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Mitigating Nurse Emigration: Strategies for Retaining South Africa's Healthcare Workforce

Johanna Zie ¹ , Schneider Liang ²

Faculty of Public Health, Faculty of Health Sciences, University of the Witwatersrand, Johannesburg, South Africa
 Faculty of Medicine, Department of Epidemiology and Community Medicine, University of Ottawa, Canada

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Corresponding author;

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ABSTRACT

Purpose: This study aims to investigate the factors influencing the emigration of registered nurses from South Africa, focusing on their perceptions, motivations, and potential strategies for retention by employers and the government.

Method: A quantitative, exploratory, and descriptive approach was employed, utilizing a structured questionnaire distributed to nursing students enrolled in distance education programs. The survey collected demographic data and insights into the reasons for emigration and retention strategies, with data analyzed using SPSS software.

Findings: The primary motivations for nurse emigration were higher salaries, better working conditions, and career advancement opportunities abroad. The study revealed significant demographic influences, such as age, marital status, and family responsibilities, on nurses' decisions to emigrate. A high level of awareness regarding the emigration of peers and detailed understanding of emigration drivers were also noted.

Novelty: This research provides a comprehensive analysis of nurse emigration from South Africa, highlighting the interplay between financial incentives, working conditions, and personal factors. It offers valuable insights for policymakers and healthcare administrators seeking to develop effective retention strategies.

Conclusion: The study underscores the critical need for policies addressing income disparities, improving working conditions, and offering career development opportunities within South Africa to mitigate nurse emigration. These strategies are essential to maintaining a stable and effective healthcare workforce in the country.

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1. Introduction

Migration, defined as the movement from one place to another, significantly impacts the global healthcare workforce, particularly in nursing (Pressley et al. 2022). In the context of this article, migration pertains to the movement of nurses between countries (Habermann and Stage 2010). Migration includes two components: emigration, the departure from a specific country, and immigration, the entry into another country (Biao 2003). The emigration of nurses from the Republic of South Africa (RSA) to practice abroad exemplifies this phenomenon (Okello 2021). The Director-General of the World Health Organization highlighted that the migration of health workers restricts essential services and jeopardizes healthcare quality and coverage (Closser et al. 2022). In 1999, around 3,300 professional nurses emigrated from the RSA, with 200 nurses seeking overseas registration monthly (Chi et al. 2011). This trend critically strains healthcare services in South Africa, especially in rural areas where nurses may be the only professional healthcare providers (Hayes et al. 2012).

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To mitigate the shortage of medical professionals in the RSA, foreign doctors from countries like Cuba and Poland have been recruited to work in public healthcare settings. Nurses often serve as interpreters between non-English-speaking patients and doctors unfamiliar with their patients' languages and cultural health concepts. The acute shortage of professional nurses results in the closure of hospital wards and clinics, leading to long waiting lists at healthcare facilities. This shortage also increases workloads for remaining nurses, further driving those who can leave to emigrate, worsening the crisis (Botezat, Incaltarau, and Nijkamp 2024). South African hospitals are grappling with the exodus of nurses to wealthier countries, resulting in a shortage of 20,000 qualified staff (Martin 2015). Furthermore, the number of student nurses in the comprehensive program declined from 11,903 in 1997 to 9,639 in 2001 (Grimmond and Good 2017; Hua et al. 2021).

The global nursing shortage is exacerbated by the aging "baby boomer" generation of nurses, born between 1946 and 1952, who are reaching retirement age between 2005 and 2020 (Bhattacharyya 2021). The UK faced a predicted shortage of 57,000 nurses by 2004 (Borchert and Zellmer-Bruhn 2010), while the USA projected a shortage of 291,000 nurses by 2020, compounded by the expected retirement of 50% of nurse lecturers by 2010 (Lytle Hom & Mokwa M. P. R S 1998). South African nurses, valued for their training and English proficiency, are sought after to fill nursing shortages in English-speaking countries, enhancing their living standards (Dickson 2013). Despite this, numerous advertisements continue to attract South African nurses to international positions, with one ad in the December/January 2003 issue of *Nursing Update* offering 15,000 nursing positions in the USA, UK, Saudi Arabia, and Australia (Gerry Miller, Gerri Sinclair, David Sutherland 2009).

Addressing the shortage of registered nurses in the RSA is of critical importance, given the ongoing emigration of South African nurses to foreign countries. Previous studies have highlighted this issue, but significant gaps remain. Earlier research has often focused on the statistical aspects of nurse emigration and its immediate impacts on healthcare services (Alonso-Garbayo and Maben 2009). However, these studies frequently overlook the underlying perceptions and motivations that drive nurses to leave the RSA, as well as the specific factors that could encourage them to stay (Baharum et al. 2023). Furthermore, the findings from previous research present inconsistencies. For instance, some studies emphasize economic incentives and better working conditions abroad as primary motivators Belle and Cantarelli (2014), while others point to professional development opportunities and improved living standards (William 2002). This divergence in findings suggests a complex interplay of factors influencing nurse migration, which has not been comprehensively explored (Walton-Roberts et al. 2017). Additionally, prior research has not adequately addressed the effectiveness of potential retention strategies, either from the perspective of healthcare employers or government policies (Christensen Hughes and Rog 2008). The urgency of this research is underscored by the continuing decline in the number of student nurses in training programs and the projected global shortage of nurses due to the aging workforce (Janiszewski Goodin 2003). This study aims to fill these gaps by providing a nuanced understanding of the factors influencing nurse emigration and retention in the RSA. By exploring the perceptions of nurses, identifying retention strategies, and assessing the potential role of government interventions, this research seeks to offer new insights and practical solutions to stabilize the nursing workforce in South Africa.

The primary research problem is the shortage of registered nurses in the RSA, exacerbated by the emigration of South African nurses. The study aims to identify perceptions influencing nurses to emigrate, factors that could encourage them to stay, and whether the South African government can prevent nurse emigration. The research questions include understanding the reasons behind nurses' decisions to emigrate, how nurses can be encouraged to remain in the RSA by their employers and the government, and the potential for governmental intervention. The findings will provide valuable insights for developing policies to retain nurses, improve healthcare services, and address the theoretical understanding of nurse migration dynamics.

2. Method

In order to look into the factors behind South African nurses' migration abroad for employment, this study used a quantitative, exploratory, and descriptive methodology. The process of gathering data involved

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distributing postal surveys to the designated population. Population In 2200, 4,480 students were enrolled in undergraduate or graduate nursing programs at a postsecondary remote learning school, making up the target population. A census methodology was employed, extending an invitation to all students to participate in the survey.

The research instrument employed was a meticulously crafted structured questionnaire aimed at comprehending the underlying factors contributing to the departure of nurses from South Africa. The survey consisted of 264 items, comprising questions that were both closed-ended and open-ended. Open-ended questions let respondents to articulate their opinions using their own language, while closed-ended questions presented predetermined response choices. The questionnaire was structured into distinct components, namely: demographic data, familiarity with nurses who have departed or are contemplating leaving South Africa, responders who are presently employed overseas, and their previous or current contemplations of emigration. 4,290 nursing students received the survey forms in the mail along with a cover letter guaranteeing the privacy and anonymity of their answers. 453 questionnaires were received, with a response rate of 10.58%. The gathered data were examined utilizing the Statistics Package for Social Science Research (SPSS) software.

The study team ensured the content validity of the questionnaire by developing it based on material from academic literature, media sources, and expert input. Face validity, a constituent of content validity, was established by subjecting the questionnaire to scrutiny by knowledgeable research academics and professional nurses to ensure that it accurately assessed the intended variables. Statisticians confirmed that the instrument's data showed predicted correlations, indicating excellent reliability, even if exact reliability coefficients were not computed.

Approval was acquired from the education institution's Departmental operations Research & Ethics Committee. Participants were provided with a cover letter along with the questionnaire, assuring them that their identity would remain anonymous and their participation was entirely voluntary. No additional measures were taken to maintain confidentiality, and submitting the filled-out questionnaire was seen as a sign of informed agreement. Although the response rate was low, the collected data yielded valuable exploratory and descriptive quantitative insights into the factors that influence nurses' decisions to relocate from South Africa.

3. Result and Discussion

Based on information gathered from 536 totally completed questionnaires (N=536), the study's conclusions were drawn. Nevertheless, due to the self-administration of the surveys by the respondents, certain items remained unanswered, resulting in a total number of replies that did not consistently exceed 536. The table displays the number of responses that were not answered, as indicated by the data supplied by the SPSS program. Furthermore, the statistics produced by the SPSS software indicate that the cumulative frequency can approach 100% in certain instances, contingent upon the computation of the percentage for each group. These figures were provided by two researchers from Unisa's Computer Services Department exactly as they were produced by the SPSS software.

The biographical information of the respondents gave crucial context for understanding their knowledge and opinions regarding the emigration of nurses from South Africa, as well as their intention and/or capacity to leave. Given that the nursing workforce in RSA is mostly made up of women, it was anticipated that the gender distribution of the 536 respondents would reflect this. Out of the total respondents, 506 (or 94.4%) were female, 27 (or 5.0%) were male, and 3 (or 0.6%) did not provide their gender.

Table 1. Age Distribution of Respondents (n = 536)

Age Group	n	%	% Cumulative
30 years or younger	68	12.7	12.7

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Age Group	n	%	% Cumulative
31-40	210	39.2	51.9
41-50	201	37.5	89.4
51 years or older	54	10.1	99.5
Did not respond	3	0.5	
TOTAL	536	100	

Source of data processed by the author in 2024

The respondents' biographical information is essential for contextualizing their knowledge and attitudes about the emigration of nurses from South Africa, as well as their future plans and/or ability to emigrate. 509 or 95% of the 536 responders were female, which is consistent with the predominance of women in the RSA nursing profession.

Table 2: Distribution of Gender Composition

Gender Composition	n	%
Female	509	95
Male	27	5
Did not respond	0	0
TOTAL	536	100

Source of data processed by the author in 2024

The majority of respondents (411 or 76.7%) were aged between 31 and 50 years, corresponding to the target population of registered nurses participating in postgraduate distance education programs. About 52.7% of respondents were aged no more than 40 years, and 89.2% were no more than 50 years old. This indicates that respondents may provide useful information about nurse emigration from RSA, as most emigrating nurses need to be under 50 years old, if not 40, to obtain work permits in foreign countries and make emigration processes beneficial.

Table 3. Distribution of Respondents by Age Group

Age Group	n	%	Cumulative %
30 years or younger	68	12.7	12.7
31-40	210	39.2	51.9
41-50	201	37.5	89.4
51 years or older	54	10.1	99.5
Did not respond	3	0.5	
TOTAL	536	100	

Source of data processed by the author in 2024

Out of the total respondents, the largest group (408 or 76.1%) identified as Black, followed by 13.4% who identified as White, 6.7% as Coloured, and 3.7% as Asian. A small percentage (0.1%) did not provide a response. Among the 530 respondents who provided information on their marital status, the majority (315 or 59.4%) were married, while approximately one-third (157 or 29.5%) were single. A smaller proportion reported being

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divorced (41 or 7.7%), and a minority were widowed (17 or 3.2%). Only 6 respondents (1.1% of the total) chose not to answer this question. It is hypothesized that unmarried individuals, including those who were single, divorced, or widowed, were more likely to consider emigration compared to their married counterparts. The decision to leave their homeland was also significantly influenced by the presence of children. A total of 452 respondents (84.3%) reported having children, while 84 respondents (15.7%) did not. These findings suggest that the participants' familial responsibilities may play a crucial role in their decision not to relocate from RSA.

Approximately 67.5% of the respondents (362 individuals) were employed in the public sector. The private sector employed 23.7% (127 individuals), while 8.8% (47 individuals) worked in unspecified sectors. A negligible percentage (0.1%, $n = 1$) chose not to respond to this question.

Data indicated that 94.2% of respondents were aware of registered nurses who had left RSA. Interestingly, a majority (60.1%) knew more than five nurses who had emigrated, and nearly all (96.4%) understood the reasons behind their departure. Respondents reported that these nurses had transitioned to various nursing specialties abroad, such as general nursing, intensive care, operating rooms, pediatrics, maternity, mental health, and geriatrics, highlighting a significant shift of South African nurses to diverse healthcare sectors overseas.

Regarding motivations for emigration, data from Table 2 revealed that primary factors aligning with nurses' decisions to leave RSA included seeking higher pay (84.1% and 77.6%) and accumulating funds quickly for specific goals (79.6% and 72.8%). These factors underscored perceptions among RSA nurses of comparatively lower earnings domestically than abroad.

For instance, an advertisement in the December 2002/January 2003 issue of *Nursing Update* highlighted higher salaries in foreign countries compared to RSA. A nursing position in RSA's Mpumalanga Province advertised an annual salary of R64,600. In contrast, positions in Saudi Arabia offered monthly salaries ranging from R22,000 to R35,000, equivalent to R264,000 to R420,000 annually – significantly higher than RSA salaries. Similar salary differentials were noted for positions in the UK, Australia, and other countries, often accompanied by incentives like tax-free income, free travel, health insurance, accommodation, and end-of-contract bonuses, making overseas employment financially lucrative for South African nurses.

Despite all respondents being enrolled as postgraduate distance education students, 6.7% (36 respondents) reported working abroad at the time of the 2001 questionnaire completion. Motivations for choosing foreign employment included opportunities for personal growth (58.3%), rapid fund accumulation (58.3%), and dissatisfaction with excessive workloads in RSA's healthcare system (52.0%). Interestingly, motivations differed from those of nurses currently residing and working in RSA. Given the limited sample size of nurses actively employed abroad (6.7% of respondents), further research among this subgroup is crucial for accurate conclusions.

Responses from Table 3 indicated that over 50% of respondents had considered, were considering, or would consider relocating from RSA for job opportunities abroad. This finding underscores potential challenges for RSA's healthcare system, particularly in nursing, if a significant proportion of nurses pursue international employment. Marital status and family considerations emerged as significant factors influencing emigration decisions among respondents. Unmarried respondents, including those who were single, divorced, or widowed, showed a greater inclination towards seeking emigration opportunities compared to their married counterparts. This finding is consistent with existing research highlighting the role of family structure and responsibilities in migration decisions (Bakewell 2010; Kofman 2004; Lien et al. 2018) (Gureje et al., 2019). Furthermore, the presence of children among a majority of respondents was identified as a deterrent to emigration, reflecting practical and emotional considerations nurses weigh when contemplating international moves. Estrada et al. (2020) supports this, indicating how family ties can act as both barriers and motivators in healthcare professionals' migration decisions.

The high awareness among respondents regarding emigrating nurses from RSA reflects widespread recognition within the nursing community. This awareness extends beyond knowledge to a detailed understanding of emigration drivers, including financial considerations and career opportunities abroad. Similar findings have been reported in studies examining motivations for healthcare professionals to emigrate from low-

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and middle-income countries de Haas (2021), H Louise Lund et al. (2016), Helen Louise Lund et al. (2016), highlighting financial incentives, better working conditions, and career advancement as primary drivers. Economic factors, particularly salary differentials between RSA and destination countries, were critical determinants influencing emigration decisions among nurses. Perceived higher earning potential abroad compared to RSA was a recurring theme supported by comparative salary data from credible sources such as Nursing Update. This finding aligns with global migration patterns among healthcare workers and underscores the impact of income disparities on recruitment and retention efforts in countries like RSA (Ung et al. 2024; Wiskow 2011).

4. Conclusion

The study sheds light on the important problem of South African nurses leaving the country to pursue career possibilities elsewhere and greater incomes and better working conditions in other countries. The research, which used a quantitative, exploratory in nature, and descriptive technique, determined that financial incentives and discontent with the demands of the local healthcare system were the main reasons why nurses chose to leave their jobs. The results emphasize the pivotal influence of demographic factors, including age, married status, and family obligations, on the formation of migratory choices. The respondents' extensive awareness and thorough comprehension of the factors that drive emigration highlight the necessity for comprehensive measures aimed at retaining nurses. To prevent nurse emigration and provide a reliable and efficient healthcare workforce in RSA, it is crucial to address salary discrepancies, improve working conditions, and provide career development opportunities.

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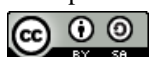
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