

Emigration of Polish Nurses – Reality and Consequences

Submitted: 22.09.18 | Accepted: 20.10.18

Józef Haczyński*, Małgorzata Buraczyńska**

The emigration of medical personnel in Poland significantly increased in 2004 after Poland's accession to the European Union. The aim of the paper is to present the results of a questionnaire survey, conducted on a sample of 166 nursing students, regarding plans for emigration after graduation. An attempt was made to recognize the scale and causes of this phenomenon, as well as events that could result in the resignation of future nurses from emigration plans. The presentation of the results of the survey was preceded by a review of theories describing the causes of migratory movements, data on the current number of Polish nurses, and characteristics of their population. About 75% of nursing students surveyed (regardless of their place of origin and year of study) declared their willingness to work abroad. Among the reasons for a possible trip abroad, respondents most often indicated favorable financial conditions, higher living standard, greater comfort of work, low prestige of the profession in Poland, more career opportunities, gaining experience, and current political situation in Poland. Certainly, prevention of emigration should consist in activities that produce quick results such as, for example, increasing salaries, finding other material and non-material benefits to make the profession more attractive, improving working conditions, ensuring flexible working hours or part-time employment, vocational mobilization of retired or economically inactive nurses. It is also necessary to carry out long-term actions aimed at a health care reform.

Keywords: emigration, medical personnel, nurses, aging of the society, shortages of nurses.

Emigracja polskich pielęgniarek – rzeczywistość i konsekwencje

Nadesłany: 22.09.18 | Zaakceptowany do druku: 20.10.18

Emigracja personelu medycznego w Polsce znacznie wzrosła w 2004 r. po wejściu Polski do Unii Europejskiej. Celem pracy jest przedstawienie wyników ankiety, przeprowadzonej na próbie 166 studentów pielęgniarsztwa, dotyczącej planów emigracyjnych po ukończeniu studiów. Podjęto próbę rozpoznania skali i przyczyn tego zjawiska, a także wydarzeń, które mogą spowodować rezignację przyszłych pielęgniarek z planów emigracyjnych. Prezentacja wyników ankiety poprzedzona była prezentacją teorii opisujących przyczyny ruchów migracyjnych i aktualną liczbę polskich pielęgniarek oraz charakterystykę ich populacji. Około 75% ankietowanych studentów pielęgniarstwa (niezależnie od miejsca pochodzenia i roku studiów) zadeklarowało chęć podjęcia pracy za granicą. Wśród przyczyn ewentualnej podróży za granicą respondenci najczęściej wskazywali korzystne warunki finansowe, wyższy standard życia, wyższy komfort pracy, niski prestiż zawodu w Polsce, więcej możliwości kariery, zdobywanie doświadczenia, bieżącą

* **Józef Haczyński** – PhD (habilitated), University of Warsaw, Faculty of Management. <https://orcid.org/0000-0002-8971-2287>.

** **Małgorzata Buraczyńska** – MA, Wizz Air Hungary Légiközlekedési Kft.

Correspondence address: Faculty of Management, University of Warsaw, 1/3 Szturmowa Street, 02-678 Warsaw; e-mail: jhaczynski@wz.uw.edu.pl.

sytuację polityczną w Polsce. Z pewnością działania zapobiegające emigracji powinny być działaniami, które przynoszą szybkie rezultaty, takie jak na przykład zwiększenie wynagrodzeń, znalezienie innych materialnych i niematerialnych świadczeń, aby uczynić ten zawód bardziej atrakcyjnym, poprawić warunki pracy, elastyczny czas pracy lub zatrudnienie w niepełnym wymiarze czasu pracy, mobilizacja zawodowa emerytowanych lub niebędących aktywnych zawodowo pielęgniarek. Konieczne jest także prowadzenie długoterminowych działań mających na celu reformę systemu opieki zdrowotnej.

Słowa kluczowe: emigracja, personel medyczny, pielęgniarki, starzenie społeczeństwa, niedobory pielęgniarek.

JEL: I20, I18

1. Introduction

Employee emigration beyond the boundaries of the country of previous residence occurs in practically every professional group. However, the greatest emotions are currently stirred up by the emigration of employees of the health care sector. Many countries in the world, both highly developed countries and those at a lower level of socio-economic development, are severely affected by the lack of a sufficient number of qualified medical staff. The World Health Organization (WHO), monitoring the migration of doctors, nurses, and midwives, draws attention to the alarmingly large scale of this phenomenon (Dussault, Fonteira, & Cabral, 2009).

The emigration of medical personnel in Poland significantly increased in 2004 after Poland's accession to the European Union (Ministerstwo Zdrowia [MZ], 2006). Legislation recognizing professional qualifications and diplomas, which allows for an easier and more efficient change of work environment, has also contributed to the globalization of the problem of migration of highly educated and qualified specialists in different areas. The fact is that not only Poland is struggling with shortages of medical staff; many highly developed European countries also have such problems. The situation is additionally complicated by the observed progressing aging of European societies. Currently, older people form the foundation of the age pyramid, which means an increase in demand for qualified medical staff able to ensure supervision over the health of older people and, if needed, palliative care. One of the professional groups most susceptible to the change of place of residence and work are Polish nurses.

Many factors affecting the decision to emigrate or leave the medical profession have been described in the literature (Heinen et al., 2013, pp. 174–184); these are primarily economic factors – mainly salaries, but also non-economic factors resulting from the specificity of medical professions, such as the necessity to perform long hours of duty, work at night, work in wards with patients with varying degrees of independence, professional burnout resulting, among others, from a high degree of work discomfort,

professional stress, lack of development opportunities or a clearly defined career path in medical professions (Haczyński, Ryć, Skrzypczak, & Susecka, 2017). The above factors determine the fact that a significant percentage of current nursing students and nurses who are professionally active declare their desire to leave the country in search of better working and living conditions (Haczynski, Skrzypczak, & Winter, 2017, pp. 97–104). In the current literature, there is a lack of reliable data attempting to assess nursing students' desire to emigrate.

The aim of the paper is to present the results of a questionnaire survey, conducted on a sample of 166 nursing students, regarding plans for emigration after graduation. An attempt was made to recognize the scale and causes of this phenomenon, as well as situations that could result in the resignation of future nurses from emigration plans. The survey was carried out in the form of a voluntary online questionnaire prepared by the author of this paper, which consisted of 23 questions; the questionnaire was distributed via thematic internet groups to nursing students of various universities throughout Poland in the period from March to October 2017. The subjects were informed about the purpose of the study and asked to complete the online questionnaire.

Statistical analysis was carried out by means of the Statistica program with the use of U Mann-Whitney test, hi-square independence test, and Spearman correlation.

The presentation of the results of the survey is preceded by a review of theories describing the causes of migratory movements, data on the current number of Polish nurses, and characteristics of their population.

2. Premises for the Emigration of Nurses

Migration decisions are linked to many factors including: economic factors like: salary level, tax system, law in the home country, unemployment level in particular professions and other, for example, social and environmental factors, unfavorable climatic conditions, etc. Most people make decisions about emigration to improve their financial situation. Everett Lee's concept of migration presented in the "push-pull" theory assumed a simultaneous interaction of two opposite factors: e.g. low versus high wages, significant professional development opportunities versus lack of career opportunities, etc. The push factors apply to the home country, and the pull factors apply to the country to which the person intends to emigrate. In addition, E. Lee's theory assumes the existence of an additional factor, i.e. indirect obstacles: cultural differences, distance and travel costs, or immigration policy in a selected country. The decision to emigrate on the basis of push and pull factors is subjective and difficult because usually a person is confident about the push factors, but is not sure whether the attracting factors in other countries, which such a person takes into account as a destination of

emigration, are true because the person often has incomplete information. In the case of medical staff, including nursing staff, the pull factors of attraction include the following (Babiarczyk, Śwól, & Schlegel-Zawadzka, 2014, pp. 130–135; Wyrozębska & Wyrozębski, 2014, pp. 21–27, 56–63, 80–134):

- remuneration, which may significantly differ in individual countries, is considered as the strongest pull factor in the health care sector;
- better work conditions, shorter working hours, fewer patients, fewer hours of night duty;
- opportunity to improve professional qualifications and learn new working methods, clear career path, easier access to courses and trainings;
- higher recognition of the nursing profession;
- opportunity to get to know new cultures and travel;
- ability to improve foreign language skills;
- stable political situation.

The push factors include (Buchan, Parkin, & Sochalski, 2003, p. 42):

- dissatisfaction with earnings;
- difficulties in developing own professional skills;
- poor infrastructure in medical facilities;
- limited professional development;
- lack of economic stability;
- interpersonal relations among employees;
- low prestige of the nursing profession.

The key assumption of this concept is not just the sum of positive and negative factors. There must be an additional, strong incentive to leave. Additional factors independent of the push and pull (attracting) factors are personal factors, including: curiosity of the world, willingness to live an adventure, desire to change, possibility to start a family, striving to improve living conditions, and increase in demand for nursing staff in aging countries (Kaczmarczyk, 2005, pp. 29–30).

In the report Migration of Health Personnel in the WHO European Region, the World Health Organization has identified several factors which affect both the decision of medical personnel to migrate and the choice of the country of destination. They have been divided into the following categories (Dussault, Fonteira, & Cabral, 2009, p. 22):

- individual/family factors, which can include: young age, higher level of education, knowledge of the language of the country for which we plan to leave, family members or friends who emigrated, or status of a single person;
- organizational factors, which include: insufficient remuneration, significant workload, improper staff management, lack of social recognition, lack of medical equipment and medicines, limited career prospects and career opportunities;

- factors related to the health care system, which can include: insufficient number of employees, insufficient funding for health care;
- environmental determinants, which include factors such as: sense of security in one's own country (street riots, manifestations, war), difficult climatic conditions;
- other factors, which include: recognition of professional qualifications, favorable migration policy, or ease of finding a job through agencies.

3. Number of Polish Nurses and Their Characteristics

In the statistics on medical personnel, including nurses, two categories are distinguished: persons who have the right to practice a profession and persons who practice a given profession (employed in the profession). A person who has the right to practice as a nurse is entered into an appropriate register kept by the Chamber of Nurses and Midwives. But not all persons with the right to perform a specific medical profession in Poland, including nurses, take up work in the Polish health care sector.

The number of medical professionals employed in the health care system is lower than the number of professionals with license due to the fact that the group of licensed professionals includes, apart from employees of health care facilities, also people working in non-medical positions across the country, working abroad, staying on maternity and parental leaves, and retirees. Figure 1 presents data on nurses holding the right to practice (license) and practicing the profession of nurse, for the years 2011–2016, in Poland.

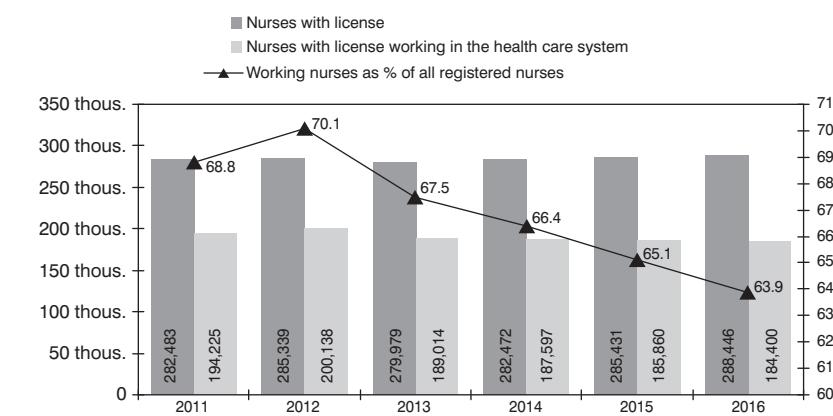


Fig. 1. Number of nurses holding the right to practice and practicing the profession in Poland in 2011–2016. Source: Authors' analysis based on the Statistical Bulletins of the Ministry of Health for 2011–2017, Health Information Systems Information Center, Warsaw, www.csioz.gov.pl.

The number of nurses entitled to practice (with license) exceeded 280,000 in 2011–2016 (as at 31 December of a given year) and followed a slightly upward trend in the last years of that period. However, the number of employees in the Polish health care system was by about 100,000 lower and showed a slight but regular downward trend.

The percentage of practicing nurses in relation to those entitled to practice showed a clear downward trend in the analyzed period: it decreased from 70% in 2012 to 64% in 2016, which means a decrease of about 6 percentage points. The fact that the number of medical professionals employed in the health care system is about 30–40% lower than the number of people with the right to practice is due to the fact that the group of persons who have the right to practice the profession of nurse comprises, in addition to employees of health care facilities, also nurses who work abroad. The emigration of medical personnel is a problem now observed in almost all European countries and the world. Every year, a significant group of nurses and representatives of other medical professions emigrates from Poland, especially after the entry into the European Union and the opening of labor markets of the “old EU” countries to Poles (Kautsch, 2013, pp. 169–179). It is difficult to accurately determine the number of Polish nurses who went to work abroad – there are no complete, reliable data. Potential interest in migration can be assessed by means of the number of professional qualification certificates issued by chambers of nurses and midwives. According to data from the Supreme Chamber of Nurses and Midwives, 19,953 certificates were issued for the needs of recognition of professional qualifications in the period from February 1, 2004 to December 31, 2016 (Naczelną Izba Pielęgniarek i Położnych [NIPiP], 2017). The number of issued certificates is not a reliable indicator of real interest in emigration, as nurses often take up jobs in other countries in positions that do not require certification. Analyses of the directions of emigration indicate that the most popular EU countries are: Great Britain, Ireland, Germany, Sweden, Norway, and Denmark (Golinowska, 2012). The decision about emigration is usually made by young people who have appropriate qualifications and know foreign languages.

As far as salary matters are concerned, the relationship between the average remuneration of doctors and nurses in Poland and the total average salary versus remuneration of employees in the health care sector in other European countries is not favorable (Skrzypczak & Haczynski, 2016, pp. 257–269).

4. Results of a Survey on the Scale and Causes of Planned Emigration

The questionnaire survey was conducted for the purposes of an MA thesis prepared at the Faculty of Management of the University of Warsaw

(Buraczyńska, 2018). It took the form of an online survey, which in the period from March to October 2017 was answered by 166 people (94% women) studying nursing at different universities in Poland. The mean age of respondents was 22.95 years (ranged from 19 to 43 years). Most full-time students were: second year students (28% of respondents), first year students (24%), and fifth year students (20.5%). Third year students accounted for 13%, and forth year students for 14.5%, of respondents.

Respondents participating in the survey included mainly students of the Medical University of Warsaw (about 40% of survey participants), the Medical University of Wrocław (28% of respondents), and the Medical University of Łódź (18%).

The largest group among respondents were people from rural areas – 36% of survey participants, and small towns (up to 50,000 residents) – 26% of respondents. 18% of respondents came from cities with over 500,000 inhabitants, 10% from cities inhabited by 50,000–100,000 residents, and 10% from cities with 100,000–500,000 residents. A vast majority of respondents – 97% – declared their willingness to work in the profession they had learned.

Almost half of respondents (75.3%) assessed that in Poland it was easy or very easy to find a job in the nursing profession. But, at the same time, about 75% of nursing students surveyed (regardless of their place of origin and year of study) declared their willingness to work abroad.

Among the reasons for possible emigration, respondents most often indicated:

more favorable financial conditions – 90% of respondents, higher living standard – 72%, greater comfort of work – almost 70%, low prestige of the profession in Poland – almost 70%, more career opportunities – 37%, gaining experience – 33%, current political situation in Poland – 30%.

The following were also indicated: willingness to continue education abroad (17%), favorable migration policy of the host country (16%), personal reasons (partner's trip, family abroad), and the possibility of contact with the scientific community.

The survey also attempted to identify whether the possibilities of emigration in the future and the chance of attractive work abroad influenced the decision of the respondents to undertake studies in the field of nursing.

The following distribution of responses was reported: definitely yes and rather yes – 36.6%, definitely and rather not – 35.2%, I did not take this into account – 27.2%, and no answer – 0.8%.

Thus, almost 37% of respondents said that the possibility of emigration and taking up an attractive job abroad influenced (to a lesser or greater extent) their decision to undertake studies in the field of nursing; however, at the same time, a slightly smaller percentage of respondents, i.e. about 35%, gave a negative answer. Over 27% of respondents declared that the possibility of emigration had no impact on the choice of the field of study.

As regards a potential direction of emigration, it was found that the largest group of people declaring their willingness to go to work as nurses/midwives were planning a trip to Great Britain (16.8%); however, the same percentage of respondents declaring their willingness to emigrate after graduation had no specific direction. The next most frequently indicated as places of future emigration were Germany (16%) and Ireland (10.4%). It was interesting that 17% of responders who wanted to emigrate did not indicate the country of emigration.

Among respondents declaring their willingness to work abroad, the same percentage of people stated that they planned a trip to a specific country for financial reasons (better pay and working conditions), as well as for other reasons than financial issues – 26% of respondents. Identical percentages of respondents – 17% each – declared their willingness to leave for personal reasons (family/partner/relatives) and because of the language of the country of destination. In addition, persons planning to leave Poland indicated as the cause of emigration: higher standard of living (14%), professional prestige (10%), and the proximity of the country of destination to Poland.

The distribution of answers to the question about the planned date of emigration was as follows: within one year of graduation – 24.8%, in the period of 1–2 years after graduation – 35.2%, in the period of 3–5 years after graduation – 27.2%, after 5 years from graduation – 8.8%, no answer – 4%.

Therefore, almost 60% of respondents plan to leave fast, within a maximum of 2 years after graduation.

The distribution of responses to the question about the expected duration of stay abroad was as follows: less than a year – 3.2%, from 1 to 2 years – 18.4%, from 3 to 5 years – 24%, over 5 years – 17.6%, permanent emigration – 32.8%, no answer – 4%.

To sum up, every third nursing student planning to emigrate intends to leave Poland for good, every fourth respondent plans to emigrate for 3–5 years, and almost every fifth – for a period of 1–2 years. In response to the question about actions taken before traveling abroad, and aimed at finding a job, respondents mentioned most frequently: intensive learning of a foreign language – 63.2% of answers, getting acquainted with foreign job offers – 43.2%, establishing contacts with people who left Poland – 29.6%.

The respondents were also asked about events that could change their decision about going abroad. The options most frequently indicated by the respondents are: guarantee of high earnings – 92%, opportunity to take up an interesting job in Poland – 48.8%, family/personal situation – 35.2%, guarantee of access to specialization courses – 35.2%, employment security in Poland – 24.8%.

In order to check whether respondents declaring their willingness to emigrate differed from those who did not want to emigrate in terms of

place of origin or year of study, the U Mann-Whitney test was conducted. The analysis did not show statistically significant differences between the groups in the range of the variable under investigation, $Z = 0.78$; $p = 0.436$ and years of study $Z = 0.93$; $p = 0.351$.

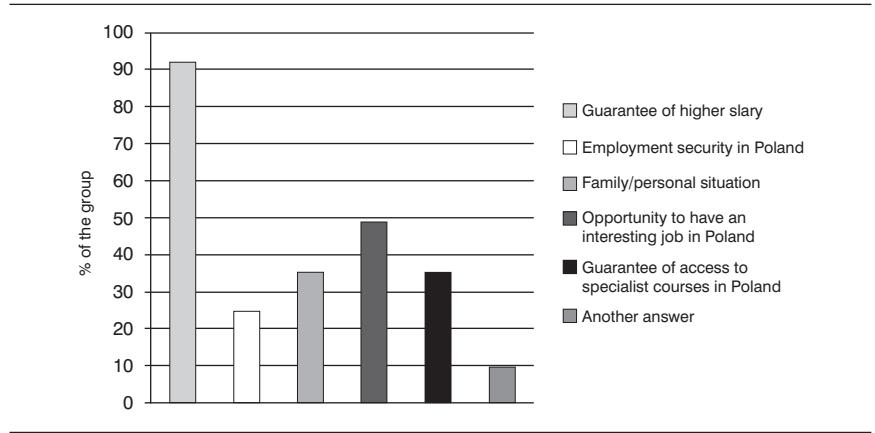


Fig. 2. Factors that may change the decision to travel abroad according to people declaring their willingness to work abroad. Source: Authors' research.

The analysis of the rho-Spearman correlation did not show any statistically significant relationship between the size of the city of origin of the surveyed persons and their assessment of the possibility of finding a job consistent with the field of study in Poland ($r = 0.09$, $p > 0.05$).

In order to check the relationship between the planned country of departure of people declaring willingness to work abroad and indicating the most attractive country for a nurse in terms of employment conditions and opportunities for further training, analyzes of rho-Spearman correlation were carried out. The correlation analyzes showed statistically significant relationships between the variables studied. This means that the more often people who declared willingness to work abroad planned to go to a given country, the more often they indicated the country as the most attractive for a nurse in terms of employment conditions and opportunities for further training (Norway $r = 0.49$, $p < 0.001$, Arabic countries $r_s = 0.46$, $p < 0.001$, UK $r = 0.40$, $p < 0.001$, Italy $r = 0.40$, $p < 0.001$).

In order to check whether among people declaring their willingness to go abroad to take up a job of a nurse, senior students (third to fifth year of study) differed from lower-level students (first to second year of study) in terms of actions taken to find a job abroad, an analysis with the use of the chi-square independence test was carried out.

What actions have you taken to find a job outside of the country?	Year of study				All		χ^2	p		
	1st – 2nd		3rd – 4th							
	n	% of the group	n	% of the group	n	% of the group				
Intensive language learning	No	24	36.92	19	33.33	43	35.25	0.17	0.679	
	Yes	41	63.08	38	66.67	79	64.75			
	All	65	100.00	57	100.00	122	100.00			
Searching for foreign job offers	No	35	53.85	33	57.89	68	55.74	0.20	0.653	
	Yes	30	46.15	24	42.11	54	44.26			
	All	65	100.00	57	100.00	122	100.00			
Searching for contacts with emigrants from Poland who work as nurses	No	47	72.31	38	66.67	85	69.67	0.46	0.499	
	Yes	18	27.69	19	33.33	37	30.33			
	All	65	100.00	57	100.00	122	100.00			
Consultations with recruitment companies	No	58	89.23	41	71.93	99	81.15	5.94	0.015	
	Yes	7	10.77	16	28.07	23	18.85			
	All	65	100.00	57	100.00	122	100.00			
Sending offers to recruitment companies	No	64	98.46	52	91.23	116	95.08	2.03	0.155	
	Yes	1	1.54	5	8.77	6	4.92			
	All	65	100.00	57	100.00	122	100.00			
Internship at a foreign hospital	No	60	92.31	55	96.49	115	94.26	0.36	0.548	
	Yes	5	7.69	2	3.51	7	5.74			
	All	65	100.00	57	100.00	122	100.00			
Others	No	63	96.92	54	94.74	117	95.90	0.02	0.881	
	Yes	2	3.08	3	5.26	5	4.10			
	All	65	100.00	57	100.00	122	100.00			
I did not take any action	No	48	73.85	48	84.21	96	78.69	1.95	0.163	
	Yes	17	26.15	9	15.79	26	21.31			
	All	65	100.00	57	100.00	122	100.00			

Tab. 1. Activities undertaken to find a job abroad by people declaring willingness to work abroad ($N = 122$) by year of study. Source: Authors' research.

The analysis showed a statistically significant difference between groups in terms of consultations with recruitment companies, $\chi^2 (1, N = 122) = 5.94$; $p = 0.015$, which means that among people declaring their willingness to go abroad to take up a job as a nurse, senior students (third and fifth year of study) more often consulted recruitment companies than lower-level students (first and second year of study).

5. Conclusion

The results of the survey carried out show that a significant percentage of current nursing students clearly articulate the readiness to migrate immediately or soon after graduation. Every third respondent plans a permanent emigration, every sixth – for a period of over 5 years.

This is a very worrying finding – it means that the shortage of medical personnel in Poland will deepen. And today, in international statistics presenting human resources in the health care system, Poland is ranked at very distant places, with levels of indicators distant from, for example, averages for OECD countries.

In terms of the number of practicing nurses per 1000 inhabitants in the European OECD countries – Poland takes one of the last places: the analyzed index increased in the years 2000–2015 in Poland from 5.0 to 5.2 (the situation was worse only in Turkey, Greece, and Latvia). In most European countries, the number of practicing nurses per 1000 inhabitants increased during this period (e.g. in Switzerland – from 12.9 to 18 in 2015, in Denmark – from 12.4 to 16.7, in Finland – from 10.7 to 14.7, in France – from 6.7 to 9.9) (Organisation for Economic Co-operation and Development [OECD], 2017).

The process of aging of the nursing staff will deepen in coming years. The average age of Polish nurses registered in the Central Register of Nurses and Midwives increased from 44.2 years to 50.8 years in 2008–2016 (NIPiP, 2017). Almost 75% of nurses who had the right to practice the profession as at 31 December 2016 were aged over 45, and almost 25% of nurses were over 55 years old.

The most frequent reasons for the emigration of nurses, indicated both by the authors of scientific studies and research reports as well as by participants of the nursing student survey quoted in this study, are economic reasons. However, the reasons underlying the functioning of the Polish health care system are also mentioned: uncomfortable conditions of work, low prestige of the nursing profession, difficulties in professional development, etc. It would be advisable to carry out further in-depth research to analyze the reasons for emigration of nursing graduates and take actions as soon as possible to prevent the emigration of nurses. The position of medical professions such as nurses and midwives is still underestimated by decision makers, employers, and the society. The aging society requires an increasing

number of professional nurses able to provide qualified and specialized nursing care, which the current workforce of aging nurses cannot ensure. Certainly, prevention of emigration should consist in the activities that produce quick results such as, for example, increasing salaries, finding other material and non-material benefits to make the profession more attractive, improving working conditions, ensuring flexible working hours or part-time employment, vocational mobilization of retired or economically inactive nurses. It is also necessary to carry out long-term actions aimed at a health care reform, making the nursing profession more attractive, increasing career development opportunities, determining a clear career path in medical professions. Perhaps the introduction of attractive scholarships, loans introduced by future employers for nursing students, and assistance in obtaining a flat or its equipment should also be taken into account by employers who want to be competitive in relation to employers from abroad. The improvement of the situation of Polish nursing staff is a huge challenge for the health department and managing institutions. The most important thing is to increase awareness that the deteriorating situation on the nursing market affects the quality of care and is a direct threat to the safety of human health and life.

References

- Babiarczyk, B., Swół, J., & Schlegel-Zawadzka, M. (2014). Sytuacja polskich pielęgniarek za granicą. *Problemy Pielęgniarstwa*, 2(22), 130–135.
- Buchan, J., Parkin, T., & Sochalski, J. (2003). *International nurse mobility. Trends and policy implications*. Geneva: World Health Organization.
- Buraczyńska, M. (2018). *Plany migracyjne studentów pielęgniarstwa*. MA thesis written under the supervision of J. Haczyński. Warszawa: Wydział Zarządzania UW.
- Centrum Systemów Informacyjnych Ochrony Zdrowia. (2011–2017). *Biuletyn statystyczny Ministerstwa Zdrowia* (2011–2017). Warszawa: Author. Retrieved from <https://csioz.gov.pl/pl/projekty/statystyka/biuletyn-statystyczny/>.
- Dussault, G., Fonteira, I., & Cabral, J. (2009). *Migration of health personnel in the WHO European Region*. WHO Report. Lisboa.
- Frąckiewicz-Wronka, A., Austin, A., & Majowska, M. (2010). Migracje profesjonalistów medycznych – powody i szanse przewyciężenia. In A. Lipski, W. Walkowska (Eds.), *Emigracja jako problem lokalny i globalny*. Mysłowice: Górnospolska Wyższa Szkoła Pedagogiczna im. Kardynała Augusta Hlonda.
- Golinowska, S. (Ed.). (2012). *Zarys systemu ochrony zdrowia. Polska 2012*. [Health Systems in Transition]. Warszawa: European Observatory on Health Systems and Policies/WHO/NFZ.
- Haczynski, J., Skrzypczak, Z., & Winter, M. (2017). Nurses in Poland – Immediate action needed. *Engineering Management in Production and Services*, 9(2), 97–104.
- Haczynski, J., Ryć, K., Skrzypczak, Z., & Suchecka, J. (2017). Zasoby lekarzy w systemie ochrony zdrowia – Polska na tle wybranych krajów europejskich. *Problemy Zarządzania – Management Issues*, 69(3/1).
- Heinen, M.M., van Achterberg, T., Schwendimann, R., Zander, B., Matthews, A., Kózka, M., ... Schoonhoven, L. (2013). Nurses' intention to leave their profession: A cross

- sectional observational study in 10 European countries. *International Journal of Nursing Studies*, 50(2).
- Kaczmarczyk, P. (2005). *Migracje zarobkowe Polaków w dobie przemian*. Warszawa: WNE, Uniwersytet Warszawski.
- Kautsch, M. (2013). Migracje personelu medycznego i ich skutki dla funkcjonowania systemu ochrony zdrowia w Polsce. *Zdrowie Publiczne i Zarządzanie*, 11(2).
- Ministerstwo Zdrowia. (2006). *Monitorowanie migracji polskich lekarzy, pielęgniarek i położnych po przystąpieniu Polski do Unii Europejskiej. Raport z realizacji programu w 2006 r.* Warszawa: Ministerstwo Zdrowia/Platforma Activeweb Medical Solutions. Retrieved from <http://www.mz.gov.pl>.
- Naczelna Izba Pielęgniarek i Położnych (2017, March). *Raport Naczelnej Rady Pielęgniarek i Położnych. Zabezpieczenie społeczeństwa polskiego w świadczenia pielęgniarek i położnych*. Warszawa: Author.
- Organisation for Economic Co-operation and Development. (2017). *Health at a Glance 2017: OECD Indicators*. Paris: OECD Publishing. http://dx.doi.org/10.1787/health_glance-2017-en.
- Radosz, Z. & Paplarczyk, M. (2017). Zawód pielęgniarka – jakie możliwości mają młodzi absolwenci kierunku pielęgniarstwo we współczesnej Polsce? *Pielęgniarstwo XXI wieku*, 17, 31–35.
- Skrzypczak, Z. & Haczynski, J. (2016). Wynagrodzenia pielęgniarek w Polsce w latach 2010–2014. *Studia i Materiały Wydziału Zarządzania UW*, 22(2/2).
- Solga, B. (2013). *Miejsce i znaczenie migracji zagranicznych w rozwoju regionalnym*. Opole: Wydawnictwo Instytut Śląski.
- Wyrozebska, A. & Wyrozebski, P. (2014). *Biała migracja*. Warszawa: Oficyna Wydawnicza Szkoły Głównej Handlowej.