Crossings

BRAIN DRAIN
'major crisis' for southern Africa

WHILE STUDENTS SHOW A STRONG SENSE OF PATRIOTISM AND COMMITMENT TO THEIR COUNTRIES, THEY HAVE AN EVEN DEEPER PESSIMISM ABOUT THEIR PERSONAL ECONOMIC FUTURES WHICH DRIVES A POWERFUL INCENTIVE TO EMIGRATE. WADE PENDLETON & JONATHAN CRUSH REPORT ON THE FINDINGS OF A RECENT STUDY.

The loss of professionals and other skilled people from the Southern African Development Community (SADC) region is fast assuming the dimensions of a major crisis. The countries of southern Africa pour vast resources into training to ensure that future skills needs are met. But is all this investment in human resource development really going to benefit the countries concerned? Or are they, in effect, simply providing students with "skill passports" so that they can relocate to other parts of the world? No one has really known, until now, what students intend to do with their newly acquired skills. There is an assumption that they will stay and work for their personal betterment and the development of their countries. But is this really so?

SAMP recently completed a major research project (the *Potential Skills Base Survey* or PSBS) on the emigration potential of final-year students in six SADC countries: South Africa, Namibia, Botswana, Zimbabwe, Swaziland and Lesotho. A large sample of almost 10 000 final-year students was interviewed in tertiary training institutions across the region, including universities, technikons, teacher-training colleges and nursing-training colleges. The findings of this survey should be a cause of great concern to governments and policy-makers.

Perceptions

Among its many findings about the attitudes and perceptions of students, the PSBS found that all students in all countries show very high levels of patriotism and pride in their identity as citizens of their own country. More than 80% said they were proud to be from their country

and to be its citizens. They were just as enthusiastic about passing these values on to the next generation.

Equally striking was the high proportion of students who felt committed to the future development of their country. As many as 86% of students said their personal desire was to "help build" their country. A massive 92% said they felt a responsibility to contribute their talents and skills to the growth of their country.

Offsetting this strong sense of national identity and commitment were real concerns about personal economic circumstances and the performance of national economies now and in the future. Only 2% of students were very satisfied with their personal economic circumstances and only a third thought these circumstances would be greatly improved in five years. Students were very negative about current economic conditions in their home countries and only 10% felt that the state of their national economy would be much better in five years.

Future

Fewer than 25% of all students felt that the cost of living, job availability, prospects for economic advancement and levels of taxation would get better or much better in the future. More students looked forward to increased incomes and job security, although here, too, the pessimists outweighed the optimists. On the health front, the vast majority felt the HIV/AIDS epidemic would get worse and only 35% thought that the availability of medical services would improve. Only 23% felt that their personal and family safety would improve in the future. Students in almost every country

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Hunting skills

Globalisation has fundamental implications for the mobility of people in general and skilled people in particular. Sourcing of skills from outside the boundaries of the nation-state is an increasingly important strategy for compensating for domestic skills shortages, replacing ageing populations and countering the impact of brain drains to other jurisdictions. The new global marketplace for skills facilitates aggressive international recruiting by governments and corporations. The ability of some states to exercise considerable competitive advantage in the skills market is apparent. There are inevitably going to be losers in this deadly "game" and the majority of them will be in the south. How, then, should the affected countries of the south respond?

In southern Africa, current thinking focuses on how to stop "brain drains". Several strategies are commonly proposed: make it more difficult for citizens to leave, demand agreements to stop recruiting (or "poaching" as governments prefer to call it)

or try to make other countries feel guilty about accepting our emigrants or compensate us when they do. All of these strategies are well and good, but the evidence suggests that most are simply whistling in the wind. The only real way of keeping citizens from leaving is to address the reasons why they leave. And this generally means better salaries and working conditions, greater opportunity of professional advancement and a considerable change in quality of life (including safety and security). However, what is generally absent in southern Africa is any strong conviction that the countries of the region should join the global skills marketplace as buyers and not just sellers.

This would require a major overhaul of immigration policy, such as that recently completed in South Africa with the passage in 2004 of the Immigration Amendment Act. After a decade of anti-immigrationism and prevarication South Africa is now on the right track. The new approach is a major step forward, but there are many practical flaws

still to be ironed out. Immigration laws and policies in the region more generally are still pretty antiquated. They are focused on control and keeping people out, not encouraging them to come in. These laws and policies might have been appropriate immediately after independence from colonial rule, but they are increasingly at odds with the realities of globalisation. Of all the countries in southern Africa, only Botswana adopted a relatively open skills immigration policy after independence. The positive results are plain to see in the country's economic performance.

In a globalising world of increasing human mobility, immigration and emigration must be seen as opposite sides of the same coin. All too often collective hand-wringing about the brain drain fails to consider immigration policy as an essential tool to address critical skills shortages in a country. All of the countries of southern Africa are feeling the pinch and impact of the brain drain. The situation will only get worse as the HIV/AIDS pandemic

begins to bite large chunks out of the most productive and skilled sectors. A complete rethink of how immigration policy might be used as a tool to offset the impact of the brain drain is highly advisable in all the countries of southern Africa. Ideally, this should be done cooperatively and in such a manner that there is a much greater degree of harmonisation within the Southern African Development Community (SADC). It is also no use developing skills-friendly immigration policies while citizenries remain so antagonistic to foreign nationals. Everyone who comes to lend their skills wants to feel wanted and valued not to be constantly told to "go home" by everyone they meet on the street or in the office. In other words, as well as developing proactive skills-based immigration policies, the governments of the SADC need to embark on a serious public education programme to counteract the pernicious xenophobia that is apparent everywhere.

– Jonathan Crush

Brain drain 'major crisis' for SA

felt that the government was not doing enough to create employment opportunities for new graduates.

Such was the degree of pessimism about the future in the region's training institutions that the survey's findings about potential emigration came as no real surprise:

- As many as 79% of students had considered moving to another country when they graduated. Only 17% had not considered it at all. Just more than half (53%) felt it was likely they would have left five years after graduation. As many as 35% said it was likely they would leave within six months of graduation;
- The proportion of final-year students who had already taken active steps to leave was much smaller, but not insignificant. Nineteen percent had applied or were in the process of applying for work permits abroad. Eleven percent were applying for permanent residence elsewhere and 11% for citizenship.

Preferred destinations

If students did leave were they more likely to leave the region or relocate to another country within the SADC? The preferred destination was North America (31%) followed by southern Africa (29%) and Europe (29%). Southern Africa was the first choice of students from Lesotho, Swaziland, Zimbabwe and Namibia. Europe was the first choice of South Africans. South African and Botswanan students tended to look more outside the region, while those from the other countries believed a "within-region" destination was most desirable. Ironically, the two within-region countries seen as most desirable were South Africa and Botswana.

Salaries, cost of living, ability to find a desirable job and prospects for professional advancement were considered better or much better in the most likely destination. Other factors perceived to be better by a majority of students included educational opportunities for children, medical services, upkeep of public amenities, availability of quality affordable products and customer service.

How long did SADC students intend to leave for? About 25% said it was likely they would move for less than two years and 23% said for more than two years. If nearly half of all new graduates were likely to leave their home country (and a quarter

for longer than two years), this represents a significant long-term loss of new skills.

The impact of the brain drain can be mitigated somewhat if emigrants returned with further training or retained strong social and economic ties with home while away. Encouragingly, permanent separation from home seemed less likely, but we are all aware of the student who intends to leave for a short period and ends up staying (see interview, page 3). Fewer than 10% of the students said they would give up their home, take all of their possessions or all of their assets out of the country. Similarly, very few were willing to give up their citizenship. Only 4% of students said they would never return once they had left. More than 60% said they would return at least once a year. Only 4% said they would not remit funds back home.

Emigration potential

The emigration potential of SADC students after graduation was high and economic factors were paramount when students considered what to do in the future. The primary losers from the brain drain of new skills are likely to be Zimbabwe, Swaziland and Lesotho. The primary beneficiaries are likely to be North America and Europe and, within the region, South Africa and Botswana. South Africa, at the same time, is the most likely to lose home-trained skills; in other words South Africa is likely to be both a victim and a beneficiary of the brain drain.

Although there is a remarkable degree of unanimity from country to country, some important differences did emerge. On just about every measure of dissatisfaction, pessimism and desire to leave, Zimbabwean students scored significantly higher than students in other SADC states. They were extremely negative about their personal and national economic fortunes now and in the future. They showed the greatest desire to leave and the greatest likelihood of doing so. Yet, Zimbabwean students also expressed a willingness to put their skills to work in their own country. They just did not see how this could happen.

Another difference of note concerns who paid for higher education. Obviously all governments invest heavily in higher education and training, but the ways in which students supported themselves varied considerably. Across the region nearly half of all students were on government bursaries. The

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next highest category of support was from personal or family funds (a quarter of students) and bank loans. The degree of government support varied from country to country with a high of 88% in Botswana to a low of 14% in South Africa. South African students were disproportionately funded by family and personal funds (44%), compared with a low of only 5% in Botswana. Only in Zimbabwe was the majority of students (36%) supported by banks or study loans.

Payback time

Students were not averse, on the whole, to some form of cash or in-service payback for government grants and loans. And, significantly, there was no great opposition to measures often mooted by governments to discourage new graduates from leaving, eg national service or bonding. These kinds of measures were generally not going to cause people to leave in protest. The fact remains, though, that governments face an uphill struggle if they are going to keep students at home, capitalise on their desire to serve and recoup their investment in skills development. Failing that, governments should be looking at taking advantage of the new global market in skills and importing skills trained elsewhere. In truth they should probably be doing that already.

Mobilising the skills of our health researchers

MEASURES ARE BEING TAKEN TO SET UP A NETWORK OF INSTITUTIONS THAT WILL ENABLE AFRICAN HEALTH PERSONNEL WHO ARE CURRENTLY SPREAD ACROSS THE GLOBE TO POOL THEIR FINDINGS AND RESOURCES.

The Equinet/HST Newsletter of November 2004 comments that within southern Africa health personnel continue to be scarce in services where they are most needed, that there is a critical bottleneck in the uptake of new resources from global funds and that the region is suffering from escalating "out migration" of health workers.

Dealing with this impact of the migration of health personnel raises debates about effective and just strategies. Those that restrict health workers' rights of movement often don't work and punish individuals. "Ethical human resource" policies and codes appear to have made little difference to practice on the ground, especially when movement is driven by pull and push factors in both sending and receiving countries. So what comprehensive measures will secure the human resources that southern Africa needs for its health services?

Equinet is addressing this through a network of institutions from government and non-government sectors in southern Africa and working with institutional hubs in Canada, Australia and the UK (given their role as countries absorbing significant numbers of the regions' health workers).

At a meeting in April 2004 the network of researchers developed an analytical framework to guide this work. The framework takes the policy interests of the country planners and authorities in the region as the starting point and includes four major components:

- equitable human resource policies – what encourages health workers to work in areas of greatest need;
- ethical human resource policies – how to respond to the international migration of health workers;
- how the HIV and AIDS epidemic and the resources for AIDS are affecting the distribution of health personnel; and
- what can we learn as a region and where do we need to act regionally?

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Women a 'brake' on emigration

ALTHOUGH THERE ARE MINIMAL GENDER DIFFERENCES IN THE REASONS RESPONDENTS GIVE FOR WANTING TO LEAVE, SKILLED PROFESSIONAL WOMEN ARE LESS LIKELY THAN MEN TO ACTUALLY EMIGRATE, WRITES **BELINDA DODSON**.

Are women as likely as men to want to emigrate? Do they cite similar reasons for choosing either to go or to stay? How do gender relations affect potential emigration? Results of a SAMP survey of South African skilled professionals suggest that women have considerably lower emigration potential than men, and that this acts as a "brake" keeping both skilled men and skilled women in the country.

Professional women are more likely than men to say that it would be "difficult" or "very difficult" for them to leave South Africa. More men than women have given "some" or "a great deal of thought" to emigrating. Women wanting to leave are also more likely to want to live outside South Africa temporarily, whereas more men would leave permanently. Women's responses suggest that they would be more likely than men to make frequent return visits to South Africa, less likely to dispose of assets in South Africa and less likely to wish to retire or be buried in a foreign country. In addition, close to half the men, but fully two-thirds of the women, say they simply could not afford to emigrate.

What is striking is that there are minimal gender differences in men's and women's reasons for wanting to leave. There is general gender agreement about satisfaction or dissatisfaction with a range of "quality of life" indicators. Economic factors, such as taxation and the cost of living, and social concerns, such as safety and security, are the main sources of dissatisfaction for both genders. However, women express higher levels of dissatisfaction relative to men with employment factors, such as their job, income, job security and prospects for professional advancement; and aspects of everyday family life, such as access to acceptable housing, schooling and medical services. Overall, skilled women are slightly more satisfied with their present quality of life than men are, helping to explain women's lower emigration potential.

Most respondents, men and women, anticipate a decline in social and economic conditions in the next five years, especially in education and health care. Such pessimism is higher among men than among women. The biggest "push" factors for both men and women are crime and lack of security. There is a small gender difference in the relative significance of factors that would encourage them to stay in South Africa: men rank improved security first, followed by "family" and "patriotism", whereas more women rank "family" as the primary consideration deterring them from emigrating.

If the survey results are an accurate predictor of future emigration, then the brain drain should be predominantly male. However, the fact that most people migrate not as individuals but in couples or families makes such a conclusion oversimplistic. The relation-

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ship between gender and migration has to be considered in terms of gender relations and migration as a family decision. Women's reluctance to emigrate might therefore serve to keep women *and* men in South Africa.

Both women and men are fundamentally concerned about their families' welfare and security. When perceived threats to that welfare outweigh a woman's strong ties to place, a South African family, including one or more skilled adults, is likely to emigrate to somewhere like Australia or Canada. The lesson from a gender analysis of the brain drain is that it is in the *social* sphere of security, education and health care that the solution to the loss of core skills to the economy must be sought.

For more information on this study see chapter two of David McDonald and Jonathan Crush, eds, Destinations Unknown: Perspectives on the Brain Drain in Southern Africa (SAMP and Africa Institute, 2002).

Escaping a toxic society

INTERVIEW WITH NOMUSA MNGOMA, OCCUPATIONAL THERAPIST, CANADA.

'The reason I originally left South Africa was the urgent need to escape the toxic society that was slowly driving me insane. It dawned on me that no matter what I did, how much I earned and excelled, as a black person my existence and my worth would never be acknowledged in South Africa.

I had thought about leaving many times before, but there were always reasons to put it off. It was unthinkable to my family – we had always been very close. My fellow black people, particularly young people, would be let down if I left. My peers said that people should stay and fight the apartheid system.

I also left because I wanted better opportunities for my children and myself. Immediately after I decided to leave, I got a job offer in Canada and the emigration process began. The process took more than a year to complete because of the red tape. The reception in Canada was amazing. I felt like I was a human being. Professionally, my expertise was valued and appreciated. I am currently working on my PhD and raising a family. I continue to have very positive experiences in Canada. My job is challenging yet fulfilling.

Many wonderful changes have occurred in South Africa since I left. We go back to visit family on a regular basis. The reception we get is mixed. Some people seem to resent the fact that we left South Africa in the first place. Some seem to resent even more the threat that we may one day want to return and take over their jobs. Now that things have improved and more opportunities have opened up, how dare we think we can come back and take over?

Would I go back to South Africa? Yes, without a doubt. At least that is how I feel most of the time. Unfortunately, it takes about a week of being back to make me question my willingness to return for good. I do hope to return some day, as I know that I have a lot to contribute. Do I regret my decision to leave? While I do miss my family, the answer is NO, not for a second. It's been quite an adventure, even though I have had to work hard on my studies. I would do it over again in a heartbeat. Most importantly, my children will have better opportunities than I ever had growing up in apartheid South Africa. To me, that's all that matters.'

Health professionals wrestle with push-pull factors

POOR WORKING CONDITIONS, UNDERSTAFFING AND PERSONAL INSECURITY COMBINED WITH HIGHER SALARIES IN OTHER COUNTRIES ARE SOME OF THE FACTORS DRIVING SKILLED WORKERS IN THIS FIELD TO SEEK BETTER OPPORTUNITIES ELSEWHERE, WRITES **WADE PENDLETON**.

A crisis in the migration of health workers both internationally and internally from the public to the private sector, from rural to urban areas and out of the health sector altogether was the focus of a three-day workshop on migration and health held by the Migration Dialogue for Southern Africa (Midsa) in Cape Town, South Africa, on 24-26 November 2004.

Ms Thembisile Rose Mdlalose, director of human resources development in South Africa's Department of Health, said the government's response to this migration has been based primarily on research exploring "push" and "pull" factors, which fall into four main categories: economic, political, job-related and social.

Push factors influencing health professionals include crime and political insecurity and, perhaps most critically, poor working conditions, understaffing and a lack of opportunities for professional growth. Pull factors identified include the perceptions of higher salaries elsewhere, a desire to improve financial status, opportunities for career development, personal security and stability and improved working conditions.

Represented at the workshop were the governments of Angola, Botswana, the Democratic Republic of the Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, South Africa, Seychelles, Swaziland, Tanzania, Zambia and Zimbabwe. Also present were members of the Southern Africa Development Community (SADC), the African Union (AU), the World Health Organisation (WHO), the UN High Commissioner for Refugees (UNHCR), the Australian High Commission, the Canadian High Commission, the US embassy, the Swedish International Development Agency (SIDA), the International Organisation for Migration (IOM) and SAMP.

Strategies

Mdlalose noted that the South African Department of Health had developed a number of practical retention strategies for reducing migration among health workers. First, the department had investigated incentives for rural health workers, improved salaries and conditions of service, overseas training opportunities, coupled with contractual bonding, an improved communication strategy and a study of occupational risk.

The department was also exploring training of mid-level and community health workers, work exchange programmes and strategies to attract returning migrants. Health professionals working in South Africa are required to participate in the Community Service Programme and the department was developing support structures for community service professionals, as well as committing itself to continuing research and impact evaluation of the programme.

South Africa is a signatory to the Commonwealth Code for Ethical Recruitment and does not recruit health professionals from either the SADC or from other developing countries.

Professor Eric Buch, health adviser to the New Partnership for Africa's Development (Nepad), gave an overview of the Nepad Health Strategy, which has been adopted by Africa's

Ms Thembisile Rose Mdlalose, director of human resources development of the South African Department of Health.

> The department of health had developed a number of retention strategies for reducing migration among health workers.

health ministers and the AU. It includes a focus on the increasing migration of health professionals out of Africa and the need to stem this flow, which has a direct impact on the increase of the burden of disease, which in turn impedes the social and economic development of countries in the region. Initiatives — such as the development of ethical approaches to recruitment, financial compensation from recruiting countries and retention strategies — were put forward as possible means of reducing the negative effects of the brain drain.

Dr Barbara Stilwell of the WHO described the global context within which the migration of health professionals needs to be understood, but also noted the difficulty of obtaining sufficiently reliable data to track the extent of migration. Stilwell described the various codes of practice pertaining to the recruitment of skilled health professionals that had been adopted, but emphasised that while these codes of conduct were well-intentioned, they were not legally binding, especially for the private health provider sector, and called for the need to monitor the implementation of such agreements. She confirmed that in most parts of the world the push and pull factors are very similar, but drew attention to the special circumstances related to the nursing profession.

Impact of HIV/AIDS

Professor David Sanders, of the School of Public Health, University of the Western Cape, provided information on research on the working conditions and emigration of nurses in the Western Cape, as well as the impact of HIV/AIDS on the nursing profession. Sanders noted that there were high levels of demoralisation among nurses and that many of them believed that poor working conditions and a lack of support and training were driving many nurses to emigrate. Sanders also described what he termed the "development paradox", namely that the loss of professionals to developed countries cost the same amount as foreign aid received and that, therefore, this represented a reversal of development aid.

During the subsequent discussion, participants noted the need for further research into the causes of and potential solutions to the push and pull factors as a means to address the loss of health professionals. Participants also suggested that investments specifically in rural development might serve as an incentive to reduce migration.

Dr Meera Sethi, the IOM's regional adviser for sub-Saharan Africa, spoke of the importance of not only focusing on international migration, but also of taking internal migration into account. She noted that key issues in addressing the problem were the disparities between countries, transit and irregular migration, the feminisation of migration and the international mobility of workers generally. Sethi emphasised the need for a comprehensive approach to human resources development and suggested that responses adopted by sending countries would be different to those adopted by receiving countries.

Government participants agreed that urgent steps needed to be taken to counter the effects of the "brain drain" in the health sector to retain public health professionals and to tap the resources of the African Diaspora.

The international mobility of health professionals

A South African case study

THE BEST WAY TO LIMIT THE ADVERSE EFFECTS OF THE EMIGRATION OF HEALTH WORKERS IN DEVELOPED COUNTRIES IS TO RAISE THE STATUS OF THE HEALTH CARE PROFESSIONS, WRITE **J.C. DUMONT** AND **J.B. MEYER**.

The international mobility of highly skilled workers increased substantially in the 1990s. Most visible in professions connected with new information and communication technologies, it also became increasingly common among health professionals.

In South Africa, in particular, where the migration balance has deteriorated steadily in the past 15 years, the international mobility of health professionals has become an important issue.

Statistics show that more that 23 400 health workers from South Africa currently practise a medical profession in Australia, Canada, the US, New Zealand or the UK. This figure corresponds to approximately 9.8% of all health professionals registered in South Africa, suggesting that emigration rates are significantly higher for health workers than for skilled workers in general (7%). Practitioners (doctors, pharmacists, dentists, etc) are the largest category of expatriates, with 8 921 individuals, representing almost 17% of the corresponding available labour force in South Africa.

Emigration among nurses and midwives, though rising sharply, still remains relatively low, representing 5.4% of the available labour force in South Africa, even though it is possible that many emigrants are among the most highly skilled workers. However, it must be remembered that they include earlier waves of migration.

Nevertheless, they confirm the recent increase in the emigration of South African

WHO confirms negative impact of exit

A DROP IN THE QUALITY OF HEALTH CARE SERVICES, ACCOMPANIED BY INCREASED INEQUALITY IN ACCESS AND DEMORALISED, OVERWORKED STAFF, ARE SOME OF THE CONSEQUENCES OF THE BRAIN DRAIN IN THE SECTOR, ACCORDING TO A RECENT STUDY.

AFRICA'S health professionals are flocking to the UK, Canada, France and Australia and, recently, to Arab countries.

This was one of the findings of a study on the migration of health professions from six countries, presented at the Migration Dialogue for Southern Africa (Midsa) workshop by Ms Magda Awases, the World Health Organisation's (WHO's) regional adviser on human resources development, who is based in the WHO's regional office for Africa in Brazzaville. The study was conducted in 2001-2002 and the countries surveyed were Cameroon, Ghana, Senegal, South Africa, Uganda and Zimbabwe.

Awases noted there was an increase in the migration of skilled and experienced health workers (especially in the 30-49 age group) from African countries primarily to the UK, US, Canada, France, Australia and, recently, Arab countries. She cited a 2001 Organization for Economic Cooperation and Development (OECD) health project report in which it said 14% of foreign-trained medical practitioners in the UK came from Africa.

Respondents in the six-country survey were asked about their intention to migrate. Ugandan respondents had the lowest intention at 26%, then came Senegal at 38%, followed by Cameroon 49%, South Africa 58%, Ghana 62% and Zimbabwe 68%. Reasons for migration varied. However, some of the main push factors were the desire for further training, poor remuneration and working conditions, lack of clear career profiles, political conflict and war. The main pull factors were better remuneration, improved standards of living and opportunities for educational and/or career advancement.

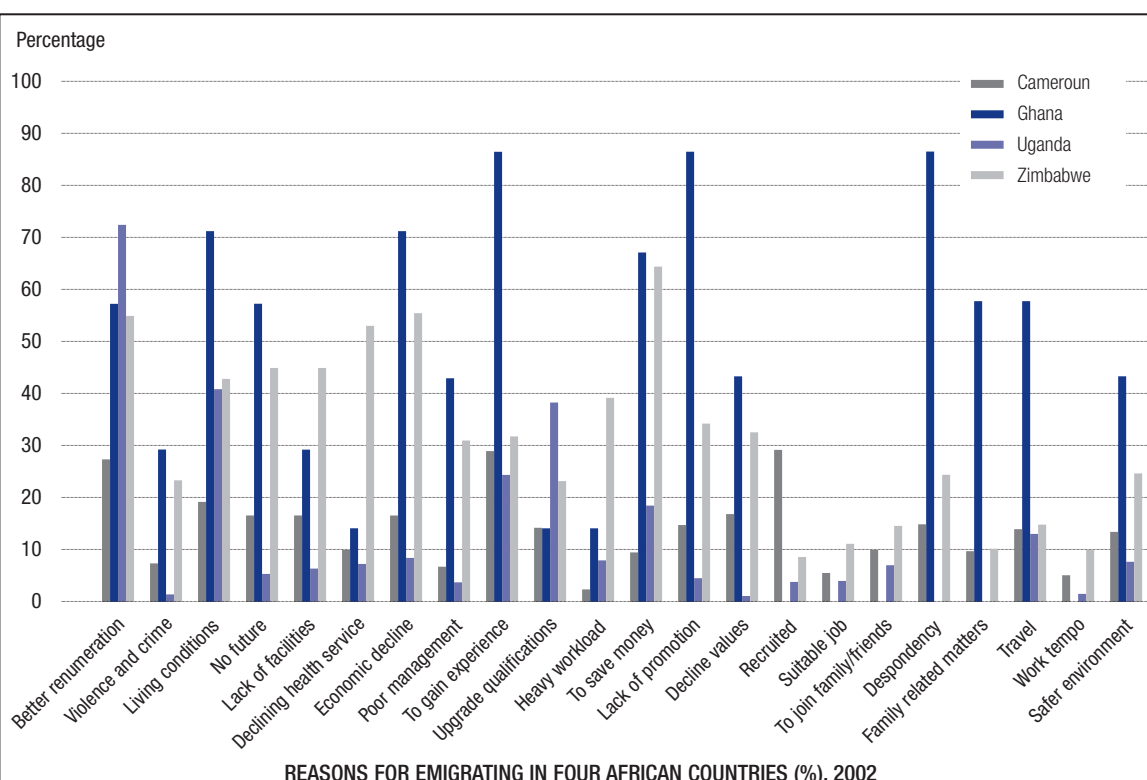The WHO study identified some of the effects of the migration of health workers as:

● The quality of health care services was adversely affected and there was an increasing inequity in health;
● Maldistribution – reduced access to health care, particularly in the rural areas with the majority of the people;
● Depletion of the health workforce – severe shortages of skilled human resources;
● Remaining health workers were demoralised, had high workloads and were poorly paid.

Recommendations from the study included:

● Strengthening national and regional training institutions;
● Country-to-country agreements and exchange programmes;
● Adopting a position on compensation for health workers' recruitment;
● Monitoring trends on migrations;
● Bilateral agreements;
● An international code of practice for ethical recruitment by all countries; and
● Support to countries through provision of sufficient resources for the development of human resources.

Awases concluded by listing various initiatives in place to reduce or manage the problem of the outflow of skilled health professionals. These initiatives are primarily aimed at addressing the factors that lead to out-migration in the first place.

For more details of the WHO study see the synthesis report, *Migration of Health Professionals in Six Countries,* by M Awases, A Gbary, J Nyoni and R Chatora, published by WHO, Regional Office for Africa, Brazzaville, 2004.

Magda Awases

REASONS FOR EMIGRATING IN FOUR AFRICAN COUNTRIES (%), 2002

health workers, especially nurses. The factors that determine the international mobility of health professionals broadly coincide with those that apply to highly skilled workers in general and derive from a combination of push and pull factors. However, certain aspects that are more specific to health workers also need to be mentioned, such as relative pay in origin countries and deteriorating working conditions in the health sector. Exposure to AIDS and other endemic infectious diseases like tuberculosis, insecurity resulting from delinquency, the lack of suitable equipment and social and racial factors are cited as difficulties that specifically affect the practice of medicine. In the case of South Africa insecurity and crime are also quoted as some of the most important factors for expatriation.

The South African example shows that emigration is not always the main cause of the problems facing the health systems of developing countries, even though it remains an aggravating factor. For example, there are approximately 7 000 South African expatriate nurses in the main Organization for Economic Cooperation and Development (OECD) member destination countries; at the same time, there are 32 000 vacancies in the public sector and 35 000 registered nurses in South Africa are either inactive or unemployed.

The South African government recently introduced a series of measures intended to retain South African workers, and make it easier for skilled foreign workers to immigrate. The main reforms include: the introduction of compulsory community service; training; improved working conditions, including pay; and greater international cooperation with the leading countries of destination for South African health professionals.

The detailed study of South Africa shows that, in countries facing an exodus of skilled labour, government policy in the health sector and beyond has a key role to play in promoting and improving human resource management. In South Africa the report shows how important it can be, both at national level in countries of origin and at international level, to strengthen policy coherence in the spheres of migration and development aid to ensure that the benefits arising from the international mobility of health professionals are shared in a way that is both fair and sustainable.

In the medium term however, the best way to limit the potentially adverse effects of the international mobility of health workers is to increase training in developed countries where shortages exist and to raise the status of the health care professions so that they attract recruits in sufficient numbers to address the consequences of ageing populations.

Zimbabwe's professionals vote with their feet

THE NEW BRAIN DRAIN SURVEY SHOWS THAT **57%** OF SKILLED WORKERS HAVE GIVEN A 'GREAT DEAL' OF THOUGHT TO LEAVING, WRITE **DANIEL TEVERA** AND **ABEL CHIKANDA.**

Already beset with a host of domestic problems, Zimbabwe now faces the prospect of a serious skills shortage in crucial sectors of the economy and public service. Zimbabwean professionals are responding to the crisis not by digging in, but by leaving. South Africa, the UK and the US are the primary beneficiaries of this growing exodus. All of the evidence suggests that this movement is likely to continue and even accelerate in the future.

Recent research in Zimbabwe provides considerable insight into the reasons for the exodus and what it would take to turn the situation around. *The New Brain Drain From Zimbabwe* (SAMP Policy Series Paper No 29) reports the results of a survey focused primarily on the emigration potential of black Zimbabweans. *Medical Leave: The Exodus of Health Professionals from Zimbabwe* (SAMP Policy Series Paper No 34) focuses on the situation in the grossly understaffed public health sector.

The "New Brain Drain" survey respondents were drawn from a wide variety of professions and sectors and therefore represented a broad cross-section of skilled Zimbabweans. The first significant finding was that 57% of skilled Zimbabweans who remained in the country had given a "great deal" of thought to emigration; another 29% had given the matter some thought. Only 13% had not thought about leaving. A comparison with South Africa is germane since South Africa is widely believed to be undergoing a crippling brain drain. In South Africa only 31% of the skilled population

> ### This is not therefore a population that sees emigration as temporary exile

had given a great deal of thought to emigrating, with 31% having not thought about it at all.

Thinking about leaving and actually doing so are obviously not the same thing. The survey therefore sought to establish the likelihood of Zimbabweans actually leaving within a specified time frame. More than a quarter (27%) said it was "likely" or "very likely" that they would leave within six months. Another 28% were committed to emigrating within two years. Another 12% said they were committed to emigrating within five years.

These are sobering statistics, unmatched in any other country in the region. They suggest that the pool of future emigrants in Zimbabwe remains massive. The firmest indication of emigration potential, however, is whether a person has acted on his/her desires by applying for emigration documentation. Many emigrants of course do not apply until they are already overseas. However, the survey found that nearly 20% of the resident skilled population of Zimbabwe had either applied for or were in the process of applying for a work permit in another country.

How permanent is emigration likely to be? Are people so disillusioned that they wish to leave forever or would they return if conditions improved for them at home? The survey found that 51% had a strong desire to leave permanently (for longer than two years). Again, 43% said they would prefer to stay in their most likely emigration destination for more than five years. This is not therefore a population that sees emigration as temporary exile. They want to leave and they do not expect to be back soon, if ever.

The impact of the "brain drain" on a health sector being battered by the HIV/AIDS epidemic is already severe. Further emigration will compound the problem, emptying hospitals of staff and compromising patient care. An analysis of health sector data shows that many health professionals have moved from the public to the private sector which offers higher salaries and better working conditions. Others in the public sector moonlight in the private sector to augment their wages. Exhaustion and overwork are the inevitable result. Disgruntled

'Our nation is in exile'

'I am a candidate attorney with a law firm in Johannesburg. I am Zimbabwean born and bred. One of the main reasons I came to study in South Africa is that I didn't qualify to study at the University of Zimbabwe. The standard in Zimbabwe is so high that it's very difficult to get in. I was supposed to go to Australia. I had been accepted. Everything was in order. But after Black Thursday in Zimbabwe, when the Zimbabwe dollar crashed, it was too expensive. I settled for the next best thing, which was South Africa.

I came here about five years ago. My idea was to come to Rhodes University, get a qualification, go back to Zimbabwe and carry on with my life. I never thought twice about that. However, in time certain events happened and the situation is now different, it's not so desirable to live in Zimbabwe any more. It's not worth my while to go back. There's no scope for any development or anything for me in Zimbabwe, so why must I waste my time going back there? I'm going to go wherever I can make the most of my life. I actually stand a better chance of survival if I stay in South Africa and make the most of what I've got here.

My parents even now are encouraging me to leave South Africa and urging me to go and find my fame and fortune overseas, anywhere but South Africa. I'm here at the moment, but if you guys decide to kick me out, I'll be somewhere else, but I won't be in Zimbabwe. If I go back to Zimbabwe now, all the people, talking about my age group, there's nobody there that I know who's in the country. Anybody I went to school with, anybody I associated with, any of my friends, anyone from my age group, there's no one there. They've all left; it may not necessarily be South Africa, but they've gone to wherever it is that they feel they can better live their lives. All those people who were supposed to enter the job market and be productive in Zimbabwe, they all got educated, they've left and are productive elsewhere. Our generation is a nation in exile.

I've probably seen my parents, because they're still there, for less than half a year in the last six years. And it's very depressing, it's a temporary existence, it's lonely. And you start feeling depressed when you realise if I was in my own country with my family around me, I wouldn't be in this situation that I am now. As difficult as it is for foreigners here, and I'm speaking specifically of Zimbabweans in South Africa, and especially in Johannesburg, we are here in our numbers. And I'm not talking about entry-level sort of people. I'm talking about qualified people, who have jobs. So yes, there are hurdles in place, but somehow Zimbabweans are making it, and managing to get these jobs and managing to live in fairly decent places.

Ultimately, I want to go back to Zimbabwe. In fact, I will go back, there's no question about that. I'm a Zimbabwean, I'm proud of that fact, I love my country and I just wish things were different there.'

Interview with black Zimbabwean male lawyer, Johannesburg.

Following in their parents' footsteps?

SOUTH AFRICAN STUDENTS HAVE A STRONG DESIRE TO EMIGRATE, SUGGESTING THERE IS LITTLE HOPE OF AN END TO THE BRAIN DRAIN. THESE ARE THE FINDINGS OF **WADE PENDLETON** AND **JONATHAN CRUSH** IN AN ANALYSIS COMPARING THE VIEWS OF CURRENT SKILLED PROFESSIONALS ON LEAVING THE COUNTRY TO THOSE OF STUDENTS.

SAMP conducted two national surveys of attitudes towards emigration in South Africa. The first was a representative survey of skilled South Africans (SAMP Policy Paper Series No 18) and the second a survey of final-year students (to be published).

The pool of skilled South Africans who might conceivably leave is a large one. More than a third (38%) of professionals say they have given the idea of leaving a "great deal" of thought. The final-year students were no different, with a total of about 40% who said they had given the matter a great deal of thought.

However, while there was no discernible difference between white and black professionals, there were marked differences by race among students. Almost half of the final-year white, coloured and Indian students had given emigration a "great deal" of consideration, compared with 36% of black students.

> **The results do not bring much comfort to those who imagine that post-apartheid students are more patriotic and loyal than their parents.**

There was little difference in the percentage of black students at universities, technikons and nursing colleges who had given moving a "great deal" of consideration.

Thinking about leaving and actually doing so are not the same thing. Only 20% of skilled South Africans said it was very likely that they would leave permanently. Slightly higher proportions of skilled whites (22%) than blacks (15%) said that a permanent move was very likely. The students were not asked about making a permanent move, but 18% said they would want to stay for more than five years, with percentages of black and white students about the same.

The firmest indicator of intention to leave is whether a person has actually begun the process of application for emigration documentation. Up to 6% of skilled workers said they had applied for work permits in another country, 5% had applied for permanent residence elsewhere and 3% had applied for foreign citizenship. Again, there were no statistically significant differences between skilled white and black South Africans. Not many students had taken active steps to make emigration possible. Very few had applied for a work permit (fewer than 7%), permanent residence (fewer than 4%) or citizenship (fewer than 6%) elsewhere.

A composite statistical index was developed by SAMP to summarise each individual's potential to emigrate; the same index was used on both surveys. About 2% of people in both surveys fell in the "very high" category of emigration potential (of leaving South Africa for a period of two years or more, within the next two to five years). Up to 10% of skilled workers and 20% of students had a "high" emigration potential and 25% of both skilled workers and students had a "moderate" emigration potential. Only 20% of skilled workers and 2% of students had no emigration potential.

In other words, in general, students had a *higher* overall emigration potential than their parents. At one level this is not surprising. Newly minted graduates are far less encumbered by family and social and economic ties than most working professionals. However, the results do not bring much comfort to those who imagine that post-apartheid students are more patriotic and loyal than their parents. In fact, personal advancement and success feature much more strongly than patriotism and loyalty in the calculations of most of today's students.

Skilled workers and students had about the same preference for migration destinations. In order of preference they are Europe, including the UK (about 40%), the US (about 25%), Australia/New Zealand (about 20%) and Asia (about 10%). Southern Africa (about 5%) and elsewhere in Africa (fewer than 1%) are also choices for emigration destinations.

Skilled workers were asked about their satisfaction on a wide variety of "quality of life" measures. They had high levels of dissatisfaction with the cost of living, levels of taxation, safety and security and the standard of public and commercial services. With the exception of standard of services, dissatisfaction extended across racial boundaries and was not a predominantly white preoccupation. More than half the students were dissatisfied with all the "quality of life" measures in South Africa. The highest measures of dissatisfaction were about level of income, the HIV/AIDS situation, personal and family safety, the quality of upkeep of public amenities and professional advancement. However, black students were slightly less dissatisfied than white students.

Would government steps to control emigration make skilled workers more or less likely to leave? Such policies would be counterproductive and hasten the exit of almost half of the high emigration potential group. Students had similar views to those of skilled workers. There was strong student support for gov-

> **Personal advancement and success feature much more strongly than patriotism and loyalty in the calculations of most of today's students.**

ernment policies about economic development (more than 80%) and encouraging qualified professionals living abroad to return home (60%). Surprisingly, except for white students, students were not significantly opposed to enacting legislation to make it more difficult to migrate. Finally, discouraging countries from employing South Africans had more support than expected (between 18% and 29%).

In sum, there is remarkable similarity in outlook and perception between today's and tomorrow's skilled South African worker. This is not encouraging, for it suggests that the brain drain is not likely to slow in the foreseeable future. Students show high levels of patriotism and loyalty and a strong desire to build South Africa. However, far too many feel that their personal economic future is more likely to be secured abroad.

Keeping tabs on South Africans abroad

REFILOE MABASO REPORTS ON A NETWORK THAT BUILDS CONTACTS AND FACILITATES LINKS BETWEEN SKILLED SOUTH AFRICANS WORKING ABROAD WHO WISH TO MAKE A CONTRIBUTION TO THE COUNTRY'S DEVELOPMENT.
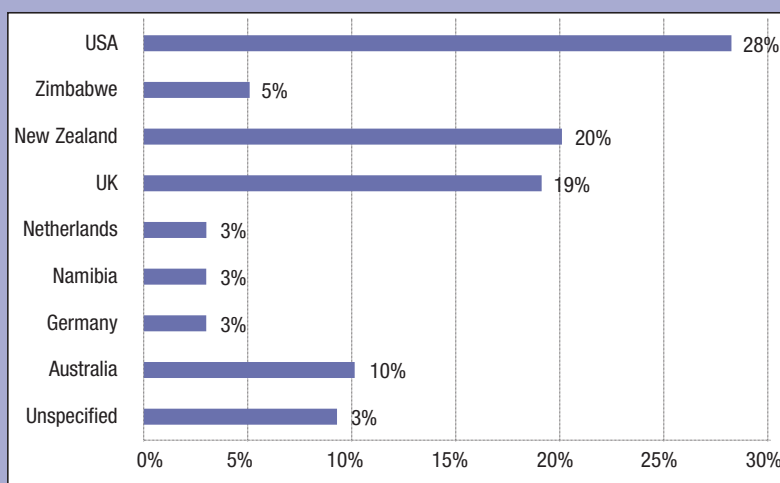
GIVEN South Africa's large skilled Diaspora, an idea of setting up a network of skilled expatriates interested in contributing to South Africa's development was initiated. The South African Network of Skills Abroad (Sansa) is a network linking skilled South Africans living abroad who are willing to make a contribution to South Africa's economic and social development, and connects them with local experts and projects. Sansa facilitates contacts and action between South African expatriates, local experts and projects to meet national human development needs.

Originating at the University of Cape Town, Sansa is now hosted by the National Research Foundation (NRF), one of the key science councils in South Africa. The Sansa programme operates and facilitates the network through a web-enabled database system. The database is intended to locate South Africans living abroad in areas such as information and communication technology, engineering, health, science and education.

The network provides a range of data on members, including their country of residence, profession and main activities. There are currently more than 2 800 members and numbers are growing across more than 60 countries in five continents. Members operate in all sectors i.e. academic, business, cultural, government, health, etc. These members have very high levels of qualifications, skills and experience as well as socio-professional networks.

The figure alongside shows the country of origin of people in the Sansa network. Anyone in any field can be a member of the network. The network is not only restricted to former South Africans now living abroad, but includes local South Africans. For further details about Sansa and joining the network visit http://sansa.nrf.ac.za/

Country	Percentage
USA	28%
Zimbabwe	5%
New Zealand	20%
UK	19%
Netherlands	3%
Namibia	3%
Germany	3%
Australia	10%
Unspecified	3%

Book Review

Destinations Unknown: Perspectives on the Brain Drain in Southern Africa

By David McDonald and Jonathan Crush, eds,

SAMP and Africa Institute, 2002

ACCORDING to the editors of *Destinations Unknown,* the idea of "brain drain" implies a depletion of skilled people who are vital to the functional core of a national economy (p 6). However "the loss of a country's 'best and brightest' is seen not only as a loss of human resources, but also as a general indicator of whether a country is a desirable place to live" (p 1). It thus has significant social and economic implications.

This joint publication from the Africa Institute of South Africa and SAMP provides an insightful analysis of aspects of the migration, emigration and immigration in southern Africa and seeks to challenge often readily accepted notions, myths and stereotypes that have persistently plagued the debate informed largely by speculation and anecdote. Among other things, it questions the common belief and fear that a mass exodus creating an irreplaceable loss of skilled workers is looming in the southern African region and presents interesting counter-arguments that will no doubt stimulate debate. It also looks at policy considerations – in particular the implications of the population movements – for South African immigration policy. It is the outcome of extensive and rigorously designed representative surveys in South Africa, Botswana and Lesotho (future research is planned in other SADC countries).

In Chapter 1 (The Drain Brain, What do Skilled South African think?) the question of the brain drain in South Africa is examined through quantitative analysis and probing questionnaires that provide not only statistical data, but also insight into a wide rage of issues including perceptions concerning the quality of life, the future of the country and employment prospects, as well as the vexed question of affirmative action. Data on levels of commitment to emigration, preferred destinations and factors which most affect the decision to leave provide thought-provoking reading.

In contrast to the traditional focus on race and nationality, a fresh approach is provided in a chapter that examines the roles of women in skilled migration: gender is presented as possibly a key component in understanding the brain drain and therefore in developing policy to prevent this loss of core skills. (p 55). A striking comparison is presented between the different perceptions of men and women in relation to factors affecting emigration, including their perceptions of South African society. Discrimination (both on grounds of race and gender), levels of income, access to education and prospects of promotion – all of which are crucial to any under-standing of migration behaviour – are considered, as well as the interesting question of who would be likely to play a central role in making the final decision to emigrate within a family.

The effects of the brain drain on the operation of business enterprises in South Africa and the responses of employers form the basis of another useful chapter. According to the authors' research, respondents claim that the impact of emigration of skilled personnel has been much greater in the post-apartheid period (1994-1998) than the period before the democratic transition and that the tempo of emigration of skilled personnel appears to have escalated from 1996, an accelerating trend which is necessarily a concern to policy-makers. The commonly accepted causes underlying this trend such as crime, violence, economic stagnation and perception of declining standards are briefly considered. The chapter also provides a discussion on recruitment: the quality of recruits, the recruiting process and the recruitment of skilled personnel overseas.

An interesting approach to quantifying the brain drain from South Africa is adopted in Chapter 4 in which the South African official statistics are compared with the statistics of major recipient countries. The results highlight the fact the current methods of collecting data in South Africa need review, and that the brain drain has been underestimated. In examining the skills profile of emigrants the authors conclude that the majority of emigrants are indeed "highly skilled and well-trained and many of them are located professionally in occupations which are in demand domestically". On a more positive note they suggest that means can and should be sought to interact with and utilise the skills of these South African emigrants.

Another important chapter looks at the "brain gain" and legal immigration to post-apartheid South Africa. Immigration "is not widely viewed as a public policy tool that could benefit South Africa as immigrants (even the mostly highly skilled) are stereotyped as a threat to South African jobs". The authors argue that the debate surrounding South Africa's brain drain has focused intensely on the exit of skilled South Africans rather than both sides of the loss/gain process and suggest that this needs to be re-assessed.

Two appendices provide a rich source of data collected by SAMP. *Destinations Unknown* also includes numerous personal first-hand accounts of individuals who have migrated, immigrated, emigrated or are wrestling with decisions on whether or not to do so. This gives the brain drain a "human face", which is a welcome dimension of the book. This is a valuable publication, not only because it is the result of rigorous research by a wide range of specialists, but because it avoids a defeatist tone and should encourage new discussion and new thinking among academics and policy-makers, as well as interested individuals among the general public, all of whom have a stake in this important debate. – *Gerrie Swart*

health professionals from both sectors are increasingly taking advantage of global skills mobility and leaving altogether. The UK is the major destination for Zimbabwean-trained nurses and pharmacists, while doctors have migrated mostly to Botswana and South Africa.

Economic factors, in particular, have exerted the greatest influence on the migration of health professionals both to the private sector and to other countries. Within the country, the salaries offered in the public sector are far below those offered in the private sector. This imbalance in salary levels has acted as a pull factor for the professionals employed in the public sector. Once the professionals move from the public to the private sector, it is easier for them to engage in long-distance migration.

HIV/AIDS is a further factor contributing to the migration of health professionals from the country. The disease has added to the strain experienced by health professionals. What particularly worries many of them is that they are themselves at high risk of infection. Many claim that health institutions are not taking adequate measures to protect them from the risk of contracting HIV/AIDS.

Both urban and rural health institutions have been affected by emigration. However, those in rural areas are the most affected and are being served by unqualified health staff. The situation is much better in urban areas, which have alternative sources of medical health care in the form of private health institutions.

It is evident that the general quality of care provided to patients has been compromised by the brain drain. Experienced health staff members have been lost to other countries, leaving junior professionals in charge. The shortage of qualified health staff has increased the burden on those who choose to remain and struggle to provide quality service to patients.

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