Brain Drain among Indian health workers

What is the issue?

The government's policies to check brain drain in health sector is restrictive in nature which cannot address the current health sector challenge.

How is India's brain drain?

- For several decades, India has been a major exporter of healthcare workers to developed nations particularly to the Gulf Cooperation Council countries, Europe and other English-speaking countries.
- As per OECD data, around 69,000 Indian trained doctors and 56,000 Indian-trained nurses work in the UK, US, Canada and Australia in 2017.
- There is also large-scale migration of health workers to the GCC countries.

How has the pandemic accelerated brain drain?

- With the onset of the pandemic, there has been a greater demand for healthcare workers across the world, especially in developed nations.
- Countries in dire need of retaining their healthcare workers have adopted migrant-friendly policies.
- At the beginning of the pandemic, OECD countries exempted health professionals with a job offer from the travel bans.
- Some countries processed visa applications of healthcare workers even during the lockdown period.
- The UK has granted free one-year visa extensions to eligible overseas healthcare workers and their dependents.
- Similarly, France has offered citizenship to frontline immigrant healthcare workers during the pandemic.
- Strong pull factors such as higher pay and better opportunities in the destination countries drive these workers to migrate abroad.
- Also the lack of government investment in healthcare and delayed appointments to public health institutions acts as a catalyst for such migration.

What are the steps taken to control brain drain?

- In 2014, government stopped issuing No Objection to Return to India (NORI) certificates to doctors migrating to the US.
- The NORI certificate is a US government requirement for doctors who migrate to America on a J1 visa and seek to extend their stay beyond three years.
- The non-issuance of the NORI would ensure that the doctors will have to return to India at the end of the three-year period.
- The government has included nurses in the Emigration Check Required (ECR) category.
- This move was taken to bring about transparency in nursing recruitment and reduce exploitation of nurses in the destination countries.
- This policy requires nurse recruitment to be done through six state-related employment agencies and makes it mandatory for the nurses to accept international contracts that are approved by the government.

What is the problem with these measures?

- Indian nurses are mostly from lower middle-class families and take loans to complete their nursing education with an aim of getting a job abroad.
- Meanwhile, they also prepare for the IELTS tests which is one of the indication of their desire to migrate.
- Therefore government's policies to check brain drain are restrictive in nature and do not give us a real long-term solution to the problem.

What can be done now?

- Hence a systematic change is required which could range from increased investment in health infrastructure, ensuring decent pay to workers.
- The government should focus on framing policies that promote circular migration and return migration.
- These policies will incentivise healthcare workers to return home after the completion of their training or studies.
- It could also work towards framing bilateral agreements that could help shape a policy of brain-share between the sending and receiving countries.
- This ensures that destination countries of the migrants would be obliged to supply healthcare workers to their country of origin in times of need, especially in the current times.

Source: The Hindu



SHANKAR
IAS PARLIAMENT
Information is Empowering