



The globalization of the nursing workforce: Pulling the pieces together

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ABSTRACT

The “globalization” of health care creates an increasingly interconnected workforce spanning international boundaries, systems, structures, and processes to provide care to and improve the health of peoples around the world. Because nurses comprise a large sector of the global health workforce, they are called upon to provide a significant portion of nursing and health care and thus play an integral role in the global health care economy. To meet global health care needs, nurses often move within and among countries, creating challenges and opportunities for the profession, health care organizations, communities, and nations. Researchers, policy makers, and industry and academic leaders must, in turn, grapple with the impacts of globalization on the nursing and health care workforce. Through this special issue, several key areas for discussion are raised. Although far from exhaustive, our intent is to expand and stimulate intra- and interprofessional conversations raising awareness of the issues, uncover unanticipated consequences, and offer solutions for shaping the nursing and health care workforce of the future.

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Introduction

Achieving an adequate supply of qualified nursing professionals globally presents opportunities and challenges for countries and locales as both nursing and the greater health care workforce cycles between shortage and surplus. Some countries and locales specifically prepare nurses and other health professionals (i.e., “sources”) to work in other countries and locales (i.e., “destinations”). Others rely almost exclusively on the health professionals they prepare internally or some combination of those they prepare internally plus those recruited from other countries

and locales. Nurses, as an important sector of the health care workforce in a global economy, are employed differently across countries. Factors influencing employment may include a country’s political system as well as the structure and financing of a country’s health, legal, and regulatory systems; the supply of and demand for other health professions; and the unique populations and care needs of the country. As nurses move within and among countries to provide care to peoples and populations, the profession, health care organizations, communities, and nations are also affected.

There are legal, economic, cultural, social, educational, and other ramifications to be considered as the

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greater health care workforce, and nursing in particular, evolves globally. For example, nurses may leave their home countries because of poor working or living conditions or to provide support and resources to their families. This creates a “domino” effect in which the population health needs in one country may be negatively impacted, whereas those in another country may benefit. Also, when nurses move, they may go to locales and organizations where they know others and where others from their home countries have migrated, been accepted, and experienced positive personal and professional relationships and opportunities. Over time, however, even opportunities within popular areas may wax and wane, and nurses who move to a particular area may find themselves unemployed or underemployed and away from their home, families, and support networks.

The “globalization” of health care increasingly creates an interconnected workforce that crosses international boundaries, systems, structures, and processes to provide care to and improve the health outcomes of people around the world. This trend is important to nursing for several reasons. First, there almost always seems to be a “shortage” of nurses. Over decades, authors have written about the global nursing shortage and examined the numbers of nurses available in the workforce to include nurses recruited from international sources to meet health workforce needs in particular countries (Buchan & Aiken, 2008; Buerhaus, Auerbach, & Staiger, 2009; Juraschet, Zhang, Ranganathan, & Lin, 2012). Second, the “aging” of the nursing workforce is a well-known phenomenon and the focus of reports and expositions about the potential negative impact on health care delivery and the future nursing workforce (Buerhaus et al., 2009). Should the widespread retirements of nurses in any single country bring about or coincide with a period of shortage, the recruitment and employment of nurses from international sources could be expected. Third, organizations around the world are trying to find the right types and mix of health care providers to deliver care to the public. Certainly in the United States, organizations are testing innovations in care delivery to achieve quality within cost constraints, gain efficiencies (in some cases “do more with less”), and remain competitive in an era of value-based purchasing and health care reform. However, the specifics of the transformed health care system and the exact mix and type of health care professionals needed remain uncertain. Finally, to meet population health needs around the world requires knowledge of and planning for the health workforce of the future, including the types, mix, characteristics, and mobility behaviors of nurses.

Despite considerable research on the nursing shortage, nurse turnover, and the migration of internationally educated nurses (IENs), there remains very little tangible evidence to inform organizational, health systems, or public policy makers about how to best develop an international workforce to meet population

needs. Although other collections have focused on IENs and nurse migration (Aiken, Buchan, Sochalski, Nichols, & Powell, 2004; Pittman, Aiken, & Buchan, 2007; Rafferty & Clarke, 2009; Van den Heede & Aiken, 2013), this special issue seeks to expand the discussion to bring renewed attention to the challenges and opportunities that arise from the globalization of the nursing workforce. Although far from exhaustive, the intent is to encourage broader professional, interprofessional, and transdisciplinary conversations that bring attention to the issues arising from a global health care workforce, help identify breakthroughs, and offer solutions for shaping the nursing and health care workforce of the future.

Context on the Globalization of the Nursing Workforce

Varying international health care systems, structures, processes, and outcomes no doubt impact migration and mobility in the global nursing workforce. These issues in the U.S. nursing workforce are important in light of achieving the Institute of Medicine’s *Future of Nursing* report (2011) recommendation of increasing the percentage of baccalaureate-trained nurses to 80% by the year 2020. This benchmark stirs global nursing workforce concerns, such as how the United States will achieve the benchmark, if and how IENs may be to help achieve the benchmark, how the nursing and health workforces in other countries will be affected, how health care in other countries will be affected, and the research needed to inform the development of such workforce policies, including the impacts on local, regional, national, and international health care delivery.

Mobility in the nursing workforce reflects the movement of nurses into, out of, and within a labor market. Mobility also encompasses the ease with which nurses move within a workforce, employment opportunities available in the market, and the policy constraints and barriers that may impede or restrict their movement (Radcliffe, 2009). At the microlevel, mobility in the nurse workforce has been studied by examining nurse turnover as nurses’ ability to move or change jobs within organizations or from department to department (i.e., internal turnover) as well as nurses’ ability to change employers (i.e., external turnover). At the macrolevel, mobility in the nurse workforce can be conceptualized as movement within a country (i.e., internal migration) or between countries (i.e., international migration) (Schachter, Franklin, & Perry, 2003), and studies have examined nurses’ movement from state to state (or province to province and so on) (Baumann, Blythe, Kolotylo, & Underwood, 2004; Kovner, Corcoran, & Brewer, 2011) as well as from country to country (Buchan, Parkin, & Sochalski, 2003).

The globalization of the nursing workforce has implications for countries, communities, the organizations that might hire nurses, the profession, and individual nurses. Because the workforce is a factor influencing the “production” and delivery of health care, the movement of nurses into or out of a geographic

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