

Reviewer's report

Title: New data on African health professionals abroad

Version: 1 **Date:** 20 August 2007

Reviewer: Patricia Pittman

Reviewer's report:

General

This is a well written, well thought out paper that makes an important contribution to the discussion about how to improve data quality on migration of health professionals. I would recommend accepting the paper, but suggest that the author adopt a more humble approach in acknowledging the limitations of his contribution. His/her final statement that until a data base like his exists, quantitative study of this issue is impossible, is an overstatement at best.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

The rationale for this paper is that recent international concern about the impact of emigration of health professionals on health systems in poor countries has no evidence base, and that better data on migratory flows is needed before the impact of "brain drain" can be assessed. On that we can agree.

Census data from nine countries, however, only provides information aggregated at a national level. Local data and experiences may be far more important to understanding the impact of "brain drain" than the percentage of African born health professionals residing in developed nations. If in a given township the health authority reports that 50% of his or her nursing staff departed in the last year, that is the kind of data that matters. It is the disruption of the delivery of vital health services that should be the focus of any impact assessment. The fact that overall, a certain percent of professionals live abroad, is relevant only as context. That is in part because of the misdistribution of health professionals within countries (rural/urban and private/public).

Even at a national level, the numbers of professionals that practice abroad is but one limited way to assess the potential damage of more professionals being recruited. Far more useful, for example, would be a set of measures that all stakeholders agree defines "areas of critical shortages". Vacancy rates for funded positions would be a key part of that. Turnover rates in district hospitals

due to migration would be another.

Beyond these general comments, the author's central point, that in order to aggregate data from source countries it must be a standardized source, is well taken. Further discussion of census data limitations as a source of data on professional migration is needed, however, including clarification on the following:

- It is not clear whether the author is counting all health professionals born in Africa or only those that have arrived after 21 years of age. If it is not age specific in all countries, then African born physicians and nurses that emigrated as children are also being counted. Obviously, the loss of uneducated children is very different than those that were in practice before departing.
- There is no standardized definition of RN either in Africa or in the OECD countries. Census data will reflect national definitions.
- Census data is old. The year 2000, for example, was a turning point in the global nurse shortage, with major international recruitment beginning after that. This limits its use in any impact study of current migration.

Selecting only nine nations, although well justified in the paper, also has at least one more limitations than acknowledged. Surveys on "intent to migrate" report ultimate destination country of choice. We know, however, that there is an international "carousel" that often leads professionals from one country to the next in the hopes of making it up the food chain to the wealthiest nations. Jamaica, for example, is a major importer of African nurses.

A small detail: the author indicates that he is looking at professionals in nine "developed" nation, but then includes South Africa.

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.