International Recruitment of Health Personnel: Stoking up the fire for Code Implementation

Geneva, May 22, 2013 Civil Society Side Event to the 66th World Health Assembly

### The Background:

There are shortages of health personnel in countries on the continents of Africa and South Asia. In some of the old cultures of Europe, the number of people that require long-term care is increasing the demand for health workers. Due to globalization of the labour market, the demand for health care staff is driving migration and mobility. The situation is worsened by pressures on domestic health systems due to economic crisis.

This issue has led to the adoption of the WHO Global Code of Practice by the World Health Assembly in 2010. Three years later many source countries of migration have not yet taken advantage of the Code and its provisions. The code is now again on the WHA agenda.

### The Event:

Anke Tijtsma, Director at Wemos, chaired the civil society side event to the World Health Assembly. The event was organized by the Medicus Mundi International Network and the European “Health workers for all and all for health workers” project together with a great number of civil society partners and co-promoters such as the delegations of the EU, USA, Switzerland and Malawi to the WHA.



Over 80 WHO Member States delegates, WHO staff and civil society delegates attended the event that led to a general discussion and overall conclusions on the state of Code implementation and the management of health personnel migration.

Source: <http://www.medicusmundi.org/en/contributions/events/2013/who-global-code-of-practice-on-the-international-recruitment-of-health-personnel-stoking-up-the-fire-for-code-implementation>

## Recognizing Foreign Qualification: Emerging Global Trends

Lesleyanne Hawthorne, University of Melbourne – July 2013

As migration of skilled professionals increase through varying pathways, maintaining occupational standards is a difficult task. Some of these more flexible pathways, such as employer-sponsored migration, have become appealing to governments, employers and individual migrants. Foreign academic qualifications are recognized, the efficiency of skilled migration programs is enhanced, skill deficits are filled, and the level of skills wastage is reduced.

Traditionally, host countries have required foreign trained workers to undergo extensive credential processes before obtaining rights to practice. Currently, anecdotal evidence suggests that employers bypass the need for professional registration by employing foreign-trained professionals alongside registered hires, who sign off on official paperwork. Global qualifications have emerged in industries, such as engineering, that exceeds the need for country specific credentials.

The study addresses the change in nature of skilled migration over the past two decades, the challenges for regulators and policy makers, the changes driven by the demands of industry and employers, and the emerging models that facilitate the modern labour market.

Source: <http://www.migrationpolicy.org/pubs/Credentialing-GlobalTrends.pdf>

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## Nicolas Chairs Asia-Pacific Meeting on International Migration

Cabinet-rank Secretary Imelda Nicolas of the Commission of Filipinos Overseas (CFO) under the Office of the President served as co-chair during the Asia-Pacific Regional Preparatory Meeting for the UN General Assembly High-level Dialogue on International Migration and Development held in Bangkok, May 29 to 31. Bangladesh Foreign Secretary Mr. Md. Shahidul Haque, Ministry of Foreign Affairs served as chair of the Meeting.

The Meeting convened by the Asia-Pacific Regional Mechanism (RCM) Thematic Working Group on International Migration including Human Trafficking, co-chaired by the Economic and Social Commission for Asia and the Pacific (ESCAP) and the International Organization for Migration (IOM), was attended by representatives of 22 members of ESCAP. This included, among others, representatives from Australia, China, Fiji, Indonesia, Iran, Nepal, Pakistan, the Russian Federation, Singapore, Thailand, Turkey and Vietnam. In addition, Switzerland was represented as an Observer and representatives from co-organizing UN bodies and agencies and regional civil society organizations also attended.

Key issues of international migration in the region were recognized and the ESCAP member-countries agreed they should be included in the High-level Dialogue on International Migration and Development in 2013. The issues included: ensuring respect for and protection of the rights of all migrants and promoting legal and orderly labor migration, addressing the gender dimensions of



international migration and their impact on women, children and families, assessing the effects of international migration on sustainable development and identifying relevant priorities and promoting regional cooperation, institutional coherence and partnerships in addressing international migration.

Source: [http://www.cfo.gov.ph/index.php?option=com\\_content&view=article&id=1991:nicolas-chairs-asia-pacific-meeting-on-international-migration-&catid=108:cfo-press-release&Itemid=839](http://www.cfo.gov.ph/index.php?option=com_content&view=article&id=1991:nicolas-chairs-asia-pacific-meeting-on-international-migration-&catid=108:cfo-press-release&Itemid=839)

## Deputy Secretary General, at Forum on Migration and Peace, Calls for Reducing Remittance Costs, Protecting Vulnerable Migrants, Ending Stereotypes

UN Deputy Secretary-General, Jan Eliasson, presented to the International Forum on Migration and Peace, in New York on June 20, 2013 and announced World Refugee Day. Highlighted were the most recent figures from the United Nations refugee agency of 45.2 million displaced people worldwide, which translates to someone becoming displaced or becoming a refugee every 4.1 seconds.

The Forum and previous gatherings in South America, convenes policymakers, international organizations, academia and civil society for useful dialogue on issues regarding the dignity and rights of migrants, refugees, seafarers and itinerant people. Migration is often seen as the oldest form of poverty eradication.

Migrants make significant contributions to the economic and social development to the countries and regions to which they go.

The Deputy Secretary-General mentioned the high level meeting amongst the General Assembly on international migration and development and highlighted the preparations for the post-2015 development agenda. Also emphasized was the role of civil society as an ally to the United Nations and a partner with the Department of Public Information and the International Forum on Migration and Peace.

Source: <http://www.un.org/News/Press/docs/2013/dsgsm675.doc.htm>

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## Announcing Ambitious Eight-Point Agenda, Secretary-General Urges International Community to “Make Migration Work” for All

UN Secretary-General, Ban Ki-moon, presented to the General Assembly High-Level Dialogue on International Migration and Development, in New York on October 3, 2013.

The Secretary General emphasized the importance of the timely dialogue. African migrants perished in the Mediterranean after the ship, on which they were travelling, sank.

Seven years ago, The Assembly agreed that the sensitive issue on migration deserved attention. Today, there is a joint declaration on the importance of the development and protection of the rights of migrants.

The Assembly was informed that with the changing face of migration, almost half of migrants are women, one out ten

is under fifteen years of age and four out of ten are living in developing countries.

The report to The Assembly included an eight-point agenda to “make migration work” for all: migrants, societies of origin and societies of destination.

Besides sharing a vision on the agenda, the Secretary-General made a call to ratify and implement the relevant international legal instruments, including the International Labour Organization Convention on domestic workers and the International Convention on the Rights of Migrant Workers and their Families.

Sources: <http://www.un.org/News/Press/docs/2013/sgsm15367.doc.htm>



## Second Jonas Nursing Scholars Leadership Conference in Washington, D.C.

The Jonas Scholarship Conference, hosted in partnership by the American Association of Colleges of Nursing (AACN) and the Jonas Center for Nursing Excellence gathered leaders of nursing schools to share expertise on the state and future of the profession, healthcare, health policy and more. The conference was held on October 27 – 29, 2013 in Washington, D.C. where almost 200 scholars from across the United States convened.

A wide range of topics, including veteran healthcare, women’s health and the shortage of nursing faculty and doctoral prepared nurses were discussed. Lt. General Patricia D. Horoho, U.S. Army Surgeon General and Commanding General of the United States Army Medical Command, was the keynote speaker for the event who stated, “This is the body that I feel can have the biggest change on the health of our country.”



The new partnership among The Jonas Center, Khan Academy and AACN was announced at the conference. The partnerships will create free, peer-developed and expert-reviewed online resources to assist nurses in preparing for professional practice and sit for selected portions of the U.S. nurse licensure examination.

The Jonas Center for Nursing Excellence leads two initiatives.

- 1) The Jonas Nurse leaders Scholar Program supports the educational development of nurse faculty.
- 2) The Jonas Veterans Healthcare Program improves the healthcare of veterans by supporting educational advancement of the nurses involved in the administration, policy and direct patient-care of veterans.

Source: <http://www.jonascenter.org/blog/post/brightest-minds-in-nursing-gather-for-the-second-jonas-scholars-leadership-conference-in-washington-d-c>

Scholar and Healthcare Program Initiatives: <http://www.jonascenter.org/program-areas/scholars>

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## Human Resources for Health and Universal Health Coverage: Fostering Equity and Effective Coverage

Authors: James Buchan, James Campbell, Giorgio Cometto, Benedict David, Gilles Dussault, Helga Fogstad, Inês Fronteira, Rafael Lozano, Frank Nyonator, Ariel Pablos-Méndez, Estelle E Quain, Ann Starrs & Viroj Tangcharoensathien

Four countries sustained improvements on Universal Health Care: Brazil, Ghana, Mexico and Thailand. This paper explores the policy lessons learned on Human Resources Health (HRH) from these countries and examines effective coverage in relation to the availability, accessibility, acceptability and quality of HRH. The findings inform the following principles for decision making on HRH in support of Universal Health Care:

- 1) HRH are critical for the expansion of health services coverage
- 2) HRH Strategies support achievements in effective coverage
- 3) Success is achieved through partnerships with health and non-health entities.

High, middle and low income countries are facing health challenges from changing demographics and an aging population to emerging public health threats. Member countries of the Organization for Economic Co-operation and Development (OECD) are revisiting health benefits, coverage and protection to either re-affirm commitments or curtail services. In low and middle income countries, such as countries in Africa and Asia, evolving dynamics will shape efforts to achieve UHC, where financing essential health services from domestic sources will be possible.

UHC ensures that all members of society have access to healthcare services without incurring financial hardship and encompasses population coverage, healthcare benefits and financial protection. Addressing these needs is a challenge for many countries as it requires political commitment and leadership to distribute available resources in an equitable and sustainable way to match the needs of the population.

Sources:

Abstract: <http://www.who.int/bulletin/volumes/91/11/13-118729-ab/en/index.html>

Article: <http://www.who.int/bulletin/volumes/91/11/13-118729/en/index.html>

## OECD Updates and Resources

The Organization for Economic Co-operation and Development promotes policies that will improve social and economic conditions for people worldwide. As the world's largest source of comparable and statistical, economic and social data, the OECD provides a forum where governments can utilize this data to seek solutions to common problems that directly affect the lives of people. The organization works with businesses, labour unions and civil society organizations as they focus on social issues. The Interim Economic Report, September 3, 2013, highlights a sluggish global growth amidst moderate recovery in advanced economies.

Within the OECD, the Directorate for employment, labour and social affairs focus on employment, health, international migration issues and social policies. A newsletter is published quarterly on new and ongoing projects, recent publications and upcoming events. The following resources were highlighted in the September newsletter:



- The ELS (Employment, Labour and Social affairs) Brochure describes OECD activities, such as the effect of the recession on the labour market, international migration and identifying policies that make societies and economies work more effectively.
- The Health Brochure demonstrates the work carried out by the health division of the Directorate for employment, labour and social affairs. The health division acts as an advisor to OECD countries, providing policy analysis and assistance on the development of health policies that improve access, efficiency and quality of care thereby achieving high performing health systems.

Sources:

OECD - <http://www.oecd.org>

ELS Brochure - <http://www.oecd.org/els/BrochureELS-2013.pdf>

Health Brochure - <http://www.oecd.org/health/health-brochure.pdf>

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## Nursing Health Services Research Unit (NHSRU) Interim Report on Hamilton Health Sciences, Internationally Educated Nurse (IEN) and English as a Second Language (ESL) Nurse Integration Project 2012-2015.

The Internationally Educated Nurse (IEN) and English as a Second Language (ESL) Nurse Integration Project in Canada aims to ensure that registered nurses and registered practical nurses educated abroad or in Canada are fully integrated into the nursing workforce by evaluating and implementing integration strategies. IEN/ESL nurses are provided various clinical and communication skills support.

The project is funded by the Government of Ontario, Ministry of Citizenship and Immigration, for the period of April 1, 2012 through



March 31, 2015, and is based on a community collaboration employment model engaging stake holders who contribute their time and expertise. The project is being executed through partnership with the Centre for Internationally Educated Nurses (CARE), Mohawk College Institute for Applied Health, Hamilton Centre for Civic Inclusion (HCCI) and McMaster University NHSRU.

Sources: [http://nhsru.com/wp-content/uploads/2013-Series-37-HHS\\_IEN\\_ESL\\_UpdatedMay5final.pdf](http://nhsru.com/wp-content/uploads/2013-Series-37-HHS_IEN_ESL_UpdatedMay5final.pdf)

## Information Needs to Manage Pacific Health Worker Migration

Authors: Doyle J, Roberts G, Biribo S, Ratu A

The ability to quantify the impact of migrating health workers from Pacific Island countries (PICs) on health care in the region has been challenged by the information systems that fail to capture relevant data of departing health workers. HRH Knowledge Hub contracted Fiji School of Medicine to report on the various dimensions of migration from the six Pacific Island countries, each of which has a training institution for health professionals.

The purpose of the Six Country Migration Study (SCMS) was to collect data that would fill information and knowledge gaps and compile policies and procedures governing exit from public service as well as the emigration and immigration of health workers. The study found that none of the PICs had data collection procedures in place and much of the information provided was based on personal knowledge and recall. Migration data, at the level required, was not available.



It was recommended that an exit interview survey, which was not currently conducted at any of the institutions, would be a mandatory part of an employee's exiting procedure. Regular analysis and reporting would occur to assist health planners in implementing strategies that would minimize loss in staffing in target areas.

Source: <http://www.hrhresourcecenter.org/node/5342>

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## Modernized Directive 2005/36/EC – A Policy Window Opportunity

The European Federation of Nurses (EFN) is a strong supporter of the Revised Directive 2005/36/EC on Mutual Recognition of Professional Qualifications.

Now more than ever, nurses are united as one voice. EFN members flew to Brussels to be present during lobby meetings of the three EU Institutions. The European Commission, The European Parliament and The Council of Ministers agreed on the final trialogue, which modernizes article 31 in advancing nurse education throughout the European Union (EU.)

Competencies must now be addressed and developed, in order to orient legislation and form national curricula. The Directive will ensure the delivery of high quality services in nursing care, encourage nurses to improve on their own professional practice and may provide a new avenue for automatic recognition of nurse specialties and advanced roles.

Next steps:

The Committee of Permanent Representatives (COREPER) met on June 27, 2013 to formally approve the text on the Directive. COREPER, based in Brussels, is made up of Ambassadors from EU Members who are responsible for preparing Ministerial-level Council meetings. Separated into two distinct committees handling different issues, COREPER I, under Ambassador and Chair Tom Hanney, deals with a variety of issues including employment, social policy, health and consumer affairs.

On July 9, 2013, the European Parliament Internal Market and Consumer Protection Committee (IMCO) voted in favor of the establishment of the Revised Directive, by an overwhelming majority – 37 votes in favor and 2 abstentions.

Sources:

<http://eu2012.dk/en/Meetings/Coreper-PSC/Jun/COREPER-I-27-6>

<http://www.efnweb.be/?p=4422>

<http://www.efnweb.be/?p=4301>

## Consultation on Human Resources for Health for High Income Countries

Speakers Included: Lesley Bell, Consultant, Nursing and Health Policy, International Council of Nurses (ICN), and James Buchan, Professor, Queen Margaret University, Edinburgh, Scotland

The Health Directorate of Norway and the Global Health Workforce Alliance (The Alliance) hosted a Consultation on Human Resources for Health (HRH) among high income countries (HIC) in Oslo, Norway on September 5, 2013. This would create momentum for the Third Global Forum on HRH to enhance the HIC involvement in the global HRH policy challenges and solutions.

The Consultation produced an outline on commitments to overcome HIC barriers, improve coverage and attain Universal Health Coverage (UHC). It also provided a forum to discuss issues related to equitable distribution of health workforce on national and international levels.

The Consultation is jointly organized by Norway, WHO and the Alliance.

Source: <http://www.who.int/workforcealliance/media/news/2013/osloconsultation/en/index.html>



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## Upcoming Events

### First Global Summit of Filipino Nurses 2014 & 9th International Nursing Conference

January 16 & 17, 2014  
Manila Hotel Philippines

The Philippine Nurses Association of America, Inc. (PNA), Philippine Nurses Association (PNA), Association of Nursing Service Administrators of the Philippines (ANSAP), Association of Deans of Philippine Colleges of Nursing (ADPCN), and Commission of Filipino Overseas will be hosting its First Global Summit of Filipino Nurses on January 16, 2014. The theme for Global Summit will be "Filipino Nurses World-Wide: Unite for Global Health and Nation-Building". Filipino nurses from five continents of the world will gather together to discuss important issues in the global healthcare workforce and healthcare globally.  
<http://www.mypnaa.org/internationalconference>

### Nursing Leadership in Global Health, Developing Pathways for Effective Advocacy and Action

February 27 – 28, 2014  
Nashville, Tennessee

Nurses and allied health care providers will be empowered by this symposium to become leaders and agents of change in improving health in the global community. Experts and leaders in the nursing industry from around the globe will share their expertise and vision for expanding the role of nursing in shaping policies and programs.  
<http://nlgh2014.org>

### World Health Professions Regulation Conference 2014

May 17-18, 2014  
Geneva Switzerland

Attendees and participants will discuss issues relevant to the challenges facing health professional regulation amidst

widespread reform. Key speakers will explore the lessons learned from the evolution of competence based approaches to regulatory functions and best practices in regulatory governance and performance.  
<http://www.whpa.org/whpcr2014/>

### Fifth International Nurse Education Conference (NETNEP 2013)

22–25 June 2014  
Noordwijkerhout, Netherlands

Join delegates from around the world for the 5th conference in the NETNEP series and share the latest research, knowledge, ideas, innovations and current developments within nursing and healthcare education from local, national and international regions.

The NETNEP series of conferences are designed to facilitate the sharing of knowledge and experience of nursing and healthcare workforce education worldwide.  
<http://www.netnep-conference.elsevier.com/conference-scope.html>

### Fourth International Conference on Violence in the Health Sector

October 22 - 24, 2014  
Miami, Florida

Work-related aggression and violence within the health and social services sector is a major problem that diminishes the quality of working life for staff, compromises organizational effectiveness and ultimately impacts negatively on the provision and quality of care. These problems pervade both service settings and all occupational professional groups in the health sector.  
<http://www.oudconsultancy.nl/MiamiSite/>

## Useful Links and Resources

Alliance for Ethical International Recruitment Practices  
[www.fairinternationalrecruitment.org](http://www.fairinternationalrecruitment.org)

CGFNS International  
[www.cgfns.org](http://www.cgfns.org)

European Observatory on Health Systems and Policies  
[www.healthobservatory.eu](http://www.healthobservatory.eu)

Global Health Workforce Alliance  
[www.who.int/workforcealliance/en](http://www.who.int/workforcealliance/en)

International Centre for Human Resources in Nursing  
[www.ichrn.org](http://www.ichrn.org)

International Council of Nurses  
[www.icn.ch](http://www.icn.ch)

International Labour Organization – International Labour Migration  
[www.ilo.org/public/english/protection/migrant](http://www.ilo.org/public/english/protection/migrant)

International Organization for Migration  
[www.iom.int](http://www.iom.int)

Internationally Educated Nurses: An Employers Guide (Canada)  
[ien.oha.com](http://ien.oha.com)

Migration for Development  
[www.migration4development.org/](http://www.migration4development.org/)

Migration Policy Institute  
[www.migrationpolicy.org](http://www.migrationpolicy.org)

Mobility of Health Professionals (MohProf) Project  
[www.mohprof.eu](http://www.mohprof.eu)

OECD: International Migration Policies  
[www.oecd.org/migration](http://www.oecd.org/migration)

The World Bank: Health Systems: Human Resources Web page  
[go.worldbank.org/WBF7LWUHA0](http://go.worldbank.org/WBF7LWUHA0)

World Health Organization – Health Workforce  
[www.who.int/hrh/en/](http://www.who.int/hrh/en/)

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## Research and Publications

### **Nursing Workforce Policy and the Economic Crisis: A Global Overview**

*James Buchan, MA (hons), PhD, Fiona O'May, MA and Gilles Dussault, MA, PhD.*

The article assesses the impact of the global financial crisis on the nursing workforce and identifies appropriate policy responses.

Link: <http://onlinelibrary.wiley.com/doi/10.1111/jnu.12028/abstract>

### **The Global Nursing Faculty Shortage: Status and Solutions for Change**

*Charlene C. Gyurko, PhD, RN, CNE and Deena A. Nardi, PhD, PMHCNS-BC, FAAN*

The article begins with a comparison of nurses to populations within a diversity of countries that emphasizes that the international scope of nursing shortage equates to a faculty shortage. Universally recognized causes include global migration of nurses, an aging nursing faculty, devaluation of faculty role by nursing and universities, lack of funding for APN education and poor salaries.

Link: <http://onlinelibrary.wiley.com/doi/10.1111/jnu.12030/abstract>



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