

INTERNATIONAL MIGRATION OF KERALA NURSES

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Introduction

“To get a good job and lead a proper life” – the most common answer that any nursing student gives to the question “Why did you choose nursing for your career?”

This forms the basis of the paper – International Migration of Indian Nurses. To proceed with the subject, the reader should know the following background:

- 1) The majority of the nurses in the India hail from Kerala.
- 2) Most of the nurses are Christians.
- 3) Most of nurses hail from lower and mid-level middle class families.
- 4) Kerala has the highest literacy rate in India.

With the above mentioned background and many national and international factors sowed the perfect ground for international migration by the Indian nurses.

National factors

Many a factors when clubbed together helps to give us the better picture as to why nursing education flourished in Kerala and how it helped in the international migration of nurses.

With the Green Revolution taking place in the 1970's and 1980's, there was a drastic economic boom in the country. Along with the economic boom taking place, the government gave a huge impetus on the education sector. It should be noted that the literacy rate of women in Kerala jumped from 45 % in 1960's to 60% plus in the 1970's, whereas the national average for the same period was 12 – 13% in the 1960's and 18 – 19% in the 1970's. And by the year 2000 the literacy rate for women in Kerala was 87 – 88% and the national average was 54 – 55%. Not only that literacy was high, the ability of the people to communicate in English was good.

Though at the same time the breakup of India's population in the 1970's and 1980's mainly reveals that around 80 - 82% was Hindus, 10 - 11% was Muslims and 2 – 2.5% was Christians and balance population from other religions. The cultural and religious stigma followed in India in the 1970's and 1980's was not much different from the pre-independence era. As nursing practice involved touching members of the opposite sex, getting in contact with bodily fluids, not showing any discrimination to any human on any basis, work involving odd hours etc; majority of the Hindu and Muslim families did not allow their daughters / women flock to pursue nursing as a career. At the same time these factors did not influence the Christian families and they did not have any objection to their daughters and women flock pursuing nursing career. Hence nursing career turned out to be the sort of 'exclusive playing ground for the women flock of the Christians from Kerala'.

Another major factor with regards to Kerala was the spread of the charitable medical hospitals and medical institutes run by the various religious groups in Kerala. To be read along with point is the geographical layout of Kerala and the high density of population; almost every major town and city had one or more hospital run by a charitable hospital run by religious body. With the high literacy rate among women, it became highly feasible for these hospitals to impart medical education especially nursing education to the local population. Whether these medical institutes were run on profitable or non-profitable basis; it did not matter to the local Christian families as nursing education was affordable. This was because the main source of income for the families was derived from agriculture.

With large number of nurses passing out from the state, the number of medical institutes within the state was not enough to absorb all of them. Moreover the situation in Kerala, both in the past and present has been that the State enjoyed a low infant mortality rate and very high health standard. This further reduced the need for more nurses within the State. As the opening statement states “To get a good job and lead a proper life”, this was the dream of all the nurses also. The immediate option available to all was to work outside of Kerala. Though the situation in the rest of the country was and is totally different.

The health situation and infant mortality rate in the rest of the country was far worse. And the rural areas suffered even greater. This was due to the huge lack of medical infrastructure and medical personal available in the remote areas. The nurse to population in the country in 2004 was 0.8 nurse for every 1000 people. Thus the government effort was concentrated on improving the health situation in the remote areas, due to which basic medical facilities were opened in the rural areas. Despite the demand for nurses in the rural areas, there was not much nurses applying for the same post. This was mainly due to factors like remoteness of the work place, poor accommodation facilities, language barrier, lack of educational institutes available for their children, jobs available for their spouses, poor transportation facilities, lack of modern medical equipments and poor professional growth opportunities. Due to this most of the nurses preferred to work in the urban areas than in the rural areas. This again created saturation for the demand for nurses in the urban areas.

And finally the most important factor is the neglect shown to the nursing community in terms of economic benefits in terms of salaries, professional status, and social status. To give a realistic picture of the monthly salary range received by nurses in 2016 in India is as follows: a staff nurse received between Rs. 10,000 – 22,000; senior professor of nursing received between Rs. 100,000 – 200,000. And a student who finished nursing degree had to work at least 2 years as an intern in the medical institute/hospital with or without pay. At the maximum they would earn Rs. 2000 – 3000, if they were paid a stipend. Whereas a fresher doctor gets anywhere between Rs.15,000 – 300,000 depending on the specialization. And this figure increases drastically as the experience increases.

As for the professional status of the nurses within the medical community, it is the lowest. This could be attributed to the social stigma given by the Indian society to the nursing profession, the neglect given to the nursing education and profession by the government, the lack of political influence held by the nursing community and gender bias. And the fact that there always existed a prejudice by the North Indians to the South Indians did not make it any prettier for the nurses from Kerala to pursue a career in the North.

All these factors clubbed together make it less attractive to the nurse to pursue nursing career in India.

International factors

Starting with the Gulf Oil Boom in the 1970's, mass migration of people started from the State of Kerala towards the Gulf Countries. Here again the religious factor played an important part. Being Muslim countries, nurses were not available from within the Arab community. This created a demand for nurses in the Gulf countries. Another advantage that cropped up along with it was the fact that the Christian men flock mostly got employed in the administrative and highly paid technical jobs in the Gulf. And it made lot of sense for the men to marry nurses, so that both of them could work earning higher income and at the same time raise their family together. Together with the high salary that they could get and the currency conversion factor, Gulf became a highly lucrative destination for the Kerala nurses. Also the proximity of the Gulf countries to India was another added advantage.

The travelling time between the two places took anywhere between 3 – 4 hours only by flight. This also helped to a great extent.

With the influx of oil money, the hospitals in the Gulf were able to equip themselves with the latest medical technology. And most of the hospital management was based on the American and European style of management. This created a more professional work atmosphere which attracted the nurses, who in turn could expect a professional growth in their career.

Despite the many advantages that existed, it was not without its disadvantages. Property ownership was not allowed in the Gulf countries. Also despite the long duration that most of the expatriates have had stayed in the Gulf countries, they could never get a citizenship. Another restriction that existed was the concept of “Sponsorship”. This meant that a person had to be sponsored by a native person or a Gulf based company/hospital to work in the respective country. They could not leave the hospital and transfer to another hospital at their own free will. In short, the concept of freedom had its own restriction. Despite these disadvantages, Gulf still is a popular choice of many nurses from Kerala.

The oil boom in the Gulf had ripple effect all over the world. The economic situation also got better in the US and Europe. Job opportunities increased and women found better options in other fields of work. It should be known that in United States in the 1970's and 1980's, there existed huge dissatisfaction among the registered nurses regards the working condition and professional autonomy. This was same in Europe also at the same time period. This led to fewer people joining the nursing profession in these countries. To plug the shortfall in the nurses, these countries started looking outside their national boundaries for nurses. The search by the Westerners led them to the Gulf countries, where they were able to find their qualified nurses.

The benefit that the Westerners got from this was that a willing population of qualified nurses ready to migrate was available; the pay given to the foreign nurses could be compromised when compared to the pay given to the native westerners and the ability of the nurses to communicate in English. And for the Kerala nurses it was their ultimate dream come true. The possibility of migrating to West, chance to get citizenship and settle down in the West, to get a higher pay than what was possible in the Gulf, provide Western based education to their children; were some of the factors that made the Kerala nurses to accept the openings in the Western countries. This then opened the next flood gate for the nurses to the Western nations.

Conclusion

Like the term “Goodwill” used in business, the performance, dedication and the ability of the Kerala nurses to mingle with the local population created a very high goodwill for the nurses from Kerala. And as long as there is an international demand for qualified nurses and the working condition for nurses remain bad in India, migration of nurses will continue.

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