



INTERNATIONAL MIGRATION OF HEALTH PROFESSIONALS

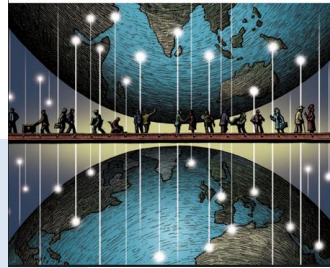
SPECIAL CHAPTER IN INTERNATIONAL MIGRATION OUTLOOK 2025

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Overview of OECD activities over the past decades to monitor health workforce migration



2017

World Health Assembly adopts joint OECD-ILO-WHO Working for Health Programme for 5 years

2008

The Looming Crisis in Health Workforce

2016

Health Workforce Policies in OECD Countries: Right Jobs, Right Skills, Right Places

2019

Recent Trends in International Migration of Doctors, Nurses and Medical Students

2025

International Migration Outlook chapter

2007

International Migration Outlook chapter

2015

International Migration Outlook chapter

2020

Contribution of Migrant Doctors and Nurses to Tackling COVID-19 Crisis in OECD Countries

2021

Two working papers on the international migration and movement of doctors and nurses to and within OECD countries - 2000 to 2018

2010

World Health Assembly adopts Global Code of Practice on the International Recruitment of Health Personnel

Datasets for trends: OECD/Eurostat/WHO-Europe Joint Questionnaire on Health Care Statistics and OECD Database on Immigrants in OECD Countries (DIOC)

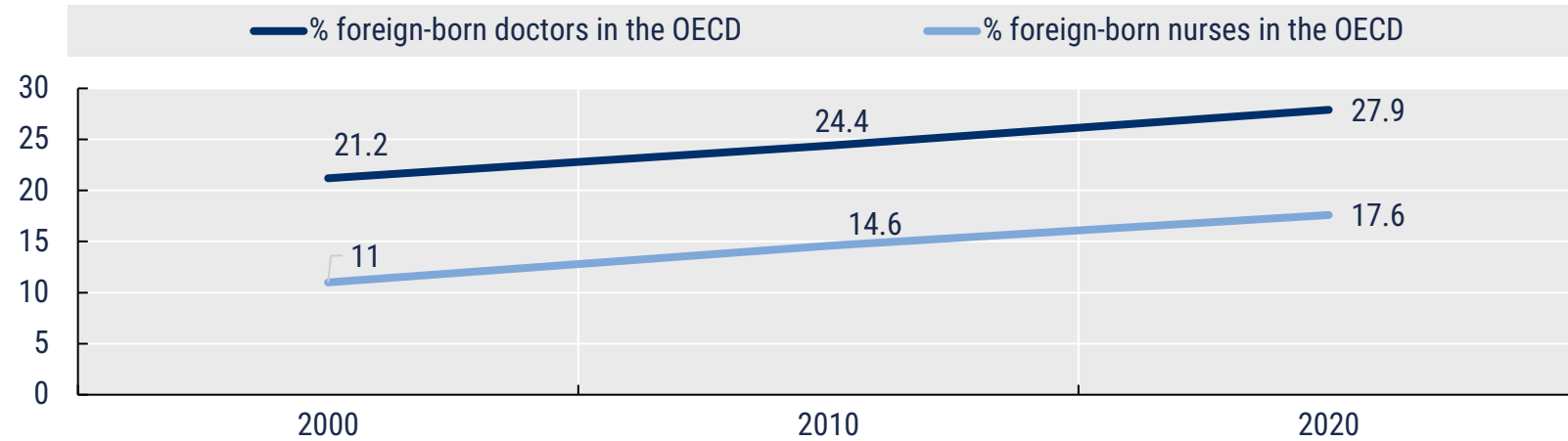


TRENDS IN INTERNATIONAL MIGRATION OF DOCTORS AND NURSES IN THE OECD

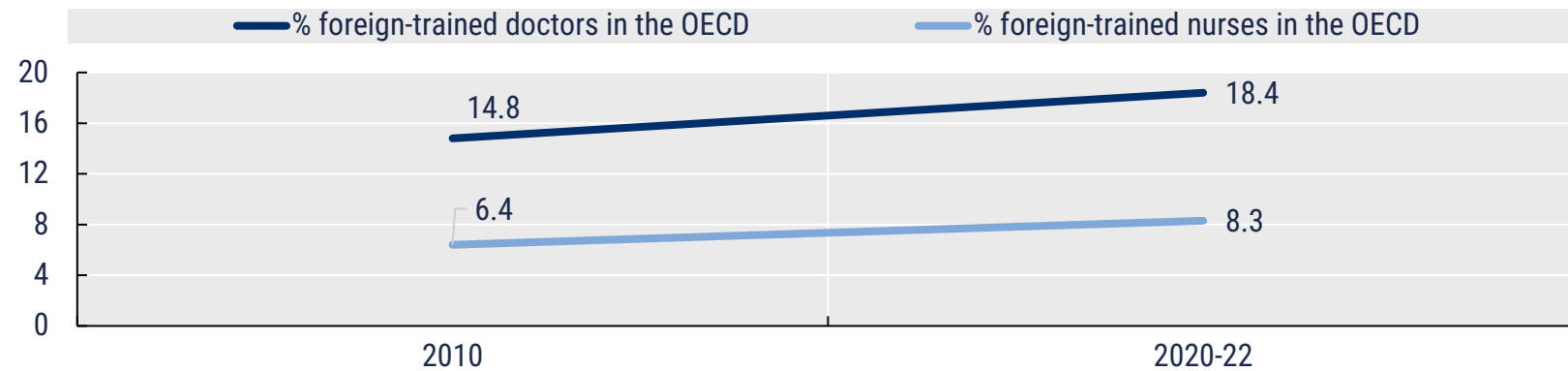


How the share of immigrant doctors and nurses has evolved across the OECD over the last decades

% foreign-born

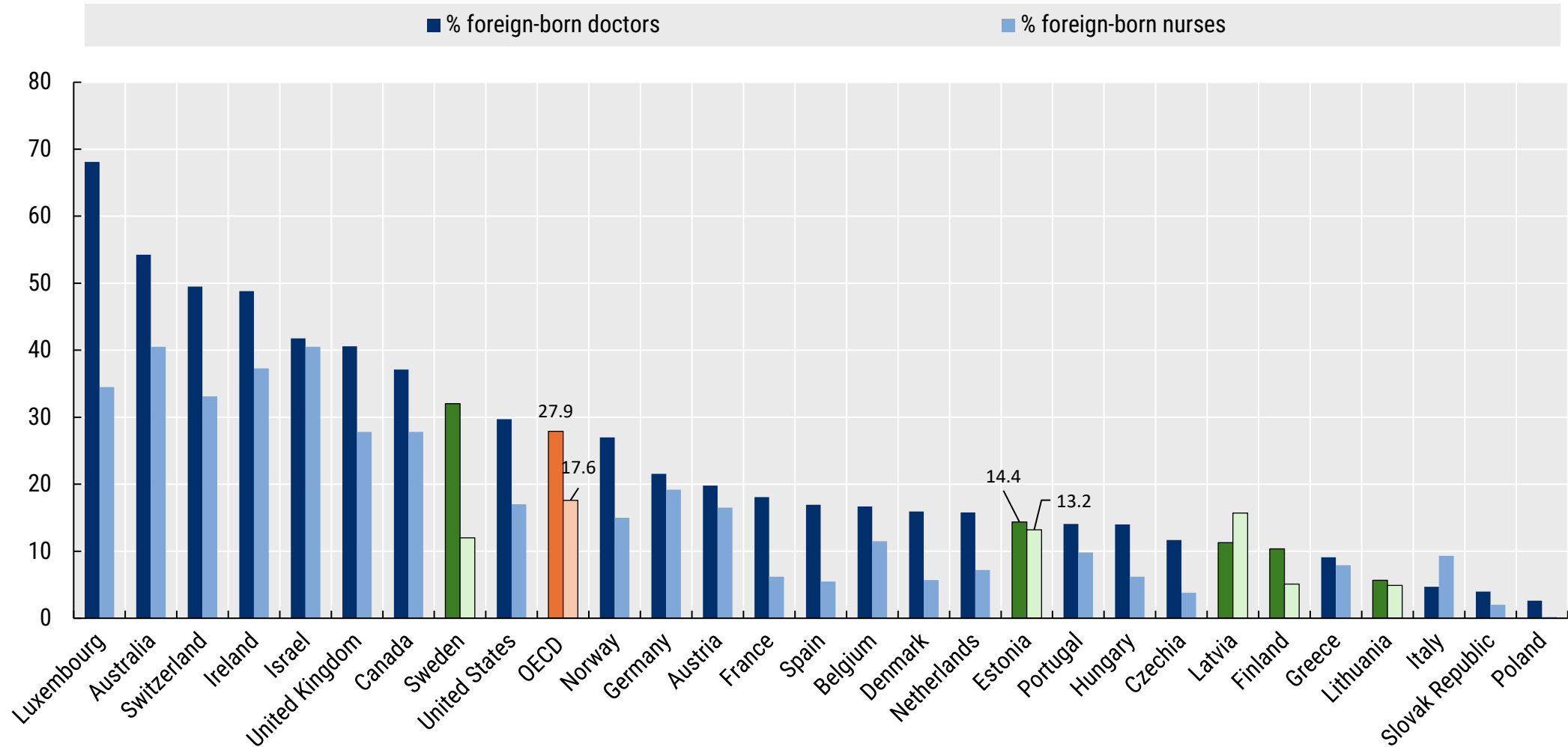


% foreign-trained



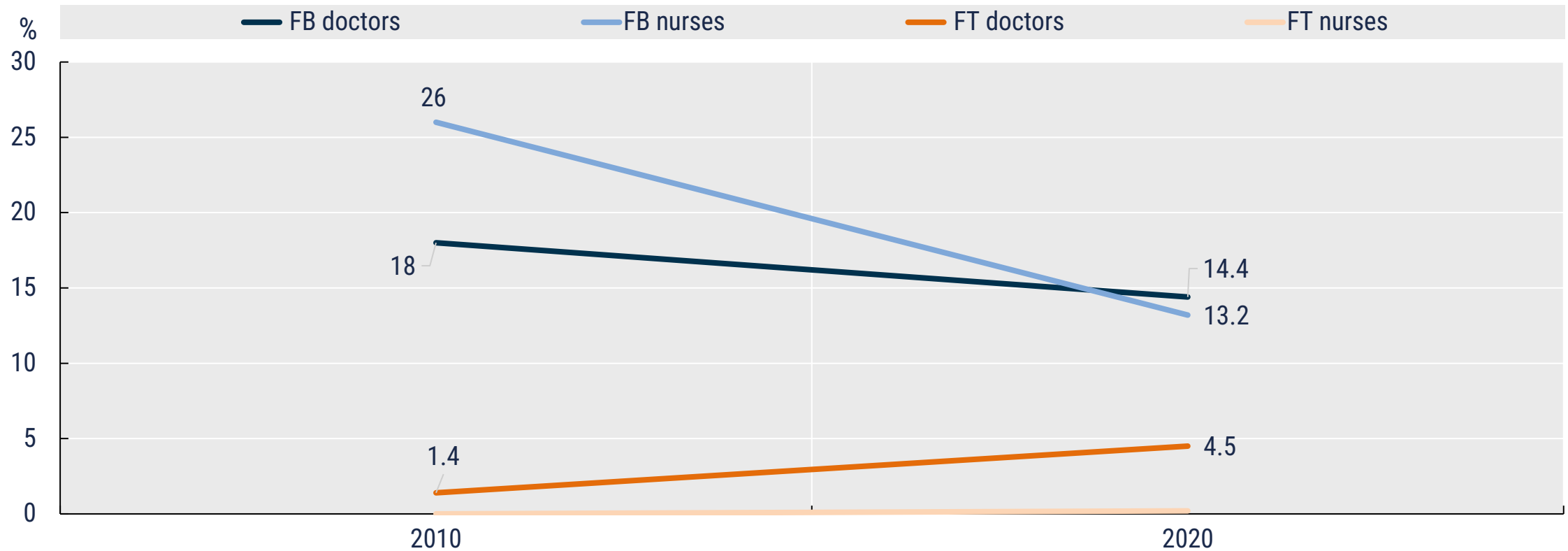


% foreign-born doctors and nurses in different OECD countries, 2020/21



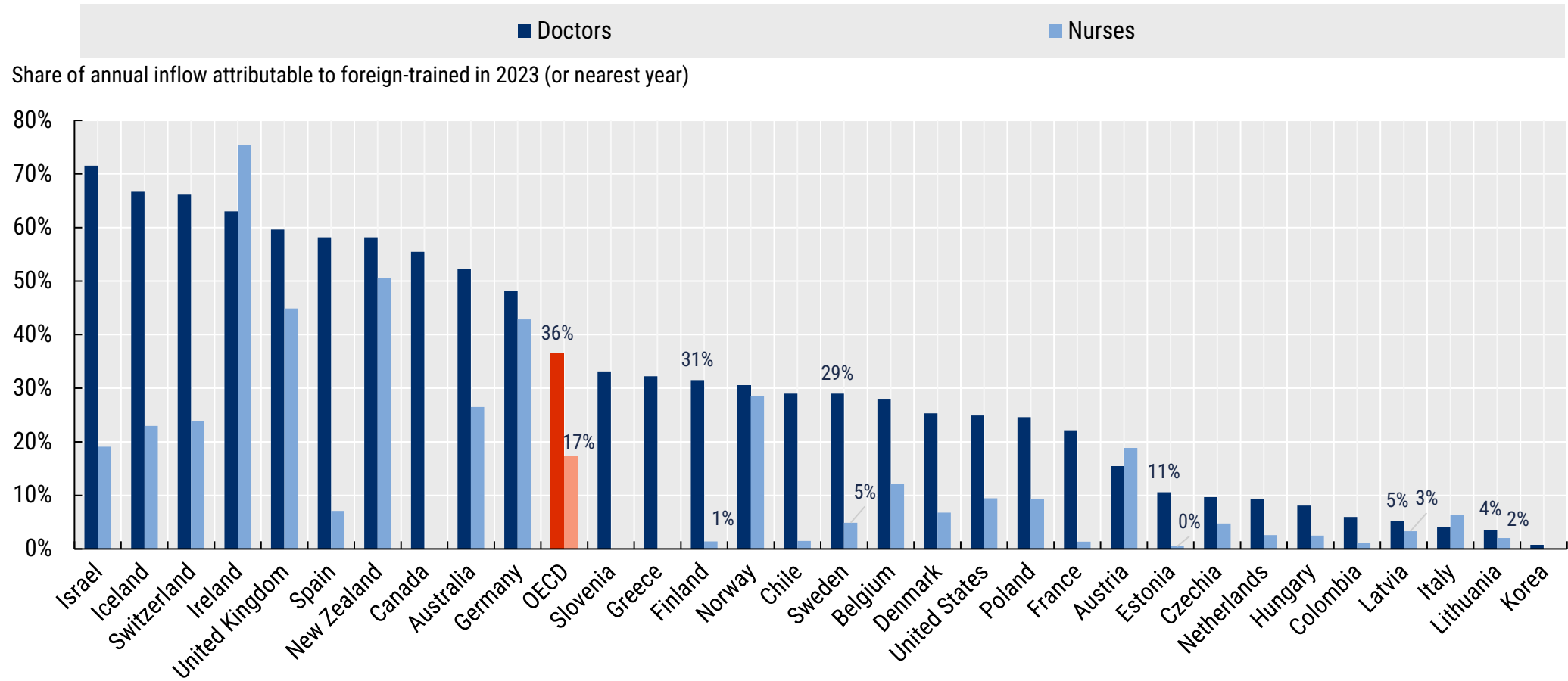


The evolution in the share of migrant health professionals in Estonia





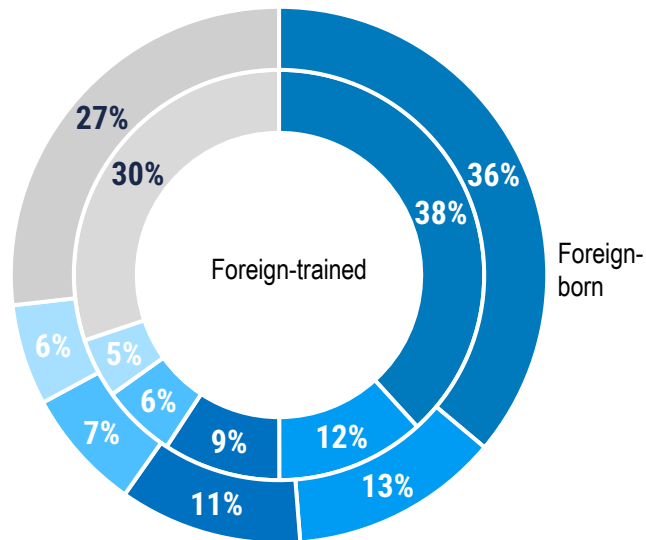
Foreign-trained health professionals are important sources of annual inflows of new doctors in the OECD, 2022





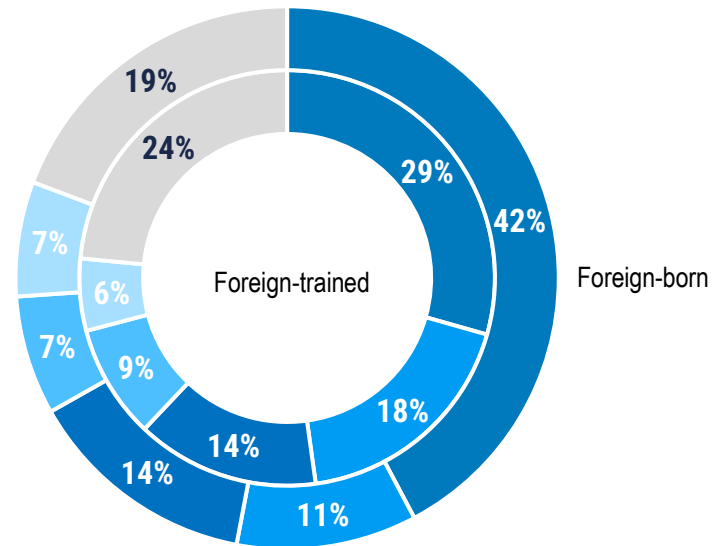
In absolute terms, immigrant doctors and nurses are concentrated in top five destination countries, 2020/21

Physicians



■ United States ■ United Kingdom ■ Germany
■ Australia ■ France ■ Others

Nurses



■ United States ■ United Kingdom ■ Germany
■ Australia ■ Canada ■ Others

Increases in the absolute numbers of foreign-born health workers (2000-2020)

Physicians

Luxembourg +479%
Finland +293%
Switzerland +289%
Norway +233%
Germany 212%
Australia 190%
Denmark 152%
Sweden 147%

Nurses

Finland +792%
Norway +325%
Ireland +267%
New Zealand +247%
Germany +221%
Spain +193%
Australia +171%
Switzerland +145%
..
Hungary 132%



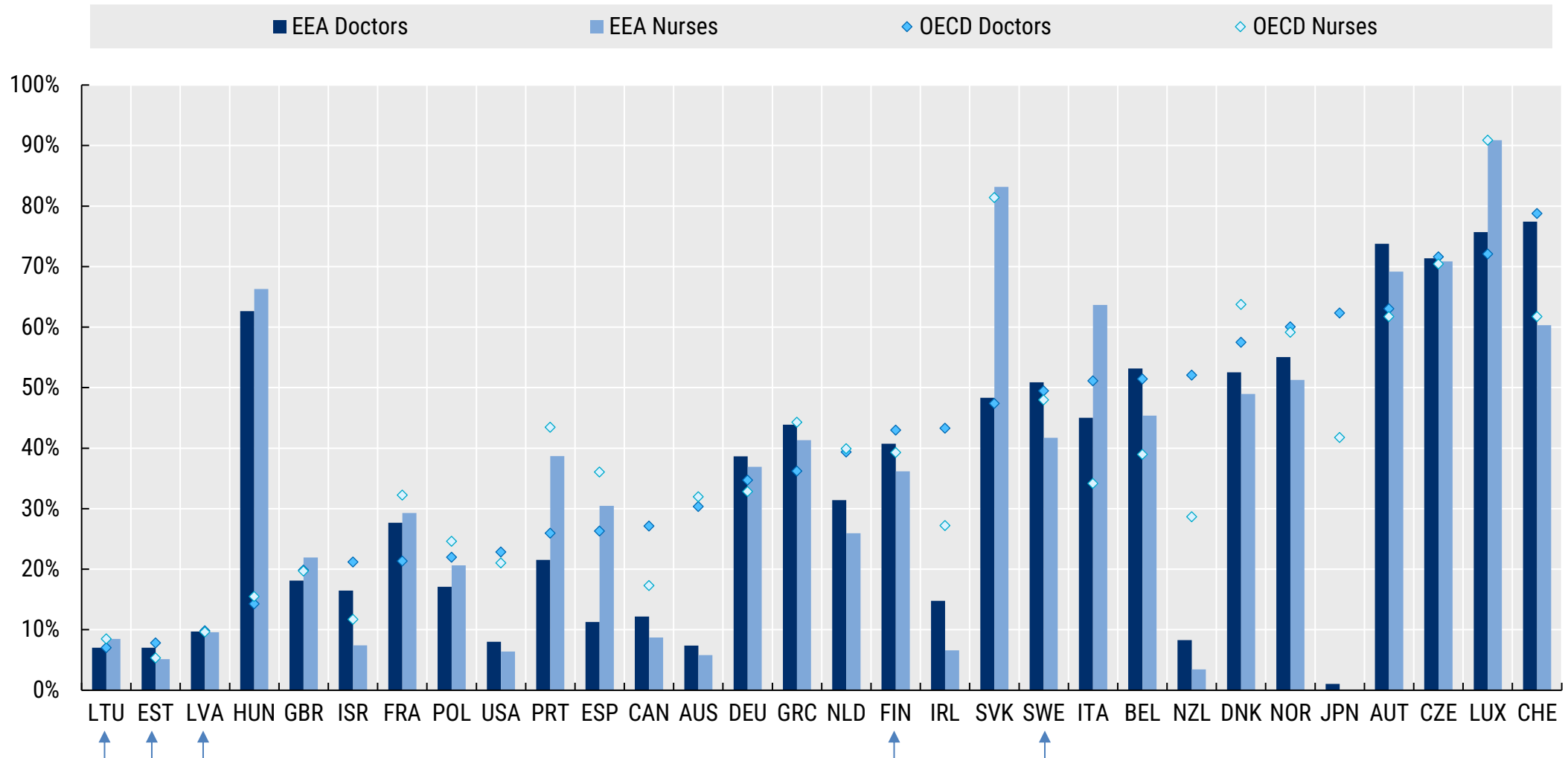
Main countries of origin for migrant doctors and nurses

Doctors	2020/21	Growth since 2000/01
India	98857	76%
Germany	31024	107%
China	30342	60%
Pakistan	29689	182%
Romania	25499	272%
United Kingdom	24548	53%
Iran	19313	100%
Russian Federation	18826	268%
Canada	17587	76%
Nigeria	17060	264%

Nurses	2020/21	Growth since 2000/01
Philippines	277266	147%
India	122400	435%
Poland	64268	232%
Nigeria	54480	295%
Germany	49584	60%
United Kingdom	49492	10%
Romania	46882	487%
China	42440	179%
Jamaica	41098	32%
Mexico	39244	214%



Share of doctors and nurses born in EEA or OECD countries among all migrant doctors and nurses, 2020/21





Emigration of health workforce in the Baltic Sea Region

All OECD countries are also sending countries for migrant health professionals. Within the OECD, international flows of health professionals follow a cascade-like pattern, where movements from one country to another create a domino effect, generating recruitments needs in other countries to fill the resulting gaps.

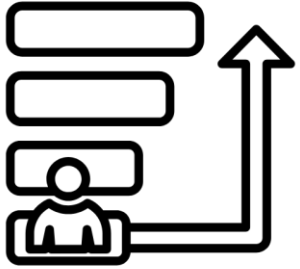
	Numbers of doctors working in other OECD countries		Emigration rate	Numbers of nurses working in other OECD countries		Emigration rate
	2000	2020		2000	2020	
Denmark	924	1342	5.0%	1595	2602	3.7%
Estonia	249	726	13.6%	184	1291	13.2%
Finland	875	1173	5.6%	5221	3827	5.2%
Latvia	508	1321	17.2%	623	2407	23.2%
Lithuania	1009	2687	17.7%	884	4508	17.1%
Poland	7327	16275	11.4%	19348	64268	23.4%
Sweden	1016	2595	5.5%	1995	4882	4.2%



EVOLVING MIGRATION AND INTEGRATION POLICIES



Policies for facilitating the mobility of healthcare professionals (1/2)



Shortage lists remain a popular tool across the OECD (AUS, AUT, BEL, CAN, DNK, FIN, FRA, GBR, IRL, ITA, NZL, SVK, USA)

- Particularly for medium-skilled and lower-skilled roles



Dedicated pathways for healthcare professionals emerging across the OECD (e.g., AUS, AUT, DEU, DNK, GBR, IRL, JPN, USA), which include:

- Mobility programmes for postgraduate medical training (e.g. IRL)
- Permits for recognition or authorisation procedures (e.g. AUT, DNK, DEU)
- Dedicated visas and permits for doctors and nurses (e.g. GBR, JPN)



Policies for facilitating the mobility of healthcare professionals (2/2)



Bilateral agreements and training programmes are used to promote skills development and address skills shortages in host countries (e.g., AUS, BEL, CAN, DEU, FIN, FRA, GBR, ITA, JPN, MEX, NLD, USA; with DNK and LTU exploring options).



Recent crises—most notably COVID-19—have prompted a wide range of **temporary policy measures**.

- Some countries were **prioritising permit applications** for healthcare professionals (e.g., BEL, CAN, ESP, IRL).
- Many countries allowed healthcare professionals to **practice under eased conditions**, including with provisional licenses (e.g., CAN, CHL, CZE, DEU, ESP, FRA, HUN, ITA, LTU, POL, PRT, SVK, USA).

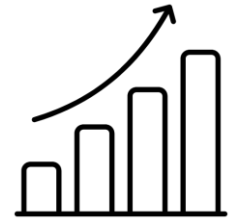


Key takeaways



Reliance on migrant health professionals continues to grow across OECD health systems.

Although traditional destination countries still receive the largest numbers, many small and mid-sized OECD countries have seen sharp increases over the past two decades.



Most migrant health professionals come from outside the OECD, yet OECD countries are also countries of origin and are losing parts of their own workforce.

Migration policies across the OECD are increasingly being adjusted to respond to rising demand for health workers.





Find out more:

Migration

Migration is a highly topical issue in OECD countries. Migrants arrive for diverse reasons – to reunite with their families, to address labour shortages, or to flee conflict. Effective policies are necessary to make the most out of international migration, to help migrants integrate and build inclusive and cohesive societies.

Policy issue

Key links

[International Migration Outlook 2023](#) >

[State of integration in Germany](#) >



Health workforce

While the supply of health workers has increased over the past few decades in OECD countries, the demand for healthcare has also increased due to population ageing. In order to address health workforce shortages, countries should increase the training of new health professionals, increase staff retention by improving working conditions, and encourage innovation related to work organisation and the use of new technologies to respond efficiently to the growing demand for care.

Policy sub-issue

Key links

[Health workforce: Health at a Glance](#) >



OECD's work on migration:
<https://www.oecd.org/en/topics/policy-issues/migration.html>

OECD's work on health workforce:
<https://www.oecd.org/en/topics/sub-issues/health-workforce.html/>

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