

Foreign-educated health workers play vital role in US health system

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Foreign-educated and foreign-born health professionals play a vital role in the U.S. health care workforce, but strategic shifts such as changes in immigration laws may be needed to stabilize the nation's health workforce, according to a new RAND Corporation study.

The two groups fill important gaps in the U.S. <u>health care</u> workforce, particularly among primary care physicians, nurses in hospital settings and other areas with worker shortages, according to findings published in the November edition of the journal *Health Affairs*.

However, continuing to rely on foreign-educated and foreign-born health workers may reduce incentives for the nation to address problems such as the inadequate supply of <u>primary care physicians</u> and lead to a less-stable U.S. health care workforce, researchers say.

"There is no cohesive national policy that outlines a strategy for how to incorporate foreign-born and foreign-trained health-professionals into the U.S. workforce," said Dr. Peggy G. Chen, the study's lead author and an associate natural scientist at RAND, a nonprofit research organization. "Policy changes could increase the stability of the nation's health care workforce, while also improving the experiences of foreign-born health workers."

The study outlines the contributions that foreign-educated and foreign-born health professionals make to the U.S. workforce, including:



- Physicians who were educated outside the United States account for about 25 percent of the U.S. physician workforce, with the largest groups being from India, the Philippines, Pakistan, Mexico and the Dominican Republic.
- Foreign-born registered nurses account for 12 percent to 15 percent of the total RNs in the United States, with 5.4 percent both foreign born and foreign educated. The largest number of foreign-educated and foreign-educated RNs are from the Philippines, followed by Canada, India, the United Kingdom and Nigeria.
- Among direct care workers, a category that includes nursing aides and home health aides, foreign-born individuals account for 20 percent to 24 percent of the workforce. The largest numbers of foreign-born direct care workers are from Mexico, the Philippines, Jamaica, Haiti and the Dominican Republic. It is estimated that 20 percent of direct care workers are undocumented immigrants.

Four major categories of visas allow legal admission to the United States for health professionals, but none is exclusive to health care workers, researchers say. The most formalized channels of entry are for foreign-educated physicians, who often come to the U.S. for medical residencies and stay once their training is finished.

Despite their significant representation in the workforce, foreign-born and foreign-educated health workers say they often face problems such as unethical recruitment practices, discrimination in the workplace and difficulties navigating cultural differences. In addition, migration of health-workers to the United States may leave lower-income nations with workforce shortages and weaker health systems.

The study's authors say U.S. policymakers may want to consider immigration changes to make it easier to recruit needed health



professionals such as direct care workers. In addition, domestic health care organizations need to commit to improving recruiting practices and workplace conditions for migrants.

Provided by RAND Corporation

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