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NURSES TOGETHER: A FORCE FOR GLOBAL HEALTH

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Nursing Workforce in the Pacific Island Countries and Areas: Attrition and Retention

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In the Pacific Islands Countries and areas (PICs), approximately 74% of the health workforce are nurses and majority of health services are delivered by them, especially in remote islands. The proportion and demand for nursing services is likely to increase hereafter due to increasing demand for healthcare services, requiring continuum of nursing care at the health facilities and in communities. However, they continue to face significant challenges related to increasing attrition, or the loss of nurses from the workforce, which can have a detrimental impact on the quality and accessibility of healthcare services.

Health leaders in the Pacific have long recognized the importance of strengthening the nursing workforce. Commitments have therefore been made during several high-level regional forums including previous Pacific Health Ministers Meetings and Pacific Heads of Health meetings. However, the persistent shortage of nursing workforce in the PICs pre-COVID-19 pandemic has become worse post-pandemic with the recent increase in outmigration of nurses due to the global shortage and aggressive international recruitment

The [WHO Global Strategic Directions for Nursing and Midwifery 2021–2025](#) (SDNM) provides policy priorities for nursing jobs, including retention and migration policies. The [Regional Framework to Shape a Health Workforce for the Future of the Western Pacific](#) encourages regular monitoring to capture the current situation and trend and development of comprehensive retention policies to attract, recruit and retain nurses.

1. BACKGROUND

Health workers are the backbone of any functioning health system, playing a pivotal role in safeguarding the health and well-being of individuals and communities through their expertise and unwavering commitment to the delivery of health services. Therefore, a motivated and competent health workforce with the right number, at the right places, and with the right skill-mix is central to providing people-centred, integrated care in advancing universal health coverage (UHC) and ultimately achieving sustainable development goals (SDGs) and Healthy Islands vision.

In the Pacific Islands Countries and areas (PICs), approximately 74% of the health workforce are nurses and the majority of health services are delivered by them, especially in remote islands.¹ The proportion and demand for nursing services is likely to increase hereafter due to ageing populations, increasing burden of noncommunicable diseases, and climate change related health impacts, requiring continuum of nursing care at the health facilities and in communities. However, they continue to face significant challenges related to increasing attrition, or the loss of nurses from the workforce, which can have a detrimental impact on the quality and accessibility of healthcare services.

The [WHO Global Strategic Directions for Nursing and Midwifery 2021–2025](#) (SDNM), endorsed at the Seventy-fourth World Health Assembly provides policy priorities to optimize nurses' and midwives' contributions to achieving UHC. It gives a strategic direction with policy options for nursing jobs, including retention and migration policies. The [Regional Framework to Shape a Health Workforce for the Future of the Western Pacific](#), endorsed at the 74th of the Regional Committee for the Western Pacific in October 2023 encourages regular monitoring to capture the current situation and trends, and develop comprehensive retention policies to attract, recruit and retain nurses.

The WHO [Global Code of Practice on the International Recruitment of Health Personnel](#) (often known as “the Code”) promotes ethical migration of the health workforce; it discourages active recruitment from countries with critical health workforce shortages and focuses on policies and incentives which support the retention of health workers in underserved areas. Further, WHO has been working on the development of a global guidance on “Bilateral agreements on health worker migration and mobility”, which will be published soon.

¹ State of the World's Nursing Report 2020 and the State of the World's Midwifery Report 2021

2. PROGRESS AND ACHIEVEMENTS

Health leaders in the Pacific have long recognized the importance of a strong health workforce including nursing for resilient and fit-for-purpose health systems necessary to achieve the Healthy Islands vision and UHC. Commitments have therefore been made during several high-level regional forums including Pacific Health Ministers Meetings (PHMM), Pacific Heads of Health (PHoH) meetings, Director of Clinical Services (DCS) meetings, and Pacific Heads of Nursing and Midwifery (PHoNM) meetings. These high-level commitments cross-referenced related commitments for consistency and easy implementation.

Nursing and midwifery leaders led the establishment of a subregional Quality Improvement Programme (QIP) for nursing in PICs with a focus on nursing and midwifery education and regulation, starting with a scoping review including a 'road map' conducted in 2020. The PICs in collaboration with relevant partners (Australian Nursing & Midwifery Accreditation Council, The Pacific Community, World Health Organization and University of Technology, Sydney - WHO Collaborating Centre for Nursing, Midwifery and Health Development) have formed the Steering Committee to implement the 'road map'. The 3rd PHoNM meeting in 2022 committed to updating nursing and midwifery education to meet the changing population health needs; implementing policies to attract, recruit and retain midwives and nurses to ensure the availability of nurses and midwives; and investing and mobilizing more resources for nursing and midwifery education, jobs, leadership, and service delivery settings. Subsequently, the 14th PHMM in 2022 committed to continue the ongoing work on the subregional QIP for nursing with a focus on education and regulation. The 15th PHMM in 2023 committed to 'promote sustainable and ethical mobility via the WHO Code of Practice on the International Recruitment of Health Personnel and, where relevant, bilateral agreements to address the increasing migration of skilled health workers'; and 'Introduce or strengthen initiatives to make health sector jobs more attractive and rewarding, such as by putting in place the salaries, subsidies and working conditions required to retain existing health workers and encourage others to enter the health workforce'.

The results of mid-term progress monitoring of the SDNM from eight PICs indicate that policy priorities to attract, recruit and retain nurses where they are most needed are in place or enacted in 62.5% of responding countries. Some of the significant examples are:

- Fiji created nursing assistant positions, with minimum entry requirement of a certificate of Enrolled Nursing Qualification and evaluation of their salary.

- Fiji introduced 'retention allowance' of 8% across the board for all nurses since August 2023. Further, the salary steps of the nurses are being explored to revise according to the number of years of public service, they have serviced with the Ministry of Health and Medical Services (MoHMS), Fiji.
- MoMHS Fiji has recruited and deployed around 200+ nurse graduates from the two training institutions in June/July 2023.
- Vanuatu indicated that a decision was made to create an incentive package to attract, recruit and retain midwives and nurses in identified areas.
- Cook Islands, Solomon Islands and Vanuatu are in the process of developing National Nursing Strategic Plan in line with the SDNM and their National Health Plans.
- Papua New Guinea developed Rural Attraction and Retention Policy for the health workers including the nurses.
- Samoa is working on the Nursing & midwifery Organizational Structure, Career and salary Structure in alignment with the career pathway and qualifications.

On the other hand, the proportion of the reporting countries with policy priorities to reinforce implementation of the WHO [Global Code of Practice on the International Recruitment of Health Personnel](#) is relatively low at 12.5%. However, the related dialogues have started in 62.5% of the responding countries and the decision or commitment towards the policies has been made by 37.5%. For example: Solomon Islands, Ministry of Health and Medical Services held policy dialogue with the Ministry of Foreign Affairs and External Trade regarding the management of nurses' migration to other countries and the Vanuatu Ministry of Health initiated internal discussion on the management of nurses opting to migrate.

3. CHALLENGES

Despite making several high-level commitments to address the persistent challenges related to attract, recruit and retain health workers including nurses at all levels of health service delivery, the impact is visibly minimal. The persistent shortage of nursing workforce in the PICs during pre-pandemic has become worse post-pandemic with the recent increase in outmigration of nurses due to the global shortage and aggressive international recruitment. For example: Around 800 nurses from Fiji, 9 nurses from Nauru, ~15 nurses from Palau, 69 from Tonga and one from Tuvalu resigned during

the past year². This puts a strain on the existing nurses and leads to increased workload and burnout. With the loss of senior and skilled nurses, the gaps are filled by junior nurses – requiring extensive guidance, mentorship, and support in order to bridge the skills-gap, facilitate professional growth and job satisfaction, with an ultimate aim of decreasing attrition rates.

Moreover, some PICs rely heavily on recruiting nurses from overseas (for example Cook Island: ~25%), further contributing to retention challenges. These external recruits face cultural, social, and environmental challenges leading to dissatisfaction and a higher likelihood of attrition. Further, the lack of resources and limited access to adequate continuing professional development programs demotivate nurses and lead to attrition.

The [WHO health workforce support and safeguards list 2023](#) includes seven PICs: Kiribati, Federated States of Micronesia, Papua New Guinea, Samoa, Solomon Islands, Tuvalu, and Vanuatu. The countries included in this list have a UHC service coverage index below 55 and health workforce (doctors, nurses and midwives) density below the global median of 49 per 10 000 population. These countries are considered to face the most pressing health workforce challenges and require concerted investment and support.

4. FUTURE DIRECTIONS

4.1 Recommendations for governments:

In concurrent with the commitments made by the Pacific Health Ministers during the 15th meeting held in September 2023 and the Pacific Heads of Health during the 14th meeting held in April 2023, the Pacific Heads of Nursing and Midwifery are recommended to:

- 4.1.1 Develop comprehensive retention policies to attract, recruit and retain nurses by identifying and addressing the ‘push factors’ in the PICs and ‘pull factors’ by the recruiting/destination countries.
- 4.1.2 Strengthen monitoring and understanding of the dynamics of nursing workforce mobility and its impact on health systems, as well as sharing the information with neighbouring PICs to help understand that health labour market dynamics.

² Information shared through South Pacific Nursing and Midwifery Officers’ Alliance (SPCNMOA)

4.1.3 Promote the implementation of the WHO [Global Code of Practice on the International Recruitment of Health Personnel](#) to ethically manage migration through bilateral and multilateral agreements for the mutual benefit of both source and destination countries.

4.2 Recommendations for development partners:

Support the PICs in implementing the government commitments by:

4.2.1 Facilitating cross-country sharing of best practices in attracting, recruiting and retaining nurses in-country.

4.2.2 Providing technical support for the implementation of comprehensive retention policies to attract, recruit and retain nurses by identifying and addressing the 'push factors' in the PICs and 'pull factors' by the recruiting/destination countries.

4.2.3 Encouraging and promoting the implementation of the WHO [Global Code of Practice on the International Recruitment of Health Personnel](#) to ethically manage migration through bilateral and multilateral agreements for the mutual benefit of both source and destination countries.