

**THE WORLD MEDICAL ASSOCIATION STATEMENT ON ETHICAL GUIDELINES
FOR THE INTERNATIONAL RECRUITMENT OF PHYSICIANS**

Adopted by the WMA General Assembly, Helsinki 2003

A. Preamble

1. The WMA acknowledges that temporary stays of physicians in other countries help both the receiving and the sending countries to exchange medical knowledge, skills and attitudes. The exchange of medical professionals is therefore beneficial for the development of medicine and healthcare systems and in general deserves the support of national medical associations as well as governments.
2. *The WMA Statement on Medical Manpower – 1* (1983, 1986) called upon all National Medical Associations to work with their governments towards solutions to the emerging problems related to the medical workforce.
3. *The WMA Resolution on the Medical Workforce* (1998) identified the major components of the medical workforce situation that need to be taken into account when developing a national workforce policy.
4. For several decades many governments, employers and medical associations have misinterpreted demographical data regarding the number of physicians that are required. Misinterpreted ageing employment as physicians have often been seriously affected by Young people seeing employment as physicians have often been seriously affected by poor medical workforce planning.
5. In many countries, including the wealthiest ones, there is a shortage of physicians. A major reason for the shortage is a failure to educate enough physicians to meet the needs of the country. Other reasons for the net loss of physicians are the recruitment of physicians to other professions, early retirement and emigration, and the problems of combining professional and family responsibilities, all of which are often due to poor working conditions for physicians.
6. Some countries have traditionally solved their need for physicians by recruiting medical graduates from other countries. This practice continues today.
7. The flow of international migration of physicians is generally from poorer to wealthier countries. The poorer countries bear the expense of educating the migrating physicians and receive no recompense when they enter other countries. The receiving countries gain a valuable resource without paying for it, and in the process they save the cost of educating their own physicians.
8. Physicians do have valid reasons for migrating, for example, to seek better career opportunities and to escape poor working and living conditions.

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9. There is considerable international activity underway at present to determine the nature and extent of physician migration and related medical workforce issues. The World Medical Association recognizes that there is an important ethical dimension to these issues and has developed this statement to guide national medical associations and policy makers in their efforts to find solutions to these issues.

B. Relevant Ethical Principles

10. Justice – Distributive justice requires an equitable allocation of resources among individuals and groups. Corrective justice requires action to address inequities. Procedural justice requires that efforts to achieve equity respect the rights of all who are involved.
11. Co-operation – Problems that affect two or more groups, including nations, should be resolved by working together, either bilaterally or through multilateral organizations such as the World Medical Association.
12. Autonomy – An individual's right to determine his or her own destiny should be respected as long as it does not interfere with the corresponding right of others, in which case a fair process for resolving conflicts should be implemented.

C. Recommendations

13. National medical associations, governments and employers should exercise utmost care in utilizing demographic data to make projections about future requirements for physicians and in communicating these projections to young people contemplating a medical career.
14. Every country should do its utmost to educate an adequate number of physicians, taking into account its needs and resources. A country should not rely on immigration from other countries to meet its need for physicians.
15. Every country should do its utmost to retain its physicians in the profession as well as in the country by providing them with the support they need to meet their personal and professional goals, taking into account the country's needs and resources.
16. Countries that wish to recruit physicians from another country should only do so in terms of and in accordance with the provisions of a Memorandum of Understanding entered into between the countries.
17. Physicians should not be prevented from leaving their home or adopted country to pursue career opportunities in another country.
18. Countries that recruit physicians from other countries should ensure that recruiters provide full and accurate information to potential recruits on the nature and requirements of the position to be filled, on immigration, administrative and contractual requirements, and on the legal and regulatory conditions for the practice of medicine in the recruiting country.

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19. Physicians who are working, either permanently or temporarily, in a country other than their home country should be treated fairly in relation to other physicians in that country (for example, equal opportunity career options and equal payment for the same work).
20. Nothing should prevent countries from entering into bilateral agreements and agreements of understanding, as provided for in international law and with due cognisance of international human rights law, so as to effect meaningful co-operation on health care delivery, including the exchange of physicians.

17.9.2003

RESCINDED

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