International Centre on Nurse Migration



Topics globally affecting nurses, their profession and health care

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The Nurse Labor and Education Markets in the English-Speaking CARICOM: **Issues and Options for Reform**

Summary of the results of a World Bank Report¹

BACKGROUND

The English-speaking Caribbean (ES CARICOM) is facing a rapidly growing shortage of nurses that is affecting development of health systems within the region. As part of the policy response, ministers of health in several countries in the region requested the World Bank undertake an analysis of the nurse labor and education market in the ES CARICOM. The analysis focused on nurses, as they compose the largest group of health care professionals and play a critical role in meeting health needs in the face of a demographic and epidemiological transition in the region.

The World Bank report¹ draws from several different data sources including administrative data (e.g. United States and Canadian censuses, professional licensing databases), case studies in five ES CARICOM countries, case studies in the United States, United Kingdom and Canada — major destination countries for Caribbean nurses — a survey of different cohorts of nurse graduates in Jamaica and literature reviews.

MAIN FINDINGS **Substantial nurse shortages**

There are persistent nursing shortages across the region that likely limit the quality and availability of health services. These shortages are most evident in primary care settings and impact the region's ability to effectively meet health care needs, especially in the areas of disease prevention and health promotion.

Main causes of nursing shortages

1) The number of annual graduates was highly constrained by low completion rates. Little more than half of accepted students complete programs.

Low completion rates pose major constraints to scaling up. Nurse education programs constitute the predominant source of inflows into the nurse labor market.

Low completion rates may be a result of very high studenttutor ratios in the region. The Caribbean Standards for Nursing Education dictates a student to educator ratio of 25:1 in the classroom and 8:1 in the clinical area. The analysis found an overall student to educator ratio of 30:1 across the region.

2) Only about half of existing nurse educators met the ES CARICOM standard minimum qualification of possessing a master's degree. This also suggests that quality of education needs to be improved.

There is significant demand for nurse education in the region. Three qualified candidates compete for every nursing student position. Survey data also suggest that almost all nurses are willing to pay for their education (an average of US\$1,200 annually).

3) High levels of nurse emigration to Canada, the United Kingdom and the United States are the major source of nurse workforce losses. They also pose a considerable threat to future nursing supply.

The number of ES CARICOM-trained nurses working in Canada, the United Kingdom and the United States (21,500) was three times as high as the number of ES CARICOM-trained nurses working in the ES CARICOM. This level of out-migration is not observed in any other region of the world.

15 years after graduation, about half of ES CARICOMtrained nurses were working abroad.

4) The demand for nurses in the ES CARICOM will increase in the coming years as the health needs of the aging population increase. At the same time supply will decrease under current labor and education market conditions. Unless action is taken, nurse shortages in the ES CARICOM will increase significantly by 2025.



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eBrief

POLICY OPTIONS

The analysis estimates that approximately 95% of all potential human capital was lost in the nurse education and labor markets because of training program limitations and migrations. Based on the analysis, there are four main policy areas for the ES CARICOM to consider:

• Increase completion rates. With only 55% of students graduating in the region on average, dropouts represent a tremendous loss. But many schools in the region have very successful programs with high completion rates. This indicates that region-wide improvements in completion rates are clearly possible, even in the very short term. Strategies such as establishing national systems to monitor retention, increasing the flexibility of the curriculum to accommodate different schedules and interests, and creating smaller learning groups and identifying peer mentors have all been shown to effectively address student retention. It is also critical to increase the number and academic qualifications of nurse tutors to address low completion rates.

• **Increase nurse training capacity.** Although scaling up nurse training capacity alone is insufficient, it is an essential component of a comprehensive strategy. There do not appear to be any demand-side constraints to scaling up nurse training in the ES CARICOM. Many qualified applicants are rejected from nursing programs due to capacity constraints.

The analysis found that nurses are willing to pay for their education. It also found that there is scope for a more fair allocation of nursing education costs. An analysis of financial costs and benefits that accrue to the nurse, the source country and the destination country showed some startling results.

• Establish a managed approach to migration. This should be done in a way that yields mutual benefits to both destination and source countries. Moreover, there is a strong rationale for a regional initiative in the case of the ES CARICOM. Intraregional nurse migration will likely increase with the implementation of the Caribbean Single Market Economy, as a free movement of labor among will draw nurses to the highest paying countries. Several countries within the region do not have the clinical capacity to scale up nurse training, nor the capacity to train nurse tutors. These factors clearly support adopting a regional approach.

• **Improve the information base.** Information on the nurse labor and education markets is quite scarce with numerous data quality issues. To improve the basis for human resources for health strategies and to monitor any intraregional agreement on nurse migration it is important to have accurate data. Countries would benefit from more closely monitoring the labor market (e.g., vacancy levels, skill-mix and attrition including migration) and the education market (e.g., student to tutor ratios, intake rates and completion rates) in a standardized way and to share this information.

1 The Nurse Labor and Education Markets in the English-Speaking CARICOM: Issues and Options for Reform, Human Development Department of the Latin America and the Caribbean Region, The World Bank, Washington, D.C., 2009. <u>http://siteresources.worldbank.org/INTJAMAICA/</u> Resources/The_Nurse_Labor_Education_Market_Eng.pdf

This is a summary of the results of a World Bank Report.

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