



**EFN Report on  
Ethical Recruitment**

*January 2025*



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## Executive Summary

### Background

The European healthcare sector faces mounting challenges in nursing workforce sustainability and ethical recruitment. Despite the World Health Organization (WHO) Code of Practice on International Recruitment of Health Personnel, many European Union (EU) Member States increasingly rely on international recruitment as a short-term solution to address nursing shortages rather than prioritising domestic workforce development. This approach has raised significant concerns about transparency, accountability, and the impact on source countries' healthcare systems, particularly those on the WHO's Health Workforce Support and Safeguards list.

This report analyses data from 27 National Nurses' Associations across Europe (77% response rate) regarding ethical recruitment practices and challenges in the nursing workforce. The survey, conducted through the European Federation of Nurses (EFN) Tour de Table in October 2024, reveals significant variations in recruitment patterns and raises concerns about current practices.

### Recruitment patterns

Analysis of recruitment patterns reveals that the process is primarily employer-led rather than government-coordinated. Major source regions include Asia, particularly India and the Philippines, alongside significant intra-European movement from East to West. Country-specific recruitment patterns often follow historical or linguistic ties. The United Kingdom (UK) and Switzerland stand out with the highest proportions of internationally educated nurses at 24.5% and 21%, respectively, while eleven countries report minimal or no international recruitment.

### Workforce data gaps

Workforce data demonstrates substantial nursing shortages across Europe, with Slovakia requiring 14,000 nurses, Portugal 13,700, and Slovenia 2,000. However, significant data gaps exist, with one-third of surveyed countries unable to provide precise recruitment figures. The majority of responding countries report that internationally educated nurses comprise less than 5% of their nursing workforce, indicating varied dependence on international recruitment across the region.

### Concerns

The survey identified several critical concerns regarding current practices. Private recruitment agencies are frequently implicated in exploitative practices, while language barriers emerge as a persistent challenge across all receiving countries. Reports highlight concerning instances of poor

working conditions and unfair treatment, including cases of modern slavery. Additional challenges include lengthy and inconsistent qualification recognition processes and significant cultural integration difficulties.

### **Implications**

The findings point to a need for comprehensive reform at the EU level. This could include the development of standardised data collection and monitoring systems to address current knowledge gaps, alongside a robust framework for ethical recruitment practices. The implementation of comprehensive guidelines for support and integration programmes seems important, as is substantial investment in nursing education and workforce development in source countries. Current recruitment practices appear unsustainable and potentially harmful, requiring coordinated action at the EU level to ensure ethical practices and protect both source countries and internationally educated nurses.

## Main Report

### 1. Background

The European healthcare sector faces significant challenges in nursing workforce sustainability and ethical recruitment practices. As highlighted in the European Federation of Nurses ([EFN Policy Statement on Ethical Recruitment and Empowering Domestic Nursing Workforce Development \(October 2024\)](#)), there is growing concern about the increasing reliance on international recruitment as a short-term solution to address nursing shortages across the European Union (EU).

Instead of prioritising domestic workforce development through enhanced education, improved working conditions, and retention strategies, many EU Member States have opted for international recruitment as an expedient solution. This approach raises significant ethical concerns, particularly regarding transparency and accountability in recruitment practices. [Research](#) points to a misalignment between ethical recruitment policies and operational practices, particularly when recruitment agencies prioritise efficiency over ethical considerations.

A key issue in the current situation is the limited data transparency. Despite Member States' obligations under the [World Health Organization \(WHO\) Code of Practice on the International Recruitment of Health Personnel](#), there is inadequate reporting and monitoring of bilateral recruitment activities. This lack of transparency hampers effective workforce planning and policy development at both national and EU levels.

The bilateral agreements themselves present another significant challenge. These agreements are often negotiated without adequate stakeholder consultation, particularly excluding National Nurses' Associations (NNAs) from meaningful participation. The absence of civil society dialogue and social partnership in these negotiations raises concerns about governance and accountability. While some countries, such as the UK, have implemented codes of practice to avoid direct recruitment from countries with critical health workforce shortages, [research](#) reveals challenges in adhering to these guidelines.

Evidence collected by the EFN through its member organisations reveals that several EU Member States, including Belgium, Germany, Malta, Ireland, the Netherlands, Finland, Norway, and Switzerland, are increasingly recruiting from low and middle-income countries. Of particular concern is recruitment from countries on the [WHO's Health Workforce Support and Safeguards list](#), including

Nigeria, Ghana, Nepal, and Pakistan, as well as other major source countries such as India, Brazil, Indonesia, and the Philippines.

Current data demonstrates varying degrees of reliance on internationally educated nurses across receiving countries. The most significant proportions are observed in Ireland at 49.1%, Malta at 33%, Switzerland at 25.6%, the United Kingdom at 24.5%, and Germany at 9.6%. These figures underscore the extent to which some European healthcare systems have become dependent on international recruitment, raising questions about healthcare workforce sustainability and ethical implications for source countries' health systems.

Different countries have attempted to address these challenges through a range of approaches. Finland, for instance, has developed a '[sustainable recruitment](#)' model that integrates ethical considerations with work-related factors, such as retention and integration of foreign-educated nurses. However, [research](#), such as from the UK, shows that international nurses frequently report experiences of devaluation, inadequate integration, and unmet expectations, which can hinder retention and workplace satisfaction.

The current situation necessitates a comprehensive review of recruitment practices, improved data collection and monitoring mechanisms, and the development of sustainable domestic workforce strategies across the EU. These issues could be addressed within a framework that acknowledges both the right to professional mobility and the ethical imperatives of protecting vulnerable healthcare systems in source countries. Effective policies are needed to focus on retaining nurses in their home countries through improved working conditions and professional development opportunities.

## 2. Method

Facilitating the exchange of knowledge, experiences, and developments among the EFN members is a very much valued function of the EFN bi-annual General Assembly meetings. A key policy support mechanism to achieve this is the EFN *Tour de Table*. At each General Assembly of the EFN, the *Tour de Table* provides the opportunity for the EFN Members to share information and best practices on a specific topic of EFN/nurses' concern that should be put higher on the EU political agenda; as well as key issues and developments of national importance.

The EFN Members value the opportunity to share their experiences with their colleagues from across Europe, learn from each other's ongoing developments at the national level, and communicate this evidence with the European Commission, aiming at upscaling best practices throughout the EU and Europe.

At the October 2024 EFN General Assembly held in Warsaw - Poland, the EFN Members were invited to provide information on Ethical Recruitment since at the EFN April 2024 General Assembly, held in Brussels, the EFN members raised concerns about unethical recruitment practices, particularly from countries like Nepal and India. The EFN members emphasised the importance of influencing politicians to address nursing recruitment and retention issues on a national level and suggested this topic be further discussed at future GAs, given its complexity and importance. Thus, this was done at the EFN October 2024 GA. Evidence shows that high-income countries cannot rely on international recruitment to solve national nursing shortages.

### 3. Results

This survey presents input from 27 National Nurses' Associations, members of EFN from across Europe, representing a 77% response rate. The EFN Members' input was presented in the EFN *Tour de Table*, an agenda point in the EFN General Assembly where the EFN members provide written input and an oral briefing to the entire General Assembly on the developments in their country. The EFN members were asked to report on four questions; their responses to each are synthesised below and presented in full in the Appendix.

#### a. From which countries is your government recruiting from/or is planning to recruit from?

The EFN members reported that the recruitment of internationally educated nurses is mainly carried out by employers, healthcare organisations or private agencies rather than directly by governments. This was explicitly stated by several countries, including Belgium, the Netherlands, and Norway. For example, Belgium noted, "The Belgian government does not recruit foreign nurses. It is the employers who do the steps for themselves."

When examining source countries for recruitment (whether government-led or not), there is a clear pattern of recruiting from Asia, particularly India and the Philippines. These countries were mentioned repeatedly across responses from Austria, Denmark, Finland, Germany, Malta, Netherlands, and the UK. The UK data shows that India and the Philippines were their top source countries, with 46,201 and 25,684 nurses, respectively, joining the UK register since March 2018.

There is also significant intra-European recruitment, particularly from Eastern to Western European countries. This includes recruitment from Romania, Poland, and Portugal to countries like Belgium, and a substantial movement of French nurses to Switzerland. Switzerland reported recruiting mainly

from neighbouring countries (France, Italy, Germany, Austria), with Geneva having 56% internationally educated nurses, many from France.

Several countries reported recruiting from specific regions based on cultural or historical ties. For example, Spain primarily recruits from Latin American countries due to shared language, while Montenegro mainly employs from the former Republic of Yugoslavia. The UK shows significant recruitment from Commonwealth countries, with Nigeria, Ghana, Zimbabwe, Kenya, and Jamaica among their top 10 source countries.

A notable number of European countries (11 out of 27 responding countries) reported no active recruitment or very limited recruitment from other countries. These included Albania, Bulgaria, Estonia, Greece, Iceland, Lithuania, and Slovakia. Some cited language barriers as a limiting factor, with the Czech Republic noting that recruitment from “other countries is difficult due to the language barrier,” while others, such as Portugal, emphasised the importance of retaining domestic nurses rather than pursuing international recruitment.

### **b. How many nurses are recruited/or estimated that need to be recruited from these countries?**

Concerningly, many countries lack precise data on international nurse recruitment numbers. Of the 27 responding countries, approximately one-third explicitly stated they had no data available or incomplete data. These include Austria, the Czech Republic, Denmark, Iceland, Lithuania, the Netherlands, and Spain.

Where specific shortages were identified, the numbers were substantial. Slovenia reported needing approximately 2,000 nurses, Slovakia 14,000, and Portugal cited a shortage of 13,700 nurses in their National Health Service alone. The UK provided the most detailed recruitment data, showing over 14,000 Indian nurses joining the register in the last 12 months.

Some countries have more accurate data on current international nurse numbers than recruitment targets. Belgium reported 3,298 non-Belgian nurses with international qualifications practising and 1,846 Belgian nurses holding international qualifications. The Netherlands reported 3,238 nurses with international qualifications out of a total of 213,537 registered nurses.

Several countries emphasised focusing on domestic retention rather than international recruitment. Portugal notably stated that if their 3,000 annual nursing graduates were retained through better policies, their shortage could be addressed within 5-10 years. Similarly, Denmark reported having



5,000 nurses working outside healthcare who could potentially return to the profession with improved conditions.

The data shared by EFN members reveal varying approaches to workforce planning. While some countries like Germany reported specific recruitment numbers (1,650 people including 735 nurses in 2023 through their Triple Win programme), others like Italy described their situation more broadly (needing at least 60,000 nurses while simultaneously losing 200-300 nurses annually to other countries). This variation in reporting methods and detail makes direct country comparisons challenging.

### **c. At what % Registered Nurses (RN) are Internationally educated?**

The percentage of internationally educated nurses varies considerably across European countries, ranging from less than 1% to over 24%. The UK reports the highest proportion at 24.5% (187,000 out of 765,000 nurses), followed by Switzerland at 21% (with significant regional variation - 56% in Geneva but only 9% in Bern). These represent the clear outliers in terms of high proportions of IENs.

The majority of responding countries reported relatively low percentages of internationally educated nurses, typically under 5%. For example, Belgium reports 4.41%, Portugal 0.5%, Estonia less than 1%, Bulgaria 1.34%, Netherlands 1.5%, and Slovenia 0.4%. However, several countries acknowledged data limitations in their responses. The Czech Republic, Austria, and Germany specifically stated they do not have a registry or cannot provide accurate figures. Others, like Spain, indicated they “currently do not know the exact number.” This suggests the actual proportions of internationally educated nurses might be different from reported figures and highlights a potential need for improved workforce data collection systems.

Nordic countries showed moderate levels of internationally educated nurses: Norway reported approximately 12% of their nursing workforce are internationally educated, Sweden reported around 8% (5% from EU countries and 3% from outside the EU), while Finland reported very small numbers, stating “only around 30 people per year who become registered nurses in Finland have had their education outside of Finland.”

Some countries provided additional context about nurse migration patterns. For example, Italy reported that while 5.5% of its nurses are internationally educated, it simultaneously loses 200-300 nurses each year to other countries with better wages and working conditions. Similarly, Portugal

noted that while they have few internationally educated nurses (0.5%), they face significant challenges with the emigration of domestically trained nurses.

#### **d. What concerns do you have on the treatment of the international recruited nurses?**

Language barriers emerged as the most frequently cited concern across responding countries. This was mentioned explicitly by Belgium, Cyprus, the Czech Republic, Iceland, Norway, and Slovenia. Working conditions and fair treatment formed another major theme. The UK provided extensive detail about exploitation concerns, reporting cases of repayment fees up to £16,000, passport confiscation, wage withholding, and modern slavery in the care sector. Germany similarly reported exploitation issues, noting that “Until they are recognised as nurses, the employees are paid as low-skilled assistants, but must give their full commitment.” Several countries highlighted concerns about private recruitment agencies’ practices, including exploitative contracts and high repayment fees.

Recognition of qualifications and lengthy registration processes were also significant concerns. Germany criticised their “inconsistent recognition procedures” that “take far too long”, while Malta described implementing ‘bridging courses’ to help ensure compliance with EU Directive 2013/55/EU. Norway specifically mentioned “Long authorisation process, deskilling, racism, psychological stress, health and wellbeing” as concerns, indicating the multifaceted challenges faced by internationally educated nurses.

Cultural integration and adaptation challenges were frequently mentioned. Denmark reported concerns about a “lack of information” and “misinformation” of internationally educated nurses before they go to Denmark. Iceland noted a “Lack of understanding of their own rights, lack of understanding the laws and regulations that apply to health care workers.” Switzerland pointed out that in regions with high densities of foreign-trained nurses, there may be reluctance from the local workforce to help with integration. Some countries, particularly those with lower numbers of internationally educated nurses, reported few or no concerns. For example, Portugal stated that “foreign nurses are treated on an equal footing with nationals”.

## **4. Conclusion**

The data shows a clear divide between high-recruiting and low-recruiting nations, with Western European countries generally being net recruiters and Eastern European countries being net suppliers

of nurses. The UK and Switzerland stand out as having particularly high proportions of internationally educated nurses (24.5% and 21%, respectively). This pattern reflects and potentially reinforces existing economic inequalities within Europe, raising concerns about the sustainability and ethics of current recruitment practices.

An interesting finding is the lack of government-level coordination in nurse recruitment across many European countries. The predominance of employer-led and private agency recruitment, combined with inconsistent data collection and monitoring, creates significant risks for both recruiting countries and internationally educated nurses. This fragmented approach appears to contribute to many of the reported problems, including exploitation, poor integration, and inadequate support systems.

The data reveals complex migration patterns, with three main flows identified: intra-European movement (particularly East to West), recruitment from Asian countries (primarily India and Philippines), and country-specific patterns based on historical or linguistic ties (e.g., Spain recruiting from Latin America). These patterns suggest that language, cultural factors, and historical relationships continue to influence migration pathways.

A concerning theme is the widespread reporting of exploitative practices and poor treatment of internationally educated nurses. The UK's detailed reporting of modern slavery cases in the care sector, Germany's acknowledgement of deskilling and exploitation, and multiple countries' concerns about private recruitment agencies suggest systemic problems that require urgent attention. This situation appears particularly acute in the private care sector.

The persistent challenge of language barriers is a critical issue across almost all receiving countries. Current approaches vary widely, from strict language requirements that limit recruitment to more flexible systems with supported language learning. However, there appears to be no consensus on best practices for addressing this challenge.

The analysis of the EFN member's data points to a pressing need for improved data collection and monitoring systems across the EU. Many countries' inability to provide basic data about their internationally educated nursing workforce hampers effective policy-making and workforce planning. This knowledge gap also makes it difficult to identify and address problems faced by internationally educated nurses.

This report raises implications for EU-level policy interventions:

- Development of standardised data collection and monitoring systems for internationally educated nurses;

- Reflection on an EU-wide framework for ethical recruitment practices, including regulation of private recruitment agencies; and
- Guidelines for the support and integration of internationally educated nurses.

The data also highlights the need to address underlying workforce issues in source countries. Several responses noted the importance of domestic retention and development of the nursing workforce. This suggests that sustainable, ethical recruitment requires parallel investment in nursing education and workforce development in source countries, both within and outside the EU.

This report points to an urgent need for a more coordinated, ethical, and sustainable approach to international nurse recruitment across Europe. This should include better protection for internationally educated nurses, more support for source countries, improved data collection and monitoring, and the development of best practice guidelines for recruitment and integration. Without such coordination, there is a risk of perpetuating and exacerbating existing inequalities while failing to address fundamental workforce challenges in both source and destination countries.

## EFN Members input country per country

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### ALBANIA

- 1. From which countries is your government recruiting from/or is planning to recruit from?**  
We don't have.
- 2. How many nurses are recruited/or estimated that need to be recruited from these countries?**  
We don't have.
- 3. At what % Registered Nurses (RN) are Internationally educated?**  
We don't have.
- 4. What concerns do you have on the treatment of the international recruited nurses?**  
We don't have.



### AUSTRIA

- 1. From which countries is your government recruiting from/or is planning to recruit from?**  
India, Philippines, Tunisia, Columbia
- 2. How many nurses are recruited/or estimated that need to be recruited from these countries?**  
No information available
- 3. At what % Registered Nurses (RN) are Internationally educated?**  
No information available
- 4. What concerns do you have on the treatment of the international recruited nurses?**  
Different rules within our countries, but also within EU



### BELGIUM

- 1. From which countries is your government recruiting from/or is planning to recruit from?**  
The Belgian government does not recruit foreign nurses. It is the employers who do the steps for themselves. There are some independent companies that offer their services. These companies carry out double contracts; one with the employer and the other with the nurse. Employers are only aware of the contract they sign and do not have access to the nurse's contract. As a result, the ethical conditions are not known to them.

Nevertheless, certain circumstances (TV surveys<sup>1</sup> or real-life situations) have revealed unethical aspects. The majority of foreign nurses hired in Belgium come from European countries such as Portugal, Spain or Romania. Very few come from other countries.

## 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

According to the 2019-2021 data, there are 2482 nurses of Belgian nationality with a non-Belgian diploma (BE+dip N-BE) and 7369 nurses of non-Belgian nationality with a non-Belgian diploma N-BE + dip N-BE) with the right to practice in Belgium. However, not all these nurses' practice. Only 1846 nurses BE+ dip N- BE and 3298 B-BE + dip N-BE nurses practice<sup>2</sup>.

## 3. At what % Registered Nurses (RN) are Internationally educated?

Foreign nurses (Belgian nationality and non-Belgian diploma 1.11% and non-Belgian nationality and non-Belgian diploma 3.3%) represent 4.41% of registered nurses with the right to practice in Belgium.

## 4. What concerns do you have on the treatment of the international recruited nurses?

The concerns are on the one hand linguistic because the foreign nurses recruited must speak at least one of the three national languages. On the other hand, there is financial pressure on these nurses arriving in Belgium because they commit themselves through contracts to reimbursement if they do not respect their commitments. On the other hand, there is indirect pressure regarding the management of care because they have to perform according to the Belgian care criteria very quickly.



## BULGARIA

### 1. From which countries is your government recruiting from/or is planning to recruit from?

Bulgarian government doesn't recruit from any country.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

321

### 3. At what % Registered Nurses (RN) are Internationally educated?

1.34%

### 4. What concerns do you have on the treatment of the international recruited nurses?

The internationally educated nurses in Bulgaria have the same rights as Bulgarian nurses. They feel calm and they like the different nurse's positions, where they can work, but half of foreign nurses, registered in Bulgaria, after a year, because of the low salaries, they go abroad.

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<sup>1</sup> *"Modern slavery", "mafia", "trafficking in white coats": #Investigation investigation into the recruitment of nurses abroad" (2022): <https://www.rtbf.be/article/esclavaqe-moderne-mafia-traffic-de-blouses-blanches-investigation-enquete-sur-le-recrutement-d-infirmieres-a-l-etranger-10998643>*

<sup>2</sup> *HWF Nurses in the Labour Market 2019-2021 [https://organesdeconcertation.sante.belgique.be/sites/default/files/documents/plancaad\\_infirmiers\\_-\\_version\\_modifiee\\_septembre.pdf](https://organesdeconcertation.sante.belgique.be/sites/default/files/documents/plancaad_infirmiers_-_version_modifiee_septembre.pdf)*



## CYPRUS

**1. From which countries is your government recruiting from/or is planning to recruit from?**

My government is planning to recruit nurses from Africa (Cameroon, Uganda), and Nepal. Some of them are nursing students in Cypriot universities.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

It is planned to recruit nurses who meet certain criteria such as the Greek language and the level of nursing education equivalent to the level of the universities of Cyprus and the EU Directive.

**3. At what % Registered Nurses (RN) are Internationally educated?**

Unknown

**4. What concerns do you have on the treatment of the international recruited nurses?**

For exactly these concerns, the Nursing Services of the Ministry of Health and CyNMA have set restrictions and strict criteria such as the Greek Language and all RN to be at the same level (level 1) in all hospitals in Cyprus, maintaining the quality of nursing care at the same high level. Moreover, the internationally educated nurses to have the same contract and salary with domestically educated nurses in order to keep the local people interested in joining the nursing education and the nursing profession.



## CZECH REPUBLIC

**1. From which countries is your government recruiting from/or is planning to recruit from?**

Ukraine. Other countries are difficult due to language barrier.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

We do not know the number, but our shortage is high as in the other countries.

**3. At what % Registered Nurses (RN) are Internationally educated?**

We do not know, we do not have registry.

**4. What concerns do you have on the treatment of the international recruited nurses?**

Nurses must meet our national requirements including language exam. If we are bilingual country it would be easier to accept e.g. English-speaking nurses.



## DENMARK

**1. From which countries is your government recruiting from/or is planning to recruit from?**

The Danish Government is very close to entering into bilateral agreements with India and the Philippines. Until now Denmark has not actively recruited International Educated Nurses (IEN)

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

The government has not estimated how many nurses need to be recruited from India and the Philippines. But they have allocated 50 million DKK (6.7 Mio Euro) in the budget bill for 2025 for partnerships with India and the Philippines

**3. At what % Registered Nurses (RN) are Internationally educated?**

Currently, it is around 2%. However, we know that there is an increasing interest from IEN to migrate to Denmark. The applications for Danish aauthorisation have increased by 530% from 2018 until 2023. Especially from nurses from third countries like Iran, Nepal, Pakistan and Sri Lanka.

**4. What concerns do you have on the treatment of the international recruited nurses?**

First and foremost, DNO believes that international recruitment is neither an ethical nor an efficient solution to the lack of nurses in Denmark. Around 20 per cent of foreign doctors and nurses leave Denmark again after five years. Denmark can afford to invest in nurses and health is a fundamental right for all not the few. We have 5,000 nurses who work outside the healthcare system. We know that 2 out of 5 are interested in returning to the profession if they are guaranteed better pay and working conditions. Let's start here... With that being said..

Regarding the treatment of IEN, we are concerned about the lack of information or in the worst cases misinformation of IEN before they go to Denmark. The nurses have left their country and invested their finances in coming to Denmark with the expectation that it will be easy to get to work as a nurse in Denmark. We have seen increased misinformation since the government in 2023 removed the language test for nurses from third countries. This has been misinterpreted into Denmark has removed the language requirement for nurses. But we still have a language requirement but not a language test. Now it is the employer's responsibility to evaluate the language skills during the 6 months evaluation employment. We have ccriticised the very long processing time for a Danish aauthorisation In 2022, nurses from a third country who got an aauthorisation had on average applied for 3 ½ years ago. We need a more efficient and coordinated aauthorisation process – too much responsibility is placed on the IEN, the employer and, not least, the colleagues.



## ESTONIA

**1. From which countries is your government recruiting from/or is planning to recruit from?**

Knowing the national language is one of the prerequisites for entering Estonian healthcare (along with the relevant education, of course), and this becomes an obstacle in many cases. The country itself does not actively recruit specialists from other countries either.



## 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Currently, we have very few nurses from other countries, less than 1%. According to the Health Board, 14 nurses with education from other countries were added to the register in 2019-2023. You cannot work as a healthcare worker in Estonia without being added to the register.

## 3. At what % Registered Nurses (RN) are Internationally educated?

Less than 1%

## 4. What concerns do you have on the treatment of the international recruited nurses?

Since there are so few people entering our system, it is not possible to point out anything, as there is no wider practice in this regard.



## FINLAND

### 1. From which countries is your government recruiting from/or is planning to recruit from?

India, Philippines, Vietnam

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Finland as a state is now starting the negotiations. Before it has been done by private companies. We are talking only around 30 people year who become registered nurses in Finland and have had their education outside of Finland. In these numbers are also those Finnish nurses, who have studied abroad.

### 3. At what % Registered Nurses (RN) are Internationally educated?

We are talking about hundreds of nurses in total. re 75000 registered nurses in Finland. So, in reality, they are a minority of that.

### 4. What concerns do you have on the treatment of the international recruited nurses?

Registered nurses who are recruited outside of Finland are not working as registered nurses. They are working as care assistants. This is not an ethical way to recruit people. And a person cannot apply for resident permit based on their education as registered nurse even though Finland lacks 16.600 registered nurses.



## FRANCE

### 1. From which countries is your government recruiting from/or is planning to recruit from?

Regarding the recruitment of foreign nurses in France, it is important to distinguish between two scenarios:

- French nationals who studied abroad, often due to easier access to training institutes abroad
- Foreign nationals

This distinction is crucial as the figures presented do not always differentiate between the two. In general, only nurses who hold a diploma from the EU, Switzerland, and Quebec are allowed to practice in France. For other countries, an individual application must be submitted, and it is reviewed on a case-by-case basis. This process does not, therefore, allow the recruitment of nurses from French-speaking African countries, as Canada has done, for example. We can thus consider that, due to administrative and qualification requirements, France conducts ethical recruitment of foreign nursing staff.

## 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

In France, we distinguish:

- **Emigrate:** to leave one's country to settle in another, temporarily or permanently;
- **Immigrate:** to enter a foreign country to settle there (*dictionary "Le Petit Robert"*)

Since 2021, there has been a slight increase in the migration of French nurses to other countries. The French government does not seem concerned about the migration of nurses (no concrete measures are visible in this regard). This migration has no impact on the current and future healthcare demand. *"The emigration of nurses remains marginal in France but is significant towards certain neighboring countries, especially for border regions (such as the Grand Est and Auvergne-Rhône-Alpes regions). Many nurses who used to work in France emigrate to Switzerland or Luxembourg. Furthermore, numerous nurses emigrate to the Canadian province of Quebec under the mutual recognition arrangement signed in 2010 between French and Quebec authorities. For the 2022-2023 period, 523 French nurses applied for a license to practice in Quebec. Each year, between 800 and 1,100 nurses declare that they are applying for deregistration to leave abroad. There were 1,174 in 2024. The departure of nurses to these countries can be attributed to the more attractive salaries offered abroad."* (Ref National Council of the French Order).

The five most influential factors contributing to the emigration of nurses from France are:

- Poor working conditions
- Lack of career advancement opportunities
- Nurses' contributions are undervalued by the government and policymakers
- Low salaries.

**Since 2021, there has been a moderate increase in foreign nurses coming to work in France.** This does not constitute a problem in France. This phenomenon does not seem to concern our government either (no concrete measures are visible in this regard). We have no data allowing us to assess the integration of these nurses into our country. *"France is not facing issues related to nurse immigration. In 2023, 1,169 nurses registered with the National Council of Nurses with a diploma obtained outside of France. This figure remains marginal as more than 40,000 nurses register each year. However, it should be noted that the process of validating foreign degrees is a complex path for these nurses arriving in our territory (possibility of undertaking internships and completing additional training units to obtain equivalence with the French diploma). This phenomenon is observed for degrees from outside the European Union. However, the immigration of nurses deprives the countries of origin of their healthcare providers and weakens their healthcare system by causing a shortage of personnel."* (Ref National Council of the French Order)

The five most influential factors that have contributed to the settlement of foreign nurses in France are:

- Numerous job opportunities
- Good healthcare infrastructure
- Modern healthcare technologies
- A strong national economy
- Good living conditions

*"Currently, the migration phenomena concerning our profession are not significant enough to pose risks to the sustainability of the nursing workforce in France. Moreover, the situation of the nursing workforce in France has been tense for many years due to issues of work-life quality and the attractiveness of the profession to younger generations. Although nurses are one of the "favorite" professions in France, there is a lack of recognition that acts as a barrier in training institutions." (Ref National Council of the French Order)*

France does not currently rely on nurse immigration to meet its workforce needs.

### 3. At what % Registered Nurses (RN) are Internationally educated?

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### 4. What concerns do you have on the treatment of the international recruited nurses?

The main issue France faces is the emigration of French nurses to neighboring French-speaking European countries, such as Switzerland, Belgium, and Luxembourg, due to the higher salaries offered by these countries.

The exodus of French nurses to Switzerland raises concerns about the future of the French healthcare system. Already facing a shortage of healthcare staff, France risks seeing the situation worsen if this trend continues. This phenomenon could lead to:

1. A deterioration in the quality of care
2. An increased workload for the remaining professionals
3. Greater difficulties in recruiting and retaining qualified staff
4. Upward pressure on salaries in France

In the face of these challenges, French authorities will need to rethink their health policies and consider measures to enhance the nursing profession. This could involve increasing salaries, improving working conditions, or offering more attractive career advancement opportunities.

<https://www.lesdechargeurs.fr/metier-tres-demande-suisse-6000eur-net-2500eur-france/>

In 2017, 67% of nurses at Geneva University Hospitals were French.

<https://www.espaceinfirmier.fr/actualites/170120-au-hug-deux-infirmieres-sur-trois-sont-francaises.html>

#### **Some figures on nurse migration to France:**

According to OECD figures (migration of nurses), around 2.9% of the 764,000 nurses practicing in France (about 21,850) completed their studies abroad. This is lower than in Belgium (4.2%), Germany (9.24%), or the United Kingdom (17%). Not all nurses practicing in France are yet registered with the National Nursing Order, but the data available to the Order led Patrick Chamboredon to state that "15,000 nurses are practicing in France with a foreign diploma," whether they are French (10,000) or from another country (5,000). However, the Order is unable to distinguish between healthcare workers who obtained their diploma in an EU Member State,

the European Economic Area (EEA), or Switzerland, and those who completed their studies in another country. This difference is, however, significant. <https://www.actusoins.com/recruter-des-infirmiers-a-letranger-une-dynamique-mondiale-peu-presente-en-france.html>

Nursing diplomas from outside the European Union are not recognised in France, and refugees must start their studies over to obtain a French diploma and be able to practice. It takes 3 years of higher education to obtain a State Nursing Diploma (DEI). The studies include theoretical courses and practical internships. The Nursing Training Institutes (IFSI) are the only institutions authorised to award a DEI. A minimum level of B2 in French is required. People with diplomas from outside the European Union must resume their studies at a Nursing Training Institute (IFSI) to complete their education and obtain the State Nursing Diploma.

<https://refugies.info/fr/demarche/63d3ac48cab35c029b07fa40>

### **The Quebec Exception:**

The France-Quebec agreements: the Quebec nursing diploma in France - The Ordre des infirmiers et infirmières du Québec (OIIQ) and the French Nursing Order have concluded a Mutual Recognition Agreement (MRA) for professional qualifications. The aim of this agreement is to facilitate and accelerate the migration of nurses holding either a French nursing diploma (State Nursing Diploma) or a Quebec diploma (Bachelor's degree), in either direction, regardless of nationality. Thus, if you are (i) a holder of a nursing diploma from Quebec and wish to practice in France: you can obtain authorisation to practice in France simply by submitting a request to the National Council of the French Nursing Order ; (ii) a holder of a French State Nursing Diploma and wish to practice in Quebec: you can practice in Quebec as long as you complete a 75-day adaptation internship in a clinical setting. <https://laruche.cbainfo.fr/exercer-infirmiere-liberale/formation/diplome-infirmier-etranger/>



## GERMANY

### **1. From which countries is your government recruiting from/or is planning to recruit from?**

Triple Win (a project of the Federal Employment Agency and the Federal Ministry of Health) is currently recruiting nursing staff from the following countries: Bosnia and Herzegovina, Tunisia, Jordan, Philippines, Indonesia, India (states of Kerala and, from 2024, Telangana). Trainees from Vietnam are placed in the care sector. In addition, the Federal Employment Agency is implementing projects to recruit nursing professionals with other partners (independent of Triple Win) in the following countries: Brazil, Mexico, Colombia.

### **2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

In 2022, the Federal Employment Agency placed 1,200 people in the care sector, including 463 nursing professionals and 91 trainees via the Triple Win programme. In year 2023, there were a total of 1,650 people, including 735 nurses and 99 trainees through Triple Win. There is no national register of professions existing. It is estimated that around 80 to 90 per cent of vacancies for foreign nursing professionals are filled through private recruitment. In order to work as a nurse in Germany, a recognition procedure must be completed. This takes up to two years and varies from state to state. In 2022, around 21,000 recognition procedures for nurses were recorded.

### 3. At what % Registered Nurses (RN) are Internationally educated?

No register, no valid answer possible.

### 4. What concerns do you have on the treatment of the international recruited nurses?

Until they are recognised as nurses, the employees are paid as low-skilled assistants, but must give their full commitment. That is exploitation. The inconsistent recognition procedures take far too long. Standardised procedures like OSCE are unknown. The Overseas Aptitude Test General Nurse of the Royal College of Surgeons, School of Nursing, Dublin, Ireland can be adapted to German requirements and trialled in Germany. The international procedure can be carried out in 3 days (1st day theoretical examination, 2nd day practical course test, 3rd day: evaluation and result). Socio-cultural integration into society is laborious, costly and sometimes unsuccessful. Professional integration is also sometimes more or less successful. The practices of private placement agencies in particular are worthy of criticism. There are known cases of nurses having to pay back the costs of recruitment, language lessons and expenses for the institution. This usually amounts to tens of thousands of euros.



## GREECE

### 1. From which countries is your government recruiting from/or is planning to recruit from?

There is no planning for recruitment of nurses from other countries.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Not applicable.

### 3. At what % Registered Nurses (RN) are Internationally educated?

99.5% are Nationally educated (Greek University of Technological Institution Graduates) and it is estimated that only a small percent <0.5% are graduates from a foreign country.

### 4. What concerns do you have on the treatment of the international recruited nurses?

Not applicable



## ICELAND

### 1. From which countries is your government recruiting from/or is planning to recruit from?

None, but most internationally educated nurses in Iceland are from the Philippines

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

No formal estimation

### 3. At what % Registered Nurses (RN) are Internationally educated?

8%

#### 4. What concerns do you have on the treatment of the international recruited nurses?

Language barriers. Lack of understanding of their own rights, lack of understanding the laws and regulations that apply to health care workers, health services and other laws and administrative instructions.



## ITALY

#### 1. From which countries is your government recruiting from/or is planning to recruit from?

Mostly India, Kenya, Argentina, Paraguay, Romania

#### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

In 2023, of the 456,000 nurses in Italy (of which only 398,000 are active), 25,130 (5.5%) do not have Italian nationality (1 in 18), and of these, 15,674 are from EU countries and 9,456 are from non-EU countries. Of the non-Italian professionals, the most represented foreign nationalities in Italy are: Romania (12,000); Poland (2,000); Albania (1,848); India (1,842); and Peru (1,500). To the foreigners who were trained in Italy and are registered with an Order, should be added the nurses who arrived during the Covid pandemic (about 11,000) and another 1,800 who arrived from Ukraine, who were not monitored and had exemptions for facilitating professional practice.

#### 3. At what % Registered Nurses (RN) are Internationally educated?

We don't have this number.

#### 4. What concerns do you have on the treatment of the international recruited nurses?

Unethical recruitment practices toward countries of origin, appropriateness of training and its certification (especially for Extra-EU countries), knowledge of language and cultural adaptation barriers. It is estimated that Italy needs at least 60,000 nurses. Currently there are 6.2 nurses / 1,000 inhabitants. On the other hand, we have 200-300 nurses each year that leave Italy to go and work in countries with better wages and work conditions. Currently, about 20,000 nurses who studied in Italy have moved to work abroad, including about 13% in the last 5-6 years.



## LITHUANIA

#### 1. From which countries is your government recruiting from/or is planning to recruit from?

Plans from government and education institutions to invite young people from Moldova to study nursing profession and to have contracts to work in Lithuania.

#### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

No data

#### 3. At what % Registered Nurses (RN) are Internationally educated?

No data

#### 4. What concerns do you have on the treatment of the international recruited nurses?

Our country has lost more nurses due to significant emigration than it is recruiting nurses from abroad. In order for foreigners to work in Lithuania in the health sector, it is important to learn Lithuanian in order to obtain a work permit. In addition, the country was not particularly popular for the immigration of nurses due to relatively low wages and working conditions, so recruitment was not effective. However, we are currently hearing more and more discussions about the possible recruitment of nurses and nursing assistants from other countries.



#### MALTA

##### 1. From which countries is your government recruiting from/or is planning to recruit from?

Not restricted to any country but mainly from India & Pakistan.

Malta has a long history of recruiting Indian nurses. However, many of these nurses do not meet the requirements of Directive 2013/55/EU. To address this issue, Malta has implemented 'bridging courses' to help ensure compliance with the EU Directive. This experience could serve as a valuable lesson for other countries. The absence of a national regulatory body in some EU countries could complicate the vetting process for internationally educated nurses.

##### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

The amount is about one thousand nurses.

##### 3. At what % Registered Nurses (RN) are Internationally educated?

100%

##### 4. What concerns do you have on the treatment of the international recruited nurses?

They need time to adapt to the local system.



#### MONTENEGRO

##### 1. From which countries is your government recruiting from/or is planning to recruit from?

Montenegro mainly employs from the Region (former Republic of Yugoslavia).

##### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Very few nurses (most often for private reasons)

##### 3. At what % Registered Nurses (RN) are Internationally educated?

we have no information

##### 4. What concerns do you have on the treatment of the international recruited nurses?

-



## NETHERLANDS

### 1. From which countries is your government recruiting from/or is planning to recruit from?

The government itself is not / does not recruiting actively.

Employers (hospitals, chronic care units, elderly care organisations) are recruiting nurses from countries like the Philippines, Indonesia, India.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

There are no hard national figures on the number of nurses recruited from specific countries. The need for internationally recruited nurses is usually determined by region or healthcare institution, depending on local shortages. While there is an increasing interest in healthcare professionals from countries such as the Philippines and India, the exact numbers vary and depend on the specific recruitment needs of healthcare institutions.

### 3. At what % Registered Nurses (RN) are Internationally educated?

Registered Nurses in the Netherlands:

- Dutch diploma (NL): 210.299
- Foreign diploma (non-NL): 3.238
- Total diploma's: 213.537

➔ 3.238 out of 213.537 makes: 1,5% of the registered nurses in the Netherlands are internationally educated.

<https://www.bigregister.nl/over-het-big-register/cijfers/buitenlands-diploma-en-nederlands-diploma>

### 4. What concerns do you have on the treatment of the international recruited nurses?

Integrating, learning the language and being treated equally as domestic nurses are key concerns, along with ensuring fair working and living conditions.



## NORWAY

### 1. From which countries is your government recruiting from/or is planning to recruit from?

There is no governmental strategy for recruiting international educated nurses (IEN). Healthcare organisations recruit themselves, mainly from the other Nordic countries and within EU. However, the Philippines is the second largest provider of nurses after Sweden. A bilateral labour agreement was negotiated between the Philippines and Norway in 2006, but the BLA was never used and terminated after 6 months and never renewed.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Approximately, 14.000 IENs are employed in Norwegian healthcare systems.

### 3. At what % Registered Nurses (RN) are Internationally educated?

12 per cent of the nursing workforce are IENs



## 4. What concerns do you have on the treatment of the international recruited nurses?

Long authorisation process, deskilling, racism, psychological stress, health and wellbeing, language barriers, not enough mentorship and introduction programs when employed.



## POLAND

### 1. From which countries is your government recruiting from/or is planning to recruit from?

These are mainly nurses from Ukraine but also from Belarus.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

There is no complete data because nurses from Ukraine and Belarus enter the system in different ways: as refugees, as students repeating their education in Poland, and also as medical caregivers (i.e. they take up jobs below their qualifications). Approximate data should be estimated at about 5,000 people.

### 3. At what % Registered Nurses (RN) are Internationally educated?

Less than 2%

### 4. What concerns do you have on the treatment of the international recruited nurses?

Lack of transparent procedures to make it easier for non-EU nurses to obtain the right to practice their profession in the new country, especially for refugees. Solutions based on lengthy administrative procedures, time-consuming process of subsequent exams, etc., favor the use of nurses from other countries by intermediary companies, but also by employers, in other words, it promotes corruption. If the process lasts 2-3 years, the employer is willing to employ a foreign nurse in another position, e.g. an auxiliary one, and in practice expect to fulfil the nursing tasks. From last two decades we have many such example around Europe.



## PORTUGAL

### 1. From which countries is your government recruiting from/or is planning to recruit from?

Portugal is experiencing a different scenario. In other words, although there is a shortage of nurses, if Portuguese professionals didn't emigrate, there would be enough to meet the real and effective needs. Therefore, rather than encouraging foreign nurses to come to Portugal, we need to be concerned with retaining and maintaining the existing professionals and those who are trained annually by Portuguese universities. For example, according to a study by the Ministry of Health "*Os profissionais do SNS – Retrato e evolução*" (*NHS professionals - Portrait and evolution*) released in the first quarter of 2024, there are 13,700 nurses missing from the National Health Service, which would represent an increase of around 27 per cent of nurses in the NHS. It should be noted that these figures do not come from the Order of Nurses, but from the Portuguese state itself. If we add that around 3,000 nurses graduate every year, and if real retention and recruitment policies were implemented, the shortage of nurses, even with annual retirements, would be filled within 5-10 years.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

N/A

**3. At what % Registered Nurses (RN) are Internationally educated?**

On 31 December 2023, there were 423 nurses with training obtained outside of Portugal with a valid certificate to practice nursing in Portugal, which corresponds to 0.5%. However, the number of foreign nurses on the same date was 1,287, corresponding to 1.5 per cent.

**4. What concerns do you have on the treatment of the international recruited nurses?**

As there is no real concern about the recruitment of foreign nurses, not least because the country is not a destination of choice for foreign professionals in the way that other countries are, there are no major concerns from the outset. In other words, foreign nurses are treated on an equal footing with nationals, in strict compliance with the national and European legislation in force regarding the recognition of professional qualifications.



**ROMANIA**

**1. From which countries is your government recruiting from/or is planning to recruit from?**

No

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

-

**3. At what % Registered Nurses (RN) are Internationally educated?**

-

**4. What concerns do you have on the treatment of the international recruited nurses?**

-



**SLOVAKIA**

**1. From which countries is your government recruiting from/or is planning to recruit from?**

There is currently no recruitment at the government level.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

We need 14,000 nurses.

**3. At what % Registered Nurses (RN) are Internationally educated?**

Almost none.

## 4. What concerns do you have on the treatment of the international recruited nurses?

Very strict conditions are set if a nurse applies for recognition of education upon arrival from other countries (priority from Ukraine), the information is also provided on the website of the Ministry of Health of the Slovak Republic: <https://www.health.gov.sk/Clanok?mzsr-sestry-ukrajinske-vzdelanie-uznanie>



## SLOVENIA

### 1. From which countries is your government recruiting from/or is planning to recruit from?

Currently recruiting mainly from the Republic of Croatia, Bosnia and Herzegovina, Serbia and Macedonia.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

There is a shortage of approximately 2,000 nurses in Slovenia. Due to the requirements for knowledge of the Slovenian language for nurses at level C1 oral, B2 written of the Common European Language Framework and non-competitive salaries compared to nearby countries (e.g. Austria), it is not expected that nurses from abroad would be employed in Slovenia in large numbers.

### 3. At what % Registered Nurses (RN) are Internationally educated?

This information is yet to be systematically maintained. The National Institute reported to OECD that 0.4% of nurses in Slovenia are foreign-trained, which is an underestimate. The OECD average is 5.9%, for example in Italy 5%. More information on <https://www.oecd-ilibrary.org/sites/4dd50c09-en/1/3/8/9/index.html?itemId=/content/publication/4dd50c09-en&csp=82587932df7c06a6a3f9dab95304095d&itemIGO=oecd&itemContentType=book>

### 4. What concerns do you have on the treatment of the international recruited nurses?

Nurses who have obtained their education abroad must pass qualification recognition procedures and tests of knowledge of the Slovenian language. Until the conditions for entry into the register and the granting of a license are met, they are employed in lower-paid jobs, mostly in social welfare.



## SPAIN

### 1. From which countries is your government recruiting from/or is planning to recruit from?

In Spain, the largest number of immigrant nurses come from Latin American countries, mainly because they share the same language.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

In Spain we suffer from a serious shortage of nurses but there is no exhaustive study that determines the number of nurses that have to be recruited from other countries. Currently we

have a ratio of 6-7 nurses per 1000 inhabitants and we should have approximately 9 nurses per 1000 inhabitants to reach the average of the European Union.

**3. At what % Registered Nurses (RN) are Internationally educated?**

We currently do not know the exact number of nurses trained in other countries who are working in Spain.

**4. What concerns do you have on the treatment of the international recruited nurses?**

Foreign nurses working in Spain are usually fairly well integrated, but sometimes they need a little more training. In Spain, it is common for them to work in the private sector, and especially in the social-health sector.



## SWEDEN

**1. From which countries is your government recruiting from/or is planning to recruit from?**

In Sweden it is still very rare that the Government recruiting nurses from other countries.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

None

**3. At what % Registered Nurses (RN) are Internationally educated?**

Around 5 % from EU countries. Around 3 % from countries outside EU.

**4. What concerns do you have on the treatment of the international recruited nurses?**

That they will have problems to adapt the Swedish culture and the language.



## SWITZERLAND

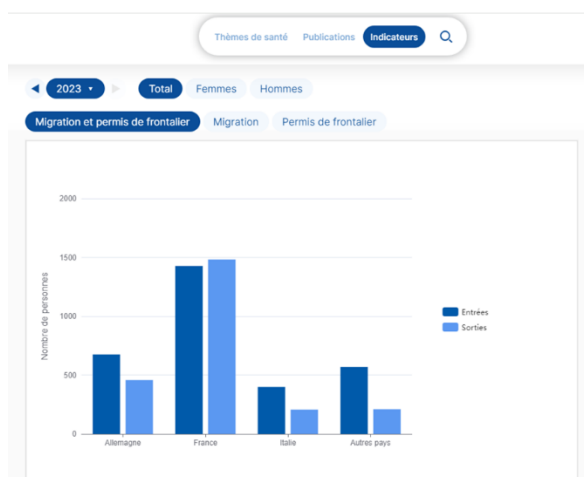
**1. From which countries is your government recruiting from/or is planning to recruit from?**

Mainly neighbouring countries: France, Italy, Germany, Austria. Not the government is recruiting, but the employers. Or the nurses from France for instance move to Geneva to find a job there or they move to the French regions near Geneva to find a job in Switzerland.

**2. How many nurses are recruited/or estimated that need to be recruited from these countries?**

In this interactive map of nursing monitoring you find the entries by year and country of origine: <https://ind.obsan.admin.ch/fr/indicator/pflemo/entrees-et-sorties-de-personnel-infirmier-etranger>

Below a print screen of an example:



The huge increase for nurses (doctors as well) from France creates tension between the regions bordering with Switzerland, Paris and Switzerland.

### 3. At what % Registered Nurses (RN) are Internationally educated?

21% for the whole country. For Geneva 56 % or Bern 9%. It depends on many factors such as salaries and how nurses are valued.

### 4. What concerns do you have on the treatment of the international recruited nurses?

Usually, they have the same rights and obligations as the Swiss nurses. In regions where you have a high density of foreign trained nurses there may be some reluctance from the Swiss side to help their integration. As the living and working conditions are far better in Switzerland than in their country of origin it is often a big challenge for ASI-SBK to motivate to become activists for better working conditions, NPR better salaries or even just to become members of SBK-ASI.



## UK

### 1. From which countries is your government recruiting from/or is planning to recruit from?

Over the past 6 years, the UK has recruited nursing and midwifery staff from 134 countries. Since March 2018, India has supplied more nursing and midwifery staff to the UK than any other country. In the most recent report period (the 6 months to March 2024) almost a quarter of all new joiners to the UK Nursing and Midwifery Council (NMC) register (and half of all international joiners) were educated in India. The next 9 most common countries of training for new joiners to the NMC register over the past 6 years have been Philippines, Nigeria, Ghana, Zimbabwe, Kenya, Nepal, Australia, Jamaica and Romania.

### 2. How many nurses are recruited/or estimated that need to be recruited from these countries?

Recruitment since 2018:

Country of initial training	Number of nursing and midwifery staff joining the UK register since March 2018
India	46,201
Philippines	25,684
Nigeria	11,298
Ghana	4,320
Zimbabwe	2,669
Kenya	1,726
Nepal	1,234
Australia	1,167
Jamaica	945
Romania	804

Recruitment in the last 12 months:

Country of initial training	Number of nursing and midwifery staff joining the UK register since March 2023
India	14,615
Philippines	4,435
Nigeria	3,173
Ghana	1,737
Kenya	603

The UK Government, elected in July 2024, has yet to set out its plans for international nurse recruitment. Any attempt to reduce levels of international recruitment would have the greatest impact in England, which accounts for the vast majority of international recruitment within the UK. The NHS Long Term Workforce Plan (England only) estimates that just 9-10.5% of its workforce will be recruited from outside the UK in 15 years' time. Even were this achieved, it would mean that international recruitment would continue to play an important role in meeting the UK's workforce needs for years to come. Moreover, given the weakness of the Plan's commitments to grow the UK-educated workforce, it seems likely that its ambition will not be met and that the UK's dependence on international recruitment will remain high when compared with other OECD countries.

### 3. At what % Registered Nurses (RN) are Internationally educated?

As of March 2024, 24.5% of nurses on the UK Nursing and Midwifery Council register were educated outside of the UK (187,000 out of a total of 765,000). This includes 3.3% (25,000) from the EU / EEA and 21.2% (162,000) from the rest of the world.

### 4. What concerns do you have on the treatment of the international recruited nurses?

The RCN has received increasing reports of unethical and exploitative employment practices faced by internationally recruited staff in the care sector. These include reports of repayment fees, which RCN members have reported to be as high as £16,000 charged to workers attempting to leave their employment before a specified time.

The RCN is aware of cases where passports have been taken and wages withheld in order to enforce payment of these fees. Internationally educated members also report being offered fraudulent job offers. In some cases, nursing staff have been scammed into paying up to £20,000 in illegal work finding fees.

Unseen UK, which runs a helpline for victims of modern slavery & exploitation, reported a sixfold increase in the number of modern slavery cases in the care sector between 2021 and 2022.<sup>3</sup> The care sector accounted for 18% of all potential victims that called the helpline in 2022, over 700 individuals.

The Gangmasters Labour Abuse Authority (GLAA) has also found evidence of labour abuse in the care sector, including overcrowded accommodation, payment below minimum wage, and debt bondage. In 2023, the GLAA received 123 reports of modern slavery and human trafficking within the care sector, with the sector representing between 26% and 48% of all referrals made in each quarter.<sup>4,5,6,7</sup>

The Director for Labour Market Enforcement, which sits above the GLAA, assessed the care sector as high risk, given the prevalence of non-compliance with labour standards and cases of modern slavery.<sup>8,9</sup> Most recently, in its 2024 report, it was found that non-compliance with the National Minimum Wage and non-payment was endemic in the care sector.<sup>10</sup>

During the 2024 general election campaign, the RCN wrote to party leaders to demand that the incoming government launch an investigation into exploitation in the care sector and strengthen labour market enforcement. Specifically, we recommended that the government expand the remit of the Gangmasters Labour Abuse Authority (GLAA) to include the care sector. This would provide statutory powers to the GLAA to regulate labour provision in the sector and mean that all employers and agencies would be required to hold a licence issued by the GLAA.

The Labour Government have promised to establish a Single Enforcement Body (SEB) that is likely to include the GLAA. The RCN is supportive of efforts to increase the coherence of labour market enforcement in the UK and has met with the GLAA since the election to discuss how we can work together to tackle exploitation in social care.

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<sup>3</sup> [Who Cares? Modern slavery in the care sector - Unseen \(unseenuk.org\)](https://www.unseenuk.org/who-cares-modern-slavery-in-the-care-sector)

<sup>4</sup> [GLAA Intelligence Picture Q1 \(January – March 2023\) - GLAA](#)

<sup>5</sup> [GLAA Intelligence Picture Q2 \(April-June 2023\) - GLAA](#)

<sup>6</sup> [GLAA Intelligence Picture Q3 \(July-September 2023\) - GLAA](#)

<sup>7</sup> [GLAA Intelligence Picture Q4 \(October - December 2023\) - GLAA](#)

<sup>8</sup> [Labour Market Enforcement Strategy 2021 to 2022 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/108112/LME-Strategy-2021-to-2022.pdf)

<sup>9</sup> [Labour Market Enforcement Strategy 2022 to 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/108112/LME-Strategy-2022-to-2023.pdf)

<sup>10</sup> [United Kingdom Labour Market Enforcement Strategy 2023/24 – Annex A: Emerging issues around Compliance and Enforcement in the UK Labour Market \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/118112/UK-LME-Strategy-2023-24-Annex-A-Emerging-issues-around-compliance-and-enforcement-in-the-UK-Labour-Market.pdf)

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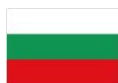


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The [European Federation of Nurses Associations \(EFN\)](#) was established in 1971 and is the independent voice of the profession. The EFN consists of National Nurses Associations from 35 EU Member States, working for the benefit of 6 million nurses throughout the European Union and Europe. The mission of EFN is to strengthen the status and practice of the profession of nursing for the benefit of the health of the citizens and the interests of nurses in the EU & Europe.



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