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A STUDY ON THE EXPERIENCE OF EXPATRIATE NURSES AND DOCTORS

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ABSTRACT

In the global market, increasing globalization necessitates new metrics. The differences between living and working in one's native country and abroad are significantly influenced by cultural differences. Expatriates who work abroad are typically either highly paid managers of multinational corporations or staff members and volunteers for development and NGO organizations. The global health care sector continues to hire foreign nationals to supplement local competence in highly specialized clinical or medical fields. Going global has provided businesses the option to increase their consumer base by selling abroad and reduce costs by producing in low-cost nations. Additionally, doing business abroad invites new challenges to the existing business. The most challenging aspects is managing multinational human resources. International human resource management is thought to have a substantial impact on whether an overseas assignment is successful or unsuccessful.

INTRODUCTION

In the hospital sector, given that human lives are at stake, migrant health care workers are essential in every way. Balancing and organizing healthcare workforces, balancing workforce, and ensuring right personnel in right place are the emerging problems for the healthcare providers (Rodwell et al., 2013, Al-Jarallah et al., 2009, Farsi et al., 2010). Breakdowns in communication can have major consequences for patient safety because it is essential to teamwork and healthcare delivery (Jirwe et al., 2010, Viken et al., 2018). Researchers and practitioners from all around the world have been particularly face issues of work adjustment in the healthcare industry. Healthcare businesses are choosing to establish working surroundings that support and bear employee welfare and motivation (Atefi et al., 2015, Li et al., 2014& Al-Kandari& Thomas, 2008). In light of this, it is now vital to comprehend to know the feelings of healtcare professionals in their job (Demerouti et al., 2012, Bernotaite et al., 2017&Al Kandari& Thomas, 2009). The expatriate experts in primary health care create a good relationship in work between international and local experts for its effectiveness (James Pfeiffer, 2003, Connell et al., 2007 & Brush et al., 2004). The shortage of nurses affecting globally because nurses play a vital in patient's care (Judith A. Oulton, 2006, Rosseter, 2006, Clement Masakure, 2015, Pujari & Pal, 2018&Stankiewicz& O'Connor, 2014). The recent trends, ethical concerns, challenges and policies become a big exploration for migrant nurses (England & Henry, 2013&Srinivasan P., 2016).

METHODS AND MATERIALS

According to the necessary of the existing research work, review was conducted. The reviews were gathered from article-based databases and Google Scholar related to foreign healthcare workers. The appropriate keywordsincluding expatriate nurses, doctors, migrant care takers, job satisfaction, obstacles, issues in other countries were used in the searches. A total of 70 reviews, taken into account of every location, model, and result, were used as support.

RESULTS AND DISCUSSIONS

Healthcare professionals who work abroad confront a variety of problems, difficulties, and obstacles. Nurses' working conditions are particularly prevalent in the hospital sector. Work adjustment is mediated by and related to both job requirements and employment resources.

Table 1: Major Comments on Migrant Nurses and Doctors

S. No.	Author	Location	Models Used	Major Comments
1	Davies & Danaher (2013)	Middle East	Documentary and data analysis method is used.	Capacity building tactics is needed in Western expatriate nurses in Middle East.
2	Estelle Louise Coustas (2019)	South Africa	Conceptual content analysis is done.	Nurses from India, work for the family circumstances and for financial wellbeing.
3	Alshmemri et al., (2016)	Saudi Arabia	Mixed-method design is used.	Nurses working Saudi felt more dissatisfaction with the job.
4	Akkela & Leca(2015)	Romania	Hermeneutic phenomenological approach is used.	Romanian nurse managers sensed that work load is more and job is stressful.
5	Billah et al., (2020)	Saudi Arabia	Cross-sectional study design is used.	Duration, language and security of job all created a dissatisfaction in job.
6	Geleta et al., (2021)	Ethiopia	Cross-sectional study design is used.	Low cultural competence is found among nurses in Tertiary Hospitals.

7	El-Gilany & Al-Wehady (2001)	Saudi Arabia	Descriptive study is used.	Job satisfaction is improved by providing more comfortable working ambience.	
8	Al-Turki et al., (2010)	Saudi Arabia	Maslach Burnout InventoryIndividual- based questionnaire is used.	Working conditions to be improved to resolve high burnout situations.	
9	Lamadah et al., (2014)	Saudi Arabia	Statistical analysis is used.	More challenges are seen in nursing profession in Saudi Arabia.	
10	Aqtash et al., (2017)	UAE	Cross-sectional design is used.	Experienced expatriate nurses are given opportunities in remote and rural region.	
11	Ahmad E. Aboshaiqah (2015)	Saudi Arabia	Descriptive design is used.	Healthy work environmentsbenefits health care providers.	
12	Phil Halligan (2006)	Saudi Arabia	Phenomenological descriptive is used.	Communicating with patients is a big stress.	
13	Qureshi et al., (2019)	Saudi Arabia & South Korea	Descriptive analysis is used.	Healthcare workers affected during pandemic are mostly expatriates in Saudi Arabia and South Korea.	
14	Wojczewski et al., (2015)	Sub- Saharan Africa	Qualitative content analysis is done.	African migrant health workers are involved more in developing living conditions.	
15	Alsulaimani et al., (2014)	Saudi Arabia	Transcultural Self-Efficacy Tool Kit is used.	Transcultural nursing training would help to boost the cultural competence.	

16	Wei-Wen Chang (2009)	Taiwan	Open coding and axial coding aredone.	Cultural differences are vital role in expat aid service workers.
17	Gregory H. Kamwendo (2008)	Malawi	Sociolinguistic study is done.	Expatriates will use global language with the patients than the local language.
18	Chebor et al., (2014)	Western Kenya	Cross-sectional study design is used.	In working setting, relationship between nurses and physicians is very poor.
19	Ganabathi et al., (2017)	Saudi Arabia	Random sampling method is used.	High knowledge does not impact with good attitude with nurses.
20	Salvador et al., (2020)	Saudi Arabia	Purposive convenience sampling is used.	Co-worker's violence affects the working environment.
21	Alreshidi&Alsharari (2021)	Saudi Arabia	Country-wide cross- sectional survey is used.	Expatriate nurses have high level of dissatisfaction of work.
22	Alsharari et al., (2020)	Saudi Arabia	Predictive correlation design is used.	Psychological issues during night shifts are encountered.
23	Hosis et al., (2012)	Saudi Arabia	Sequential explanatory research design is used.	Proper policies and procedures are used in Saudi Arabian hospitals.
24	Shuriquie et al., (2007)	Middle East	Cross-sectional analysis is done.	Task oriented activities were needed in Jordan hospitals.
25	Alsaddan et al., (2021)	Saudi Arabia	Literatures were used.	Job dissatisfaction is more in nurses.
26	Wilson & Jallah, (2019)	Liberia	Phenomenological approach is done.	Pre-deployment training helps expatriateto enhance work culture.

27	Hejaili et al., (2010)	Saudi Arabia	Cross-sectional data analysis is done.	Nurses are more ethical than the physicians.
28	Albararri at al	, and the second		2 1
28	Albaqawi et al., (2019)	Arabia	study is conducted.	Good spiritual condition has impacted nurses in Saudi Arabia.
29	Alanazi & Yates, (2022)	Saudi Arabia	Cross-sectional approach is used.	Benefits given is not satisfied by the expat nurses.
30	Alasiri & Kalliecharan, (2019)	Saudi Arabia	Analytical tool by Walley and Wright is used.	Leadership development programs help nurses to develop the leadership skills.
31	Debbie Palmer (2006)	Sub- Saharan Africa	Data analysis is done.	Human Resource Programs are developed in health sectors.
32	Oakley et al., (2019)	Saudi Arabia	Integrative literature review is used.	Expatriate nurses' jobs are emotionally challenging in Muslim countries.
33	Newton et al., (2012)	Canada	Database reviews were used.	Cultural displacement is seen more in international nurses.
34	Abdulrhman Albougami (2016)	Saudi Arabia	Data analysis is used.	More language and communication barriers are seen in KSA healthcare system.
35	Fahd Mohammed Albejaidi (2010)	Saudi Arabia	Statistical data analysis is used.	Healthy profile of a country attracted high professionals.
36	Hunt et al., (2012)	Canada	Inductive analysis is done.	Pre-departure training helps to clear the ethical issues easily.
37	Shaher Alshamari (2017)	Qatar	Medical Subject headings were used.	Qatar has becomemulticultural nation in hospital industry.

38	Parekh et al., (2016)	USA	Cross-sectional qualitative study is done.	Challenges faced by expatriate physicians is following the global guidelines.
39	Alanazi et al., (2022)	Saudi Arabia	Cross-sectional study is done.	Followership styles and team effectiveness impact on nurses.
40	Nikos Bozionelos (2009)	Saudi Arabia	Descriptive analysis is done.	The gender role has great impact on work attitudes for expatriates.
41	Aljohani et al., (2021)	Saudi Arabia	Delphi method is used.	More challenges found in mental health nursing programs.
42	Aldossary et al., (2008)	Saudi Arabia	Statistical analysis is done.	Challenges are more in culture and language.
43	Rahman et al., (2015)	Bangladesh	Statistical data collection is used.	Human resource practices should be improved in private hospitals.
44	Pepito & Locsin, (2019)	Japan	Health care data is used.	Technology involvement should be high in nurses.
45	Dousin et al., (2019)	Malaysia	Statistical analysis is done.	Comfortable work hours and proper supervision have great influence on performance of doctors and nurses.
46	Hatzidimitriadou & Psoinos (2014)	United Kingdom	Thematic network analysis is used.	Overseas health care professionals are underrated.
47	Hannah Bradby, (2014)	Sub- Saharan Africa	Literatures were used.	Migrant nurses face crisis and brain-drain situation globally.

48	Stilwell et al., (2004)	United Kingdom	Data analysis is used.	Managing migration internationally in health sector is a big task.
49	Christa Wichterich, (2020)	Germany and India	Comparative analysis is done.	Crisis situation affects healthcare workers badly.
50	Yasmin Y. Ortiga (2018)	Philippines	Students interview is done.	Migration and opportunity trap among nurses are seen.
51	Nortvedt etal., (2020)	Norway	Hermeneutic design is used.	Migrant nurses are always experienced than local nurses.
52	Chok et al., (2017)	Australia	Integrative review methodology is used.	Diminishing of challenges can lead to effective transitions.
53	Salimah R. Walani (2015)	Africa	Literature reviews were used.	Shortage of nurses have a great impact on migration of nurses.
54	Montayre et al., (2018)	Philippines	Integrative review is done.	Technical difficulties and challenges are encountered.
55	Hamdan et al., (2015)	United Kingdom	Qualitative study is done.	Migrant nurses get changes in social, personal and professional attributes.
56	Tregunno et al., (2009)	Canada	Constant comparative method is used.	Policy and decision- making impact international educated nurse.
57	Korzeniewska & Erdal (2021)	Norway	Comparative analysis is done.	The experience of migrant nurses has great impact on deskilling.
58	Habermann & Stagge (2010)	Germany	Literature review is used.	Quality of international nurses' recruitment impacts more.

59	Alexis &	United	Phenomenological	Lack of support and less	
	Vydelingum (2007)	Kingdom	approachis adopted.	confidence affects migrant nurses.	
60	Boese et al., (2013)	Australia	Statistical sources were used.	Proper wages and conditions have a great impact on nurse's work experience.	
61	Allan et al., (2009)	United Kingdom	Thematic analysis is done.	Communication, bullying and emotional racism is found.	
62	Deegan & Simkin (2010)	Australia	Theoretical sampling is used.	Low communication skillshas great impact on professional skills.	
63	Kechinyere et al., (2018)	United States of America	Thematic method is used.	Migrant nurses face personal and organizational barriers.	
64	Nicola Yeates, (2010)	United Kingdom	Various approaches are used.	Challenges possess on social development in public health.	
65	Lausch et al., (2015)	Minnesota	Phenomenological qualitative research design is used.	Seasonal employment is main framework in medical workers.	
66	Ramboarison-Lalao (2012)	France	Exploratory qualitative study is done.	Career experience helps migrant nurses.	
67	Stockhausen (2010)	Australia	Thematic analysis is opted.	Overseas trained nurses encountered professional involvement in working areas.	
68	Kesornsri et al., ()2014	Thailand	Experimental and non-experimental design is used.	Mental health problems are seen in migrant health workers.	
69	Mapedzahama et al., Australia (2018)		Sociological analysis is done.	Unawareness about work with black	

						migrant nurses working in Australia.
Knutsen (2020)	et	al.,	Norway	Inductive deductive analysis were u	data	Language and cultural problems highlighted in migrant nurses.

CONCLUSION

The nursing leaders must enhance the public perception of nurses and promote the hiring of new nurses. Younger nurses might be drawn to the field if employers offered amenities like private transportation, benefits, compensations and bonus along with shorter hours of work and part-time contracts with higher wages. It's important to address the issue of private colleges' lack of accreditation and ensure that all nurses receive thorough training prior to beginning their careers. The development of a national nursing association would promote the nursing profession. A major problem facing the hospital business today, particularly during the pandemic crisis, is the nursing shortage. Examining a nurse's skill, devotion, and contribution is one way to gauge their talent in nursing. Both the highly gifted and less talented nurses shared roughly the same personal traits, such as age, marital status, and level of schooling. The hospital administration may initiate ongoing, targeted practice and training sessions to improve these individuals' performance to high-talent levels. The opportunity for migrant nurses to advance their knowledge and experience in this field is vast. An international healthcare worker may readily demonstrate their high degree of knowledge and would be able to accomplish tremendous heights despite the working conditions, language hurdles, environmental conditions, benefits, etc.

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