

Ethically Managing the Migration and Recruitment of Nurses in Ghana: Roundtable Report 2023



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Ethically Managing the Migration and Recruitment of Nurses in Ghana: Roundtable Report 2023

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About the Ghanaian-Diaspora Nurse Alliance (G-DNA) Inc.

The G-DNA is a non-profit organization that seeks to foster a sustainable local-global collaboration between Ghanaian nurses in Ghana and the Diaspora to advance nursing education in Ghana and improve health outcomes of Ghanaian people

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Roundtable Objectives

1. Develop a framework for the ethical recruitment of nurses in Ghana.
Define data systems needed to inform effective monitoring of the emigration of Ghanaian nurses.
2. Develop a framework for conducting nursing and midwifery workforce planning and forecasting through a health labor market lens.
3. Discuss strategies, policies, and professional development resources needed to attract, recruit, and retain Ghanaian nurses where they are needed.
4. Advocate for a national policy to address the rise in migration of nurses from Ghana to high-income countries.
5. Identify support structures that will foster the successful integration of Ghanaian nurses after migrating to high-income countries.



Table 1. Roundtable Attendees and Affiliations(Alphabetical order)

Name	Organization	Role
Hannah A. O. Acquah, RN	Ghana College of Nurses & Midwives (GCNM)	Rector
Evelyn Amoako, MPH, RN	Ghanaian-Diaspora Nursing Alliance (G-DNA)	Ghana Liaison
Perpetual Ofori Ampofo, MPH, RN	Ghana Registered Nurses & Midwives Association (GRNMA)	President
Cecilia A. Anim, CBE FRSA FRCN	Royal College of Nursing	Former President
Kwesi Asabir, PhD	Ministry of Health (MOH), Ghana	Director of Human Resources for Health Directorate
James Avoka Asamani, PhD,MSc, MPhil,RN	World Health Organization, Africa (WHO)	Team Lead for Workforce at the WHO
Isabella Naana Akyaa Asante, RN	Nursing & Midwifery Council, Ghana (N&MC)	Board Chairperson
Lydia Aziato, PhD, RN	University of Health & Allied Science (UHAS)	Vice Chancellor
Neil Barklem, MBA	Future Perfect Health, Inc.	Chief Executive Officer
James M Buchan, PhD, DPM, MA (hons)	Health Foundation in London UK, University of Technology, (UTS), Sydney, Australia (WHO Collaborating Centre)	Consultant
Howard Catton, MA, RN	International Council of Nurses (ICN)	Chief Executive Officer
Yvonne Commodore-Mensah, PhD, MHS, RN	Ghanaian-Diaspora Nursing Alliance (G-DNA)	President and Co-founder
Kaley Cook, MS	Commission on Graduates of Foreign Nursing Schools (CGFNS)	Program Manager for the Alliance for Ethical International Recruitment Practices
Matilda Decker, DNP, RN	Ghanaian-Diaspora Nursing Alliance (G-DNA)	Vice-President, Co-founder
Irene Fankah, MPH, RN	Ghanaian-Diaspora Nursing Alliance (G-DNA)	Co-Director of Education
Lawrence Odartey Lawson	Ministry of Health (MOH), Ghana	Deputy Director, Human Resources for Health Directorate
Eva Mensah, RN	Ghana Health Service (GHS)	Director of Nursing and Midwifery
Martha Nugent, RN,	Ghana Nurses Association (GNA), UK	President
Nancy Reynolds, PhD, RN	Johns Hopkins School of Nursing	Associate Dean of Global Affairs, Director, Center for Global Initiative
Philomena Woolley, MPhil, BSc. RN	Nursing & Midwifery Council, Ghana (N&MC)	Acting Registrar
Barnabas Yeboah, PhD, MPhil, RN	Ministry of Health (MOH)	Director of Nursing and Midwifery

Roundtable Participants Expectations

The roundtable participants included stakeholders from the Ministry of Health, Ghana, the World Health Organization, the International Council of Nursing, government and regulatory agencies, academic institutions, and the Ghana Registered Nurses and Midwives Association. At the beginning of the roundtable, the stakeholders were invited to share their expectations. In summary, the participants hoped that the dialogue would contribute to efforts to explore migration challenges, enhance nursing standards, and support nurses' development. Their collective goals included addressing key issues in healthcare management, fostering transparent discussions, and seeking practical solutions in the realm of global health, migration, and ethical recruitment practices. The anticipated outcomes encompassed actions leading to a balanced approach to migration, collaboration between stakeholders and training institutions, and the provision of insights into current and future healthcare challenges.

Foreword

The global nursing workforce faces a critical shortage, particularly in high-income countries (HICs) like the US, UK, and Canada. While these countries grapple with aging populations, burnout, and limited training capacity, they simultaneously face a stark reality: nearly 89% of the global nursing shortage lies in low- and middle-income countries (LMICs) like Ghana.



Ghana has made strides in increasing nurse training, but severe shortages persist. Despite boasting over 120,000 nurses, Ghana has only 3.6 nurses per 1,000 people compared to HICs. This disparity is exacerbated by the exodus of Ghanaian nurses, with an estimated 7,000 departing since 2022 alone. This phenomenon, often driven by poor working conditions and unethical recruitment practices, raises serious ethical concerns.

Paradoxically, Ghana also faces the challenge of "unemployed nurses." With limited government employment opportunities and a dramatic shift towards a younger workforce, approximately 90,000 newly trained nurses are expected to be unemployed by the end of 2023. This underscores the need for comprehensive policies that address the ethical recruitment of nurses and the retention of existing talent.

Universities have a crucial role to play in this complex issue. By supporting data-driven decision-making, co-developing ethical recruitment policies, and researching the experiences of nurses, they can contribute significantly to a sustainable solution. The roundtable is aligned with the Johns Hopkins School of Nursing Policy Institute, which seeks to ensure that nurses globally have a voice and to maximize the expertise of nurses beyond traditional roles and shape the future of the nursing workforce in Ghana and neighboring African countries. The roundtable is also aligned with the WHO Strategic Directions for Nursing and Midwifery to "Increase the availability of health workers by sustainably creating nursing and midwifery jobs, effectively

recruiting and retaining midwives and nurses, and ethically managing international mobility and migration."

Thus, the roundtable convened by the Ghanaian-Diaspora Nursing Alliance assembled local and global stakeholders with expertise in nursing, labor market analysis, healthcare workforce, nurse migration and health policy. The roundtable sought to co-create policy recommendations to ethically manage the migration of nurses and midwives from Ghana.

This report serves as a roadmap for managing nurse migration ethically and strengthening Ghana's healthcare sector. It presents comprehensive data, highlights ethical considerations, and proposes a national system for effective management. The report also outlines a set of policy recommendations based on World Health Organization best practices, including:

- Transitioning to degree-level basic nursing education
- Investing in training infrastructure
- Establishing a dedicated office for migrant nurses and midwives
- Investing in specialist education
- Improving salaries and working conditions
- Developing bilateral agreements with receiving countries

Implementing these recommendations can create a win-win situation for Ghana, its nurses, and the global healthcare system. By ensuring ethical migration practices and prioritizing the well-being of its healthcare workforce, Ghana can build a robust and sustainable healthcare system for all.

Glossary

CGFNS	Commission on Graduates of Foreign Nursing Schools
COVID	Coronavirus Disease
EU	European Union
G-DNA	Ghanaian-Diaspora Nursing Alliance
GCNM	Ghana College of Nurses and Midwives
GDP	Gross Domestic Product
GHS	Ghana Health Service
GNA	Ghana Nurses Association (UK)
GRNMA	Ghana Registered Nurses and Midwives Association
HeFRA	Health Facilities Regulatory Agency
HIC	High-income country
ICN	International Council of Nurses
JHSON	John Hopkins School of Nursing
LMIC	Low- or Middle-Income Country
MoH	Ministry of Health
NAC	Nurse Assistant Clinical
NAP	Nurse Assistant Preventive
N&MC	Nursing and Midwifery Council of Ghana
NRCD	National Redemption Council Decree
RCN	Royal College of Nursing
SDG	Sustainable Development Goals
SSL	Support and Safeguard List
SOWN	State of the World's Nursing
UHAS	University of Health and Allied Sciences
WHO	World Health Organization

Executive Summary

This report summarizes the outcomes of a roundtable meeting convened by the Ghanaian-Diaspora Nursing Alliance (G-DNA) on August 19, 2023 at the Nursing and Midwifery Council of Ghana and via Zoom. The meeting focused on initiating the process of developing an ethically driven framework for recruiting, retaining, and managing the migration of nurses and midwives in Ghana.

Key Findings:

- **Diverse Collaboration:** Stakeholders from government, healthcare, and international organizations participated, highlighting a collaborative approach to knowledge generation.
- **Balanced Approach:** The discussion emphasized addressing excessive nurse migration while maximizing its benefits, requiring political, financial, and policy interventions.
- **Supportive Environment:** Creating a supportive work environment and robust specialist nurse education were highlighted as essential.
- **Infrastructure and Training:** Investments in healthcare infrastructure and training institutions were deemed crucial.
- **Bilateral Agreements:** Fostering bilateral agreements with high-income countries and other African nations was emphasized.
- **International Integration:** Support structures for integrating international nurses abroad were deemed vital.

Recommendations:

- Develop a comprehensive national strategy for ethical nurse recruitment, retention, and migration.
- Invest in infrastructure, human resources and training institutions to enhance capacity and attract diverse talent.
- Implement policies promoting competitive salaries, benefits, and working conditions for nurses.
- Prioritize the development of specialist nurse education programs and mentorship opportunities.

- Foster bilateral agreements with high-income countries and other African nations to ensure ethical recruitment practices and benefits for both source and recipient countries.
- Establish support structures for international nurses and midwives to facilitate their successful integration abroad.

By implementing these recommendations, Ghana can build a robust and ethical nursing workforce, ensuring quality healthcare for its citizens and maximizing the potential benefits of nurse migration.

Introduction

Healthcare provision remains an indispensable area in the socioeconomic development of any country. As such, prioritizing and sustaining the healthcare system is an essential activity that cannot be understated. As affirmed by the World Health Organization (WHO), health systems have a positive impact on the economic performance of other sectors in the national economy.¹ A well-functioning healthcare system, by this understanding, has the potential to advance health and contribute to sustainable development.

Ghana's health workforce is facing several challenges, including shortages of skilled personnel, unequal distribution of personnel and resources, low levels of motivation and productivity, and migration of health workers to HICs. These challenges hinder the country's ability to achieve its Sustainable Development Goals (SDGs) related to health.² The shortage of skilled health workers is due to several factors, including inadequate recruitment capacity, poor retention of health workers and inadequate funding. Allocation of resources to the health sector by the government is insufficient, and in 2019, the government allocated only 8.1% of its annual budget to health expenditure, falling short of the Abuja Declaration's recommendation for at least 15% for universal health coverage (UHC).³

Insufficient investment in the health sector has led to a shortage of resources for the training and recruitment of health workers. Furthermore, the health workforce in Ghana is not evenly distributed throughout the country. There is a concentration of health workers in urban areas, while many rural areas are underserved. This is due to a number of factors, including better working conditions and opportunities for educational and career development in urban areas and critical infrastructure gaps in rural areas.

The recruitment of nurses and midwives from Ghana by HICs raises troubling ethical concerns. According to the *CGFNS 2023 Nurse Migration Report*,⁴ Ghana is one of the top six source countries for VisaScreen® applicants. While individual nurses and midwives who migrate benefit from increased salaries and career prospects, aggressive recruitment practices can exacerbate existing healthcare worker shortages in Ghana, which compromises patient care and jeopardizing an already fragile healthcare system. Furthermore, although the World Health Organization's ethical guidelines discourage active recruitment from countries facing critical personnel shortages, there is a paradox of unemployed nurses and midwives in Ghana.

Nonetheless, nurses and midwives are the bedrock of Ghana's healthcare system. Nurses and midwives contribute to national and global targets related to a range of health

priorities, including universal health coverage, mental health and non-communicable diseases, emergency preparedness and response, patient safety, and the delivery of integrated, person-centered care.⁵

This report seeks to initiate the co-creation of a model that promotes ethical migration and excellence in nursing. Therefore, there is a need to address these challenges, but not by preventing migration. Instead, it seeks to create a framework that promotes ethical migration while enhancing the quality of nursing practice in Ghana. Co-creation, collaborative knowledge generation, and power-sharing are essential components of this process. It also emphasizes the potential for positive change through well-crafted policies and political engagement that prioritize nurses' and midwives' well-being and development.

The Ghanaian healthcare system stands at a crossroads. While it plays a vital role in the country's socioeconomic development, it faces significant challenges, including a critical shortage of skilled personnel, particularly nurses. This deficit hampers Ghana's progress towards achieving its Sustainable Development Goals related to health.²

The World Health Organization recognizes the powerful link between robust healthcare systems and a thriving national economy.¹ Yet, the Ghanaian government's allocation of resources to health falls short of international recommendations, hindering efforts to recruit and retain skilled workers.³ This, coupled with poor resource distribution, leads to a concentration of healthcare professionals in urban areas, leaving rural communities underserved.

Nurses and midwives are driving Ghana's progress towards critical health priorities. From universal health coverage to tackling non-communicable diseases, their contribution is undeniable. However, the current migration patterns threaten to undermine this vital workforce, jeopardizing the health and well-being of the Ghanaian population.

This report proposes a bold new approach: co-creating a model that fosters ethical migration while nurturing excellence in nursing. Instead of attempting to prevent migration altogether, this model seeks to create a framework that facilitates ethical movement while simultaneously enhancing the quality of nursing and midwifery practice within Ghana. It emphasizes the transformative power of collaborative knowledge generation, power-sharing, and well-crafted policies that prioritize the well-being and development of nurses and midwives.

By prioritizing ethical migration and nursing excellence, Ghana can ensure a thriving healthcare system that underpins its national progress and serves the needs of all its citizens. This report is a call to action, a roadmap towards a future where Ghana's healthcare system thrives, supported by a strong and empowered nursing workforce.

Background

Health workforce in Ghana

Ghana, located in West Africa, has a population of approximately 30 million people.⁶ Ghana is said to have some 1.64 medical doctors and 34.96 nurses and midwives per 10,000 population² (with less than one hospital bed per 1,000 people).

According to the World Health Organization (WHO), there are only 0.2 physicians per 1,000 people in Ghana and 3.6 nurses per 1,000 population in Ghana⁷ compared to the WHO recommended standard of 2.5 medical staff (physicians, nurses and midwives) per 1,000 people² to provide adequate coverage with primary care interventions. It is estimated that the country spends, on average, about six percent of its GDP on healthcare infrastructure.^{8,9} However, the COVID-19 pandemic proved how crucial the healthcare sector is despite the weaknesses and critical healthcare infrastructure gaps it exposed. While the sector is saddled with several challenges, notable among which have been inadequate financial investments and limited health workforce and facilities, it is also grappling with the exodus of trained nurses and midwives migrating or being recruited to high-income countries abroad, such as the United Kingdom (UK), Germany, Canada, and the United States.



Key statistics on Nursing education and the Nursing workforce in Ghana

Ghanaian Nursing Training Institutions.

In Ghana, according to the Ministry of Health(MoH), there are approximately 121,000 nurses in the public sector.² The significant increase in nursing professionals over the years is also complemented by a rising number of nursing training institutions. There are currently 133 across the country. Of this, 64 percent are government-owned, while 36 percent are privately owned.

Nursing and Midwifery Council of Ghana: A Crucial Regulator for Professional Training of Nurses and Midwives in Ghana

Presented by Mrs. Philomena Woolley, Acting Registrar, Nursing and Midwifery Council of Ghana

The Nursing and Midwifery Council of Ghana (N&MC) plays a vital role in ensuring the quality and standards of nursing and midwifery education and practice in the country. Established by the Nurses and Midwives Decree, 1972 (NRCD 117), the N&MC acts as the regulatory body for the profession, with a mandate to:

- Regulate the training and practice of nursing and midwifery in Ghana.
- Set and enforce standards for nursing and midwifery education.
- Develop and maintain a register of qualified nurses and midwives.
- Investigate and discipline nurses and midwives who breach the code of conduct.
- Promote the development of the nursing and midwifery professions.

Key responsibilities of the N&MC include:

- Developing and approving curricula for nursing and midwifery programs
- Accrediting training institutions
- Conducting licensing examinations
- Registering qualified nurses and midwives
- Providing continuing professional development programs
- Investigating complaints against nurses and midwives
- Disciplining nurses and midwives who breach the code of conduct.

Impact of the N&MC on the Nursing and Midwifery Professions:

The N&MC has made significant contributions to the development of the nursing and midwifery professions in Ghana. The council's efforts have resulted in improved quality of nursing and midwifery education, increased professionalism among nurses and midwives, enhanced quality of patient care and greater public confidence in the nursing and midwifery professions.

Indexing of Student Nurse Assistants, Nurses, and Midwives

The N&MC plays a crucial role in ensuring the quality of nursing and midwifery education by indexing student nurse assistants, nurses, and midwives. This process

involves recording students' personal data into a database to verify their eligibility for admission into various programs. This ensures that each student meets the approved entry requirements as prescribed by the N&MC in collaboration with the Ministry of Health.

Data on the number of indexed nurses and midwives from the N&MC are presented in **Figure 1**.

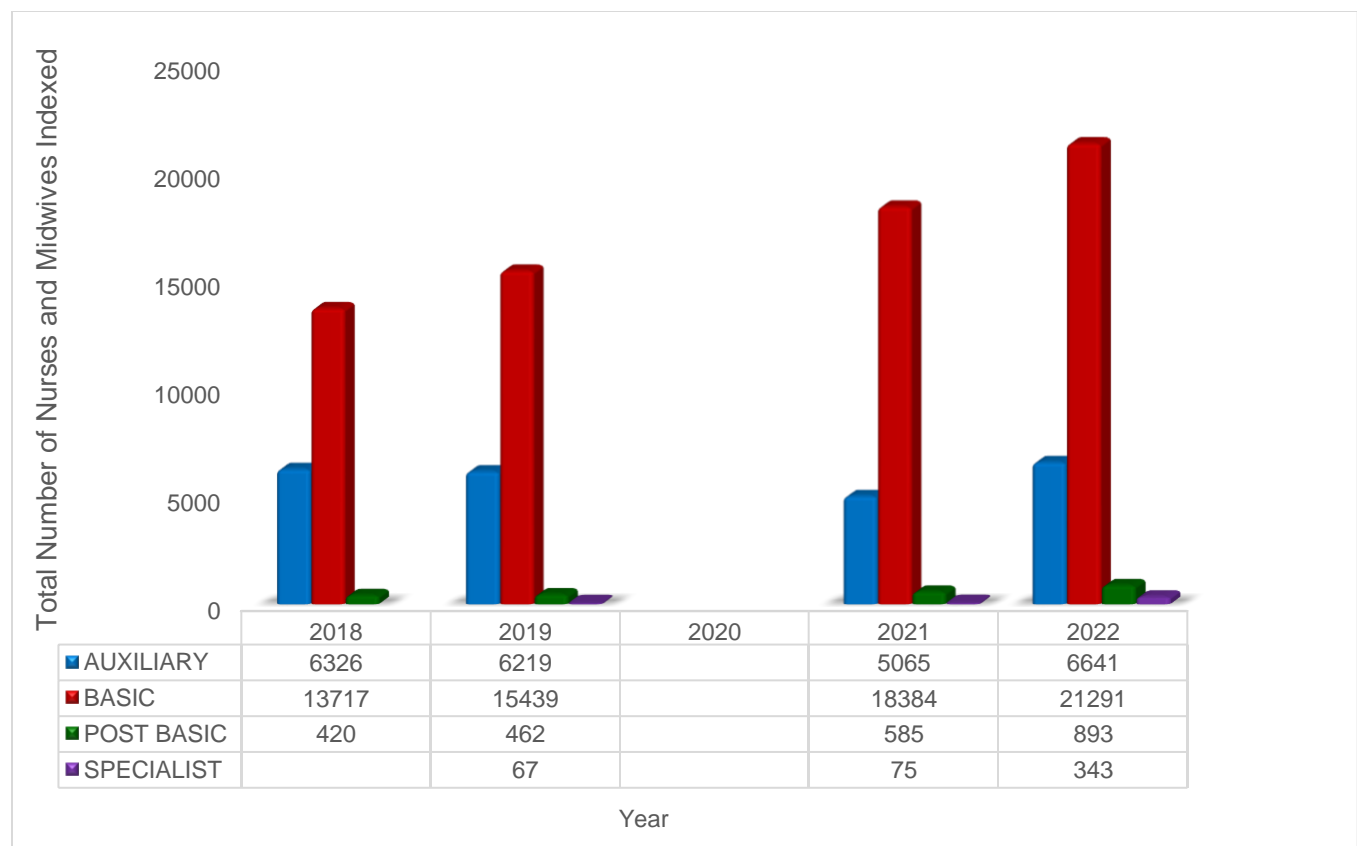


Figure 1. Data on Nurses and Midwives Indexed at the Nursing and Midwifery Council of Ghana. Source: N&MC, Ghana 2023

Data verification requests, N&MC

Data presented on the yearly breakdown of verification requests suggests the continued demand for verification services for nurses. The data reveals a consistent upward trend in foreign verification requests over the analyzed period, with substantial increases seen from 2020 to 2022.

The data indicates that the United States of America (USA) and the United Kingdom (UK) have the highest numbers of applicants for credential verification, with 1950 and 1793 applicants respectively. Canada and Ireland also show a substantial number of applicants, with

739 and 556 applicants respectively. While Australia has a relatively lower number of applicants, it still contributes significantly with 26 applicants. Other countries like the Bahamas, Botswana, and Malta show lower applicant numbers, with 11, 1, and 1 applicant respectively.

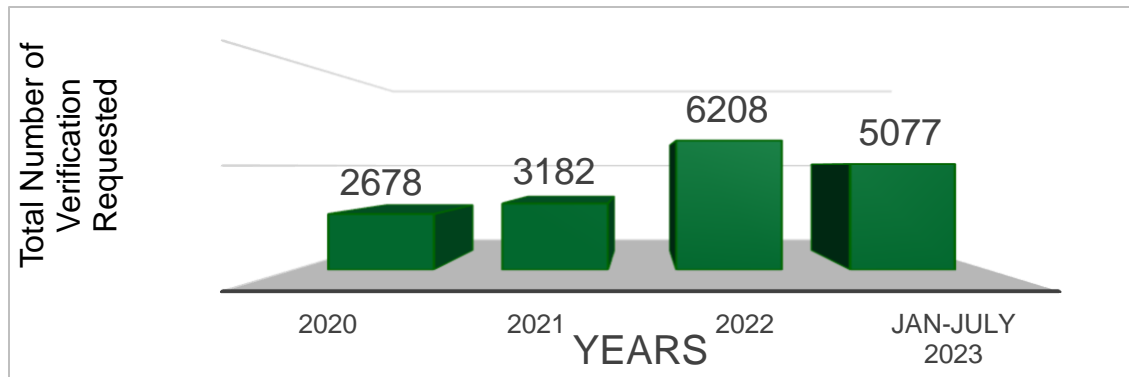


Figure 2. Data On Foreign Verifications Requested From 2020-2023 (Jan-July) from the N&MC

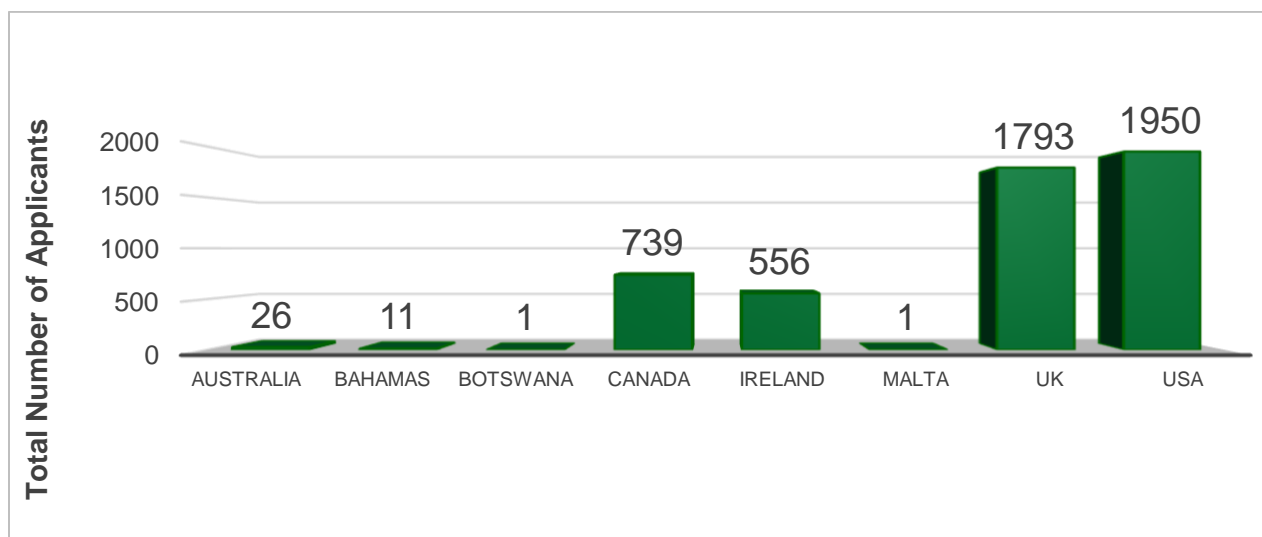


Figure 3. Application For Credential Verification January - July 2023

Literature Review and Findings

The Global Context for Ethically Managing the Migration and Recruitment of Nurses in Ghana

Presented by Dr. James M. Buchan

The Global Nursing Workforce:

According to the *Recover to Rebuild* report,¹⁰ the global nursing and midwifery workforce faces several challenges, including an aging population, healthcare policy demands, shortages, skills mismatches, and the impact of the COVID-19 pandemic. Furthermore, universal health care and sustainable development goals (SDGs) are not attainable without a viable and sustainable health workforce. However, on a global scale, there are nurse and midwife shortages, skills mismatches, sector, and geographic maldistribution. The COVID-19 pandemic has exacerbated the demand for nurses and reduced the supply of nurses globally.^{10,11} **Thus, policy solutions must focus on building an effective nursing and midwifery workforce: planning, recruitment, retention, motivation, skills enhancement, and team collaboration.**

The State of the World's Nursing (SOWN) reported that prior to the pandemic, the global nursing workforce was approximately 27.9 million, with 90% being female.⁵ A shortage of 5.9 million nurses was reported, with shortages concentrated in low- and lower-middle-income countries (LMICs).⁵ About one in six nurses were expected to retire in the next 10 years, requiring the education of 4.7 million new nurses to replace them, primarily in high-income countries (HICs). Nurse graduation rates were three times higher in high-income countries compared to low-income ones. Additionally, one in eight nurses practiced in a country different from their birth or training place.¹⁰

International Recruitment

International recruitment presents both benefits and challenges. For destination countries, it can help address skills shortages and improve career prospects, but it also raises ethical concerns. Source countries might benefit from remittances and upskilled returnees, but outflows can worsen their own skills shortages. Mobility for nurses and midwives can enhance pay and opportunities while achieving equal opportunities in destination countries. In situations of oversupply, static nurses and midwives might find improved job opportunities, but in cases of undersupply, their workload increases.

Drivers and Contributing Factors of International Mobility of Nurses and Midwives:

Drivers of International Mobility of Nurses and Midwives:

- **Financial Incentives:** Higher salaries and better benefits in high-income countries attract nurses and midwives seeking better financial stability.
- **Career Opportunities:** Access to advanced training, specialization opportunities, and career advancement drives international mobility.
- **Education:** Nurses and midwives may seek international opportunities to complete specialized education or training not available in their home countries.
- **Security:** Some nurses and midwives migrate to escape political instability or violence in their home countries.
- **Shortages in High-Income Countries:** To address workforce shortages, high-income countries actively recruit nurses and midwives from other nations.

Contributing Factors:

- **Shared Language and Culture:** Shared language and cultural similarities facilitate adaptation and integration into a new environment.
- **Curriculum and Qualifications:** Alignment of nursing education and qualification standards eases the process of international mobility.
- **Geographical Proximity:** Proximity to home countries can be attractive for nurses and midwives seeking to maintain close ties with family and friends.
- **Migrant Communities:** Existing migrant communities in host countries can provide support networks and ease cultural transition.

Codes of Practice on International Recruitment

The WHO Code on International Recruitment of Health Personnel:

The WHO Code on International Recruitment of Health Personnel, adopted in 2010, serves as a landmark agreement aimed at ensuring ethical and responsible practices in the global recruitment of health workers.¹² Recognizing the potential negative impact of unregulated recruitment, the Code seeks to address the challenges of health workforce shortages in some countries while protecting the health systems of others. Since its adoption, the WHO Code has played a significant role in raising awareness of ethical considerations in international health worker recruitment. It has also provided a framework for countries to develop national policies and regulations on recruitment practices. However, challenges remain in ensuring the effective implementation of the Code, including limited resources and enforcement mechanisms.

Key Principles of the WHO Code:

- ❖ **Discouraging Active Recruitment from Support and Safeguard List Countries:** The Code discourages active recruitment from countries identified by the WHO as facing critical shortages of health personnel. This "red list" approach aims to prevent further depletion of health systems in vulnerable countries.¹³
- ❖ **Promoting Fair Treatment of Internationally Educated Nurses:** The Code emphasizes the importance of fair and transparent recruitment practices, ensuring that international health workers receive equal treatment and respect in their host countries. This includes providing accurate information about job offers, respecting contractual obligations, and ensuring fair working conditions.¹⁴
- ❖ **Advocating for Health Workforce Sustainability:** The Code recognizes the importance of supporting the development and sustainability of health workforces in all countries. This includes promoting investment in education and training, strengthening health systems, and encouraging sustainable migration practices.
- ❖ **Encouraging Cooperation and Bilateral Agreements:** The Code encourages collaboration between countries to address health workforce challenges. This can be achieved through bilateral agreements that promote fair and ethical recruitment practices, knowledge exchange, and joint training programs.¹⁵

- ❖ **Improving Data Monitoring on Health Personnel:** The Code recognizes the need for accurate and comprehensive data on the international recruitment and migration of health personnel. This data is essential for informing policy decisions and monitoring the implementation of the Code.¹³

Updated Support and Safeguard List (SSL) of Countries

A country is included if the health workforce density is less than the global median of 49 per 10,000 population OR the UHC service coverage index is less than 55. There are 55 countries globally on the SSL (37 in the African region), including Ghana. Active international recruitment from listed countries is discouraged. Active recruitment is where job opportunities are actively promoted or candidates are actively targeted by recruiters. The implication is that although HICs cannot actively recruit from countries on the SSL, it does not curtail a nurse's right to migrate. Thus, healthcare workers from SSL countries can make individual efforts to emigrate.

WHO advises that government-to-government agreements related to health worker mobility, under certain circumstances, are not proscribed for the listed countries, but should:

- Be informed by a health labor market analysis (HLMA) and the adoption of provisions to ensure adequate domestic supply in countries;
- Explicitly engage health sector stakeholders, including ministries of health, in the dialogue and negotiation of relevant agreements;
- Specify benefits to the health system of source countries that are commensurate and proportional to the benefits accruing to destination countries; and
- Be notified to the WHO Secretariat through the respective National Health Workforce Accounts and Code reporting processes.

Health Care Code for Ethical International Recruitment and Employment Practices

The most recent Code edition was issued by the **Alliance for Ethical International Recruitment Practices**, a division of CGFNS International in 2023.¹⁶ The Code acknowledges the complex interplay of interests involved in recruiting foreign-educated health professionals (FEHPs) to the United States. Recognizing the fundamental right to migration, the Code seeks a balanced approach that considers the legitimate concerns of health professionals, their home countries, and employers in the host nation. By carefully weighing these individual and collective interests, the Code strives to maximize benefits while minimizing potential harm for all parties involved.

The Code aims to:

- **Align expectations:** Establish clear expectations for all stakeholders, including recruitment agencies, FEHPs, and healthcare employers.
- **Promote ethical behavior:** Provide a strong framework for ethical recruitment practices, ensuring transparency and accountability.
- **Empower FEHPs:** Equip FEHPs with knowledge and clarity about their rights and responsibilities throughout the process.

The Code recognizes that ethical practices, coupled with transparency and knowledge, form the cornerstone of a safe, fair, and just international healthcare recruitment process. By upholding these principles, the Code strives to create a win-win situation for FEHPs, their home countries, and the healthcare systems they ultimately serve.

Code of Practice for the International Recruitment of Health and Social Care Personnel in England

Overall, this Code of Practice aims to balance the UK's need for skilled healthcare professionals with its ethical responsibility to protect vulnerable countries and their healthcare systems. The Code of Practice aims to ensure ethical and responsible hiring practices for foreign healthcare professionals. It promotes transparency, fairness, respect for individual rights, and sustainable recruitment practices that benefit both the UK and developing nations. In this code of practice, active international recruitment is defined as any action targeting individuals to market UK healthcare jobs, including physical or virtual methods.

Key Objectives:

1. Ethical and Best Practice Recruitment:

- Define and enforce principles and best practices for UK employers.
- Align practices with WHO recommendations for ethical, managed, and mutually beneficial outcomes.
- Ensure transparency and fairness throughout the recruitment process.

2. Protecting Vulnerable Countries:

- Restrict active recruitment from countries facing critical health workforce shortages ("red and amber list").
- Allow managed recruitment under exceptional circumstances with government-to-government agreements.

- Prioritize support for healthcare systems in these countries to achieve universal health coverage and UN goals.

3. Responsible Recruitment:

- Outline the UK government's approach to supporting international healthcare workforces.
- Balance recruitment needs with ethical considerations and strong safeguards.
- Minimize potential harm to healthcare systems in source countries.

4. Attracting and Retaining Talent:

- Assure international personnel of high-quality induction and support programs.
- Create a positive and supportive environment to attract and retain skilled professionals.

Trends in the Ghanaian Nursing Workforce

By Dr. James Avoka Asamani

Dr. Asamani presented an in-depth analysis of the Ghanaian nursing workforce as of June 2023, along with trends in workforce dynamics, migration, financial space analysis, and implications for both source and destination countries. He also outlined suggested policy options to address challenges and opportunities in the nursing sector. He presented from the Ministry of Health on the nursing and midwifery workforce as of June 2023. (**Table 2**)

121,000 Public Sector Nursing & Midwifery Workforce	68,921 Professional Nurses (57%)	53,709 Diploma Nurses & Midwives (78% of Professional. Nurses)	14,444 Degree or Postgraduate Nurses & Midwives (21%)
23,590 Midwives	52,080 Associate Professionals (NAC & NAP)	198 GCNM trained specialists	~1,200 Reduction in Gov't Payroll: Dec. 2022 vs June 2023

Table 2. The Nursing and Midwifery Workforce in Ghana by the Numbers

He also noted that there is an imbalance in the geographic distribution of nurses and midwives in Ghana. Three regions (Greater Accra, Ashanti, and Eastern) have 42% of all nurses; and 46% of Professional nurses (they also have 45% of the population). The Greater Accra Region has the highest number of nurses and midwives, followed by the Ashanti Region and the Central Region. The Northern Region, North East Region, and Savannah Region have the lowest number of nurses and midwives. (Figure 4)

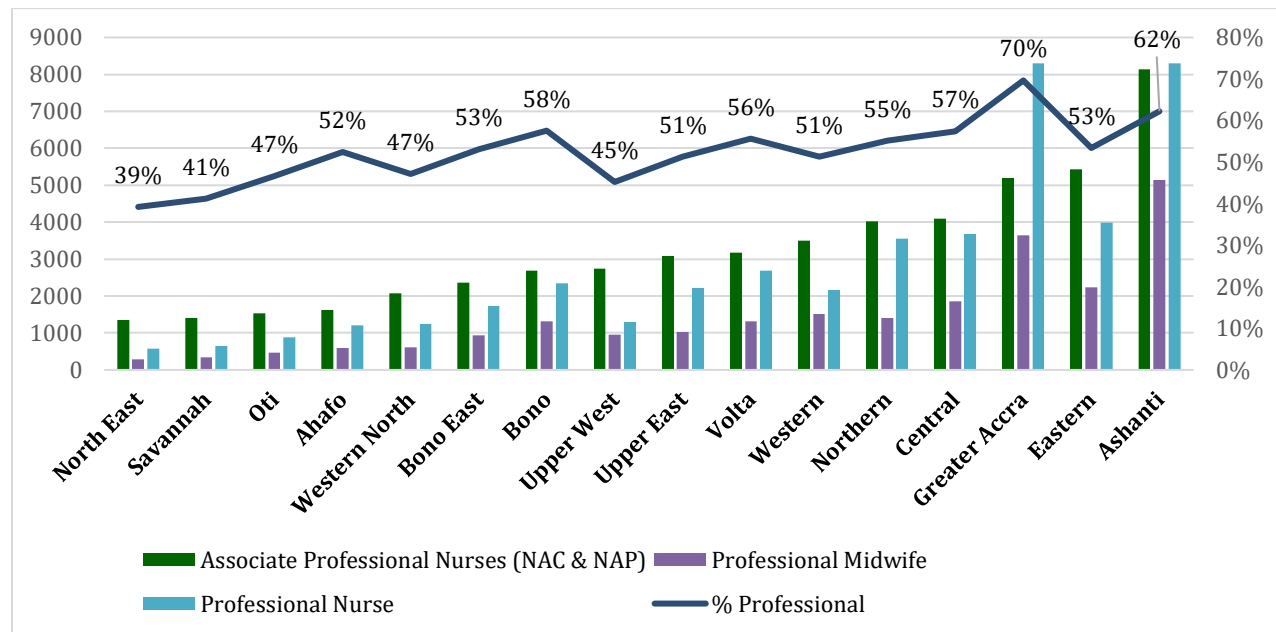


Figure 4. Geographic distribution of the Nursing and Midwifery Workforce in Ghana.

Source: Ministry of Health, Ghana. 2023

Trends in the Nursing and Midwifery Workforce

Dr. Asamani also presented trends in the nursing and midwifery workforce. (Figure 5). The data indicate that the nursing and midwifery workforce has shown distinct phases of expansion and challenges from 2002 to 2022. He noted there has been an 840% increase in the headcount of nurses and midwives. Between 2002 and 2011, there was a transition from "numerus clausus" to an ambitious expansion and liberalization of nursing training. The automatic posting process ensured that there were guaranteed positions for nursing graduates. Between 2012 and 2019, nursing and midwifery training expanded and was politicized. A pattern of unemployment emerged from 2014. From 2020 onwards, the government has been faced with the fiscal realities of balancing the production of nurses and midwives with the

country's capacity to absorb and or export. The country is also seeking bilateral agreement to "export" nurses and midwives.

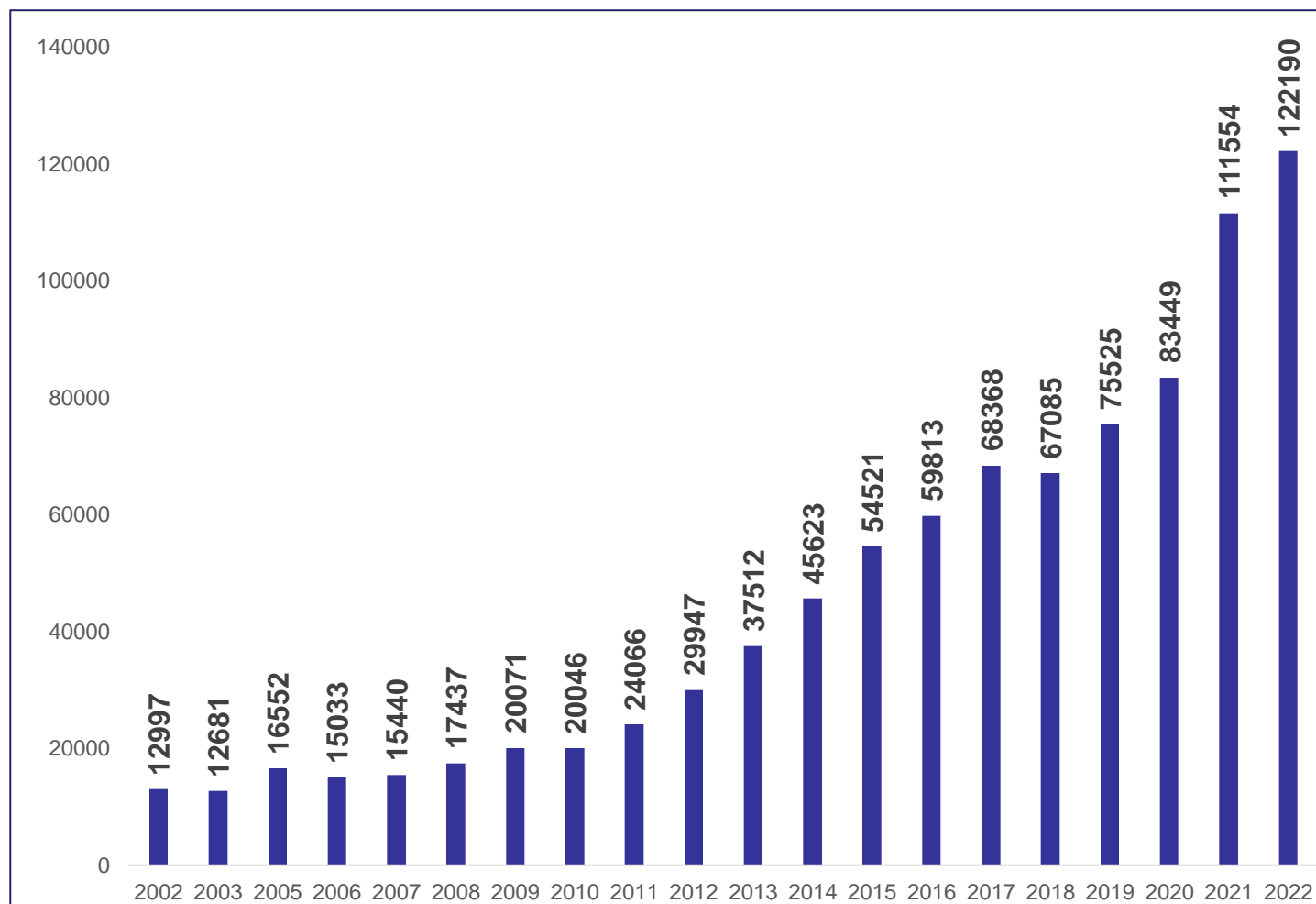


Figure 5. Trends in the nursing and midwifery workforce, 2002-2022

Unemployment of Nurses and Midwives in Ghana

Since 2020, the Ministry of Health, Ghana estimates that there have been approximately 21,000 unemployed Ghana nurses every year. It is projected that by the end of 2023, there will be approximately 90,000 unemployed nurses and midwives in Ghana. Ghana's healthcare system is facing a critical challenge: a burgeoning unemployment crisis among its nurses and midwives. Since 2020, the Ministry of Health has estimated a staggering 21,000 nurses and midwives are considered unemployed. (Ministry of Health, Ghana, 2023). This concerning trend is projected to escalate, with a staggering 90,000 nurses and midwives projected to be unemployed by the end of 2023 (Ghana News Agency, 2023).



The number of unemployed Ghanaian nurses by the end of 2023

~90,000

This paradox of unemployment amidst a critical shortage of healthcare workers is a complex issue with multifaceted roots.

Financial Space Analysis for Health Workforce in Ghana

The analysis considers public sector fiscal space, estimated private sector demand, cumulative financial space, and the cost of employing projected supply. The financial analysis aids in understanding the capacity to meet workforce demands.

The migration of health workers is influenced by market forces and wage differentials. Causes of International Migration include unattractive remuneration, unemployment, lack of career development, poor working conditions, and challenging economic situations are the main drivers of migration.

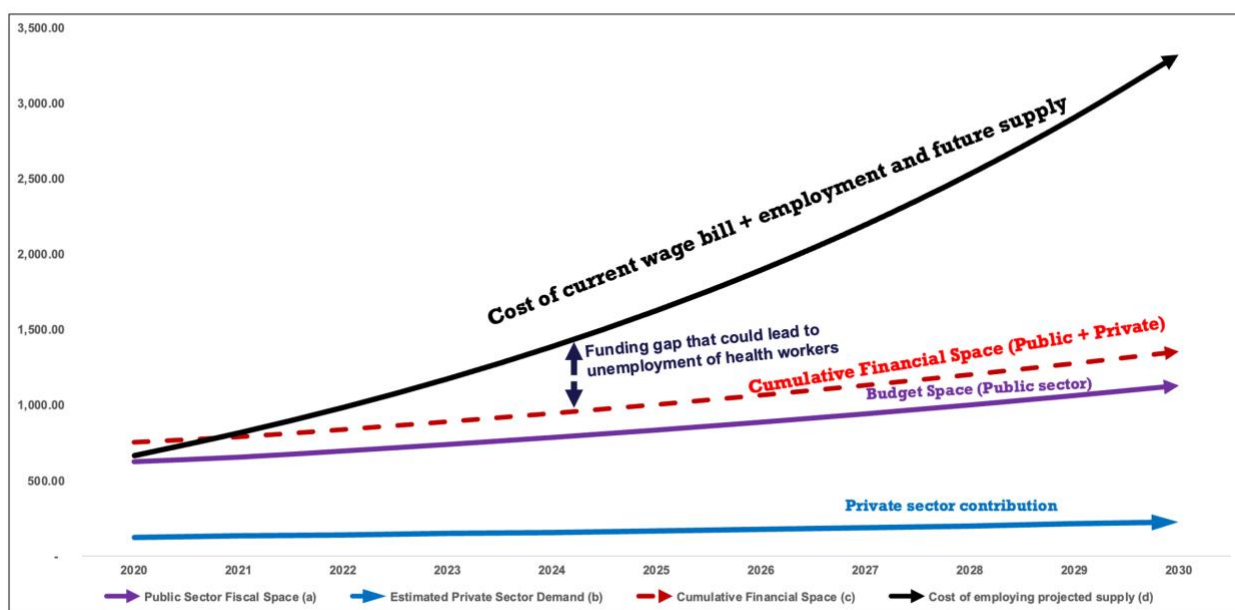


Figure 6. Financial Space Analysis for Health Workforce in Ghana.

Sources: Analysis of data triangulated from MOF, MOH, WHO GHED and IMF using the Asamani model (2021)

Migration Intentions and Migration of Ghanaian Nurses

Migration offers potential for professional development and remittances but weakens health systems in source countries. Source countries may indirectly subsidize the education of destination countries through worker migration.

Many nurses intend to migrate due to push factors such as cost of training, poor quality of care, and burnout. A significant percentage of African nurses in Zimbabwe, Kenya, Ghana, and Eswatini have migration intentions. (Error! Reference source not found.) Approximately 57% of nurses in these African nations intend to migrate.



2022 – In Zimbabwe, 54% of Professional Nurses intend to migrate (60% were working on their plans)



2022 – In Kenya, 67.9% of professional nurses intend to migrate (11.1% were working on their plans)



2023 – In Ghana, 65.6% of professional nurses intend to migrate (~31.7% for GCNM trained specialists)



2023 – In Eswatini, 41% of professional nurses intend to migrate (38% were working on their plan)

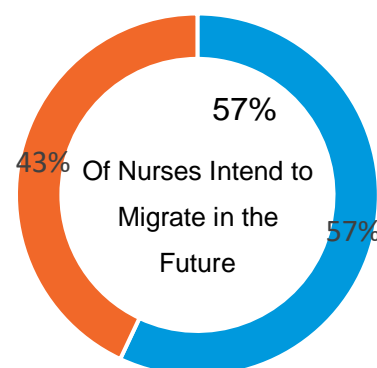


Figure 7. Migration Intentions of Nurses in Africa

Sources: WHO AFRO HLMA Studies (2022, 2023)

Impact of Excessive Migration of Nurses and Midwives

The migration of healthcare professionals, particularly nurses, is a significant concern. Nurses are migrating to countries like the UK, US, and Canada in search of better opportunities and wages. There is a growing need to balance the benefits of migration against its potential negative impact on the source country's healthcare system.

The importance of managing migration through agreements that benefit both source and destination countries is necessary. Guidelines must be developed to ensure fair and equitable migration processes, including engagement of health system stakeholders, proportional benefits, and equal treatment for migrants.

Ministry of Health (MOH) Mandate and Policy Recommendations

Dr. Kwesi Asabir, Director of the MOH's Human Resources for Health Directorate, provided insights into his role as the Director of Human Resources at the MOH. He noted that the MOH is responsible for formulating policies, mobilizing resources, monitoring policy implementation, and maintaining healthcare quality and standards. The MOH mandate was established by an act of parliament in 1996 and aims to ensure that healthcare services are properly implemented and regulated.

In the early 2000s, the healthcare sector faced a shortage of skilled professionals, particularly nurses. To address this issue, the MOH initiated policies to increase the number of healthcare professionals by collaborating with the private sector. This collaboration led to the establishment of several health institutions supported by private funding.

The MOH introduced training programs for nurses, community health workers, and health extension workers to address skill shortages. The goal was to free up highly skilled nurses from routine tasks and allow them to focus on specialized nursing work. Over time, the training landscape evolved to include diploma and degree nursing programs, focusing on improving the skill mix of healthcare professionals.

As of June 2023, there are approximately 189,000 health professionals in the healthcare system, with nurses comprising about 67% of the workforce. Despite the efforts to address workforce shortages, challenges persist. Other professional groups within the healthcare sector are raising concerns about equitable treatment and financial compensation. There are concerns about the potential collapse of the healthcare system if the nursing workforce is not adequately supported.

Recommendations from the MOH

The following recommendations were provided from the MOH.

Bilateral Agreements and International Recruitment

The MOH emphasized the importance of bilateral agreements with other countries to ensure fair treatment and skill-appropriate job placements for healthcare professionals working abroad. The MOH aims to prevent exploitation and ensure that professionals are assigned roles that match their skills. The MOH is collaborating with the Ministry of Employment and Labour Relations to develop a health sector migration policy for the country.

Quality Improvement and Specialization

The MOH focuses on developing specialized skills within the healthcare workforce. The establishment of colleges for post graduate and specialized training is mentioned as a policy direction to provide specialized medical officers, nurses and midwives, pharmacists and allied health practitioners with appropriate skills to handle complex cases.

Resource Allocation and Funding

The MOH faces financial challenges in providing pre-service training and managing migration. The high demand for healthcare professionals in HIC creates a resource drain from low-income countries like Ghana. The need for fair agreements and compensation for the training investment is highlighted.

Human Resource Planning and Export of Skills

The MOH intends to expand training institutions and export healthcare skills to other countries, providing a potential source of revenue and a way to address the global shortage.

Improving Conditions of Nurses

Another factor contributing to the exodus of nurses was inadequate regulation of the nursing sector by the government. Lack of resources to work, poor working conditions, and challenging healthcare environments demotivate health workers and drive nurses and midwives to migrate to seek improved conditions of service.

Improving Opportunities for Additional Training

Beyond retention, participants emphasized the need to attract and cultivate a diverse healthcare workforce. They urged the MOH to invest in opportunities for nurses and midwives to pursue specialist training, citing the alarming loss of skilled professionals to high-income countries (HICs) through active recruitment. This investment, they argued, would not only retain existing talent but also attract diverse healthcare workers from outside Ghana, fostering a richer skillset within the workforce.

Pointing to the GCNM's experience where 18 out of 598 trained associate members emigrated, participants made a direct appeal to Dr. Asabir to prioritize sponsoring specialist nurse and midwife training. This proactive approach, they argued, would not only equip Ghana's healthcare system with the expertise it needs but also establish the country as a magnet for talented professionals seeking advanced training opportunities.

Recommendations

There is an opportunity for Ghana to strategically position itself as a center of excellence in the training of nurses and midwives. This will require the implementation of evidence-based strategies on recruitment and retention of nurses and midwives. The WHO has set 16 specific evidence-based interventions for consideration.¹⁷ These 16 recommendations have been organized into four areas of intervention: education, regulation, financial incentives, and professional and personal support. Discussion among the roundtable participants was organized according to these four areas of intervention.

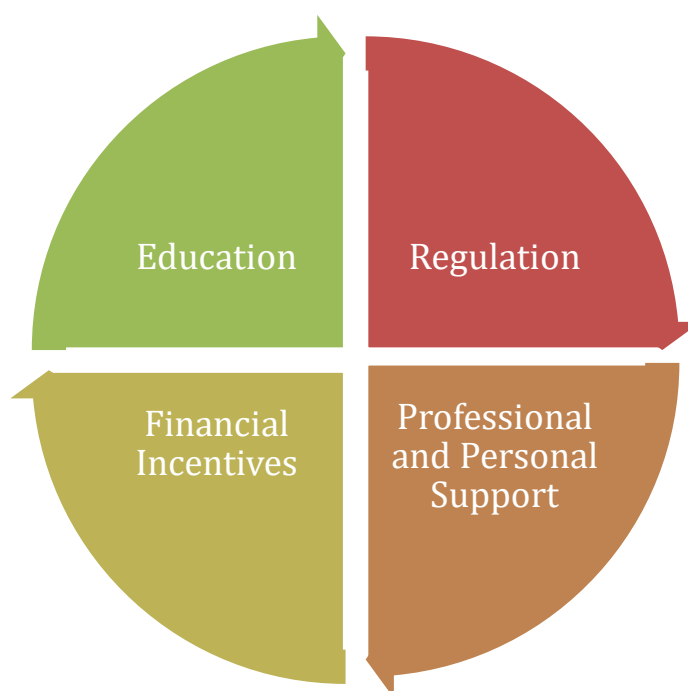


Figure 8. WHO¹⁷ Categories of Interventions to Improve Recruitment and Retention of Health Workers.

1. Education:

Transition to Degree-Level Nursing and Midwifery Education

There is a need to transition from diploma and certificate-level entry points to degree-level education in nursing and midwifery. This transition would align nursing education with international standards and ensure that graduates are well-prepared for their roles.

Investment in Training Infrastructure and Simulation Centers

Challenge: Ghana's nursing and midwifery trainee population is booming, with 29,000 in 2022 and a projected 30,000 in 2023. However, many training schools lack adequate infrastructure and equipment, hindering their ability to offer practical and hands-on training for students.

Solution: Invest in modernizing Ghana's nursing infrastructure. Equip the 133 N&MC-accredited institutions with cutting-edge tools and facilities to deliver high-quality education.

Actionable Step 1: Establish high-fidelity simulation centers featuring realistic mannequins and equipment. This immersive environment allows trainees to hone their skills and gain confidence before entering the real world.

Actionable Step 2: Foster international collaboration. Partner with HICs to secure funding and expertise for simulation labs and advanced training programs. This will equip nurses and midwives with specialized skills and international standards, making them highly valuable assets to Ghana's healthcare system.

Actionable Step 3: Enhance the capabilities and expertise of tutors and lecturers of health of training institutions through continuous training to enable them upgrade their teaching methodologies and deliver high-quality education.

Impact: By prioritizing infrastructure upgrades and innovative training methods, Ghana can transform its nursing and midwifery workforce. This investment will not only ensure job placement for graduates but also elevate the nation's healthcare services, ultimately benefiting all Ghanaians.

Certification Programs for Specialized Nurses and Midwives

The Challenge: Ghana faces a critical nursing and midwifery skills gap, jeopardizing patient care and hindering healthcare advancement. Traditional postgraduate programs often require career breaks, exacerbating the shortage and hindering nurses' and midwives' career progression.

The Solution: On-the-job certification programs offer a transformative approach. By embracing on-the-job certification programs, Ghana can empower its nurses, bridge the skills gap, and

ultimately build a stronger, more responsive healthcare system for all. Nurses acquire specialized skills while remaining active on hospital units, allowing them to:

Bridge the skills gap: Nurses gain in-demand expertise in crucial areas like critical care, cardiovascular disease, gerontology, or mental health, directly addressing the system's needs.

Boost confidence: Mastering new skills empowers nurses, enhances their autonomy, and fosters a sense of accomplishment, contributing to job satisfaction and retention.

Improve health outcomes: Nurses and midwives equipped with specialized knowledge can provide better care, leading to fewer complications, faster recovery times, and overall patient satisfaction.

Actionable Steps:

- Develop flexible, modular certification and advanced practice nursing programs tailored to Ghana's specific healthcare needs.
- Leverage technology for blended learning, combining online modules with on-site clinical practice and mentorship.
- Create financial and logistical support systems to ease nurses and midwives' transition into these programs.
- Foster collaboration between hospitals, training institutions, and professional organizations for program development and accreditation.
- Ensure nurses and midwives receive commensurate promotions and upgrades after training.

2. Regulatory Interventions

It was highlighted that training institutions must adhere to the standards set by the Ghana Tertiary Education Commission and the N&MC, to maintain high-quality education. A call was made during the meeting to assess the compliance of nursing training institutions with the N&MC standards.

Ethical Recruitment Practices for Nurse Migration:

The Challenge: Nurse migration plays a vital role in addressing global healthcare workforce shortages. However, unethical recruitment practices can exploit nurses, jeopardizing their safety and well-being.

The Solution: Promoting ethical recruitment practices ensures fairness and transparency throughout the migration process. This includes:

- **Certification of recruiters:** Certified recruiters adhere to a strict code of conduct, ensuring accurate information, fair treatment, and protection of nurses' rights.
- **Transparency in contracts:** Clear and concise contracts outlining rights, responsibilities, and compensation are essential to prevent misunderstandings and exploitation.
- **Pre-departure support:** Providing comprehensive pre-departure guidance helps nurses and midwives prepare for cultural and professional adjustments, reducing stress and promoting a smooth transition.
- **Post-arrival support:** Ongoing support, including mentorship, networking opportunities, and language assistance, facilitates successful integration into the new healthcare system.

Actionable Steps:

1. Advocate for mandatory certification of all international nurse recruiters.
2. Develop standardized contracts with clear provisions for wages, benefits, and working conditions.
3. Establish pre-departure orientation programs tailored to the specific needs of migrant nurses.
4. Facilitate post-arrival mentorship and support networks to enhance integration and well-being.

Ensuring Fairness and Quality: The Case for a Centralized Licensing Agency for Migration of Health Workers

The Challenge: The current system of nurse migration through bilateral agreements lacks standardization and transparency, leading to inconsistencies, political interference, and potential exploitation.

The Solution: Establishing a central licensing agency, independent of political influence, would provide systematic oversight and ensure fair and ethical migration practices. This agency would:

- **Standardize licensing requirements and processes:** All nurses, regardless of origin or bilateral agreements, would need to meet specific quality standards.
- **Streamline the migration process:** Clear, consistent procedures would reduce bureaucracy and delays, ensuring a smoother transition for nurses.
- **Minimize political influence:** Decisions regarding nurse migration would be based on objective criteria rather than political considerations.
- **Enhance professionalism:** A rigorous licensing process would promote high professional standards and ensure patient safety.
- **Generate sustainable funding:** Licensing fees could be used to support the improvement of infrastructure of training institutions and professional development opportunities for nurses and midwives.

Actionable Steps:

1. Form a committee of stakeholders, including nurses and midwives, policymakers, unions and healthcare professionals to develop a framework for the licensing agency.
2. Establish clear licensing criteria, including language proficiency, skills assessments, and ethical conduct requirements.
3. Implement a robust and transparent application process, including background checks and verification of credentials.
4. Develop a system for ongoing monitoring and evaluation to ensure the effectiveness of the licensing agency.

Developing Nursing- and Midwifery-Specific Migration Policies:

The Challenge: Existing policies fall short of addressing the multifaceted challenges of nurse migration, leading to recruitment difficulties, retention issues, and, ultimately, compromised patient care.

The Solution: A comprehensive national policy specifically focused on nursing and midwifery migration is crucial. This policy should encompass:

Training: Invest in robust training programs to produce a skilled workforce that meets international standards.

Recruitment: Develop ethical and transparent recruitment practices to attract and retain talented nurses.

Retention: Implement policies that address nurses' concerns, including workload management, competitive salaries, and career advancement opportunities.

Reintegration: Support returning nurses and midwives to reintegrate smoothly into the healthcare system when they return to Ghana.

Depoliticizing Healthcare Decision-Making: Ensuring patient-centric healthcare policies requires removing political influences from decision-making processes. A collaborative approach involving all stakeholders, including nurses, policymakers, and healthcare professionals, is essential.

Policy Reforms for Quality Care:

Improving the quality of nursing and midwifery care demands policy reforms addressing:

Overwhelming workload: Implement safe nurse-patient ratios and prioritize efficient workload distribution.

Risk factors: Address workplace hazards and provide adequate safety measures to protect nurses' physical and mental well-being.

Culture of support: Foster a supportive work environment through mentorship programs, peer support networks, and stress management initiatives.

Training and development: Offer continuous learning opportunities to ensure nurses stay updated with the latest advancements.

Bridging the Gap—Data and Practice: While data on nurse-patient ratios exists, concerns remain regarding its practical implementation. Bridging the gap between reported ratios and actual practices is critical to ensure optimal patient care.

Work-Life Balance—A Key to Retention: Achieving a healthy work-life balance for nurses is paramount to combatting burnout and fostering long-term retention. Policies supporting flexible work arrangements, childcare subsidies, and paid leave are essential.

Scope of Practice: Ensure that specialist nurses and midwives can practice within the full extent of their capabilities, regardless of their practice location. This will contribute to fostering job satisfaction

By implementing these comprehensive policy reforms, Ghana can address the challenges of nurse migration and build a robust healthcare system that prioritizes both patient care and the well-being of its dedicated nurses and midwives.

Bilateral Agreements

The role of bilateral agreements in governing nurse migration was identified. Participants discussed the need for agreements that benefit both Ghana and the recipient countries. There is a need for successful bilateral collaborations with other nations, illustrating how Ghana can provide healthcare training expertise to countries in need. Such collaborations can be economically beneficial and enhance Ghana's global standing in healthcare. Ensuring nurses have a strong representation in bilateral collaboration discussions helps communicate sector-specific needs, such as the demand for simulation labs and specialized training programs.

Recommendations for Bilateral Agreements on Nurse Migration

1. **Promote Recognition of Nurses' Experience and Specialization:** Bilateral agreements should ensure that nurses' experience and specialization are recognized and valued, potentially leading to higher remuneration and better career opportunities.
2. **Encourage Investments in Nursing Education and Training:** Receiving countries should invest in training and education within source countries, helping equip nursing schools to meet their standards and prepare graduates for employment. This approach can reduce unemployment in source countries and ensure a steady supply of qualified nurses for receiving countries.
3. **Establish Support Structures for International Nurses:** Address the challenges international nurses face, such as language barriers, cultural differences, and discrimination. Ensure comprehensive support structures are in place, including mentorship, educational sessions, and guidance programs, to help international nurses integrate into the healthcare system of the receiving country.

4. **Foster Collaboration and Networking among Nurses:** Promote continued efforts to encourage international nurses to seek support, involve recruitment agencies in integration, and foster a culture of collaboration and networking among nurses. This can help international nurses overcome challenges and share their experiences with others.
5. **Ensure Equitable Treatment of Migrant Nurses:** Emphasize equitable treatment of migrant nurses, ensuring their safety, protection, and fair labor practices regardless of their union affiliation. This includes providing equal access to training, professional development opportunities, and benefits.

3. Financial Incentives:

Competitive Compensation Structures for Healthcare Professionals:

The participants acknowledged that one of the primary motivations for migration, particularly in the healthcare sector, is the pursuit of better remuneration to improve living conditions, education, and overall quality of life. This emphasis on financial incentives underscores the importance of competitive compensation structures in retaining healthcare professionals within Ghana. Hence, offering competitive salaries and improving working conditions are essential to retaining healthcare professionals, including nurses. Engaging with private healthcare institutions to enhance salaries and working conditions can reduce the attraction of foreign opportunities. Participants noted that improving nurses' income by at least \$3,000 would bridge the retention gap and improve the retention and motivation of nurses and midwives.

Professional Development:

Support for Nursing Specialization and Skill Development:

The critical need to train both generalist and specialist nurses was emphasized, highlighting the current shortage of specialized nurses attributed to a lack of career advancement opportunities and specialized nurse positions. To address this gap, the provision of support for their training is crucial. The MOH was encouraged to continue recruiting and hiring specialized nurses graduating from the GCNM, ensuring a clear career progression path with compensation commensurate with their advanced training. Recognizing and rewarding nurses who pursue specialization will contribute to increased job satisfaction, improved quality of healthcare services, and the potential for Ghana to become a global leader in healthcare through its strong capacity to train specialized nurses. By investing in its nursing workforce, Ghana can leverage this expertise to contribute to economic growth and global leadership in the healthcare sector.

Upgrading Nursing and Midwifery Education

Recognizing the need for top-tier nursing and midwifery education, participants strongly advocated for transitioning all nursing and midwifery institutions to degree level, with a Bachelor's degree becoming the minimum entry requirement for practitioners. This shift towards higher-level qualifications aims to address the evolving healthcare needs of Ghanaians and elevate the overall quality of healthcare services. To facilitate this transition, participants

proposed a concurrent phasing out of diploma and certificate programs, ensuring a smooth progression towards a more qualified and adept nursing workforce.

Mentorship Programs for Nurses and Midwives in Ghana

Building a robust mentorship program for nurses and midwives in Ghana offers a strategic solution to address retention concerns. Connecting nurses with experienced professionals both within Ghana and across the Diaspora fosters career guidance, including navigating international opportunities and facilitating return migration with valuable expertise for the Ghanaian healthcare system. This support fosters a sense of professional belonging and fulfillment, ultimately reducing churn and ensuring a strong, stable workforce. Engaging Ghanaian nurses and midwives in the Diaspora as mentors presents an ideal opportunity to leverage their experience and encourage return migration. Investing in a mentorship program for nurses and midwives in Ghana is not only a strategic investment in the future of the healthcare system, but also a pathway to strengthen the workforce, enhance job satisfaction, and ultimately improve health outcomes for all Ghanaians.

Other Recommendations

Setting Up a Commission Desk for Nurses and Midwives Who Intend to Migrate:

Establishing a dedicated desk or department at the commission level to conduct exit interviews with healthcare professionals who are leaving the country is important. This desk would serve as a bridge between the MOH and nurses and midwives who are considering leaving the country. The proposed desk's primary function would be to gather data on healthcare professionals planning to leave. This data would help the MOH understand the reasons behind their decisions and the challenges they face. It would also enable the MOH to measure the impact of migration on the healthcare sector.

Investment in Healthcare Infrastructure to Enhance Retention:

Enhancing healthcare infrastructure, including modern facilities and well-equipped hospitals, can play a crucial role in retaining nurses and midwives in Ghana. A conducive working environment with access to necessary resources is often a major factor influencing job satisfaction and career decisions for healthcare professionals. By investing in infrastructure upgrades, Ghana can create a more attractive and rewarding environment for its nurses and midwives, encouraging them to stay and contribute their valuable skills to the healthcare system. This includes:

Modernizing facilities: Upgrading existing hospitals and clinics with modern equipment, technology, and amenities can significantly improve the quality of care provided and enhance the work experience for nurses and midwives. This includes providing access to:

Advanced medical equipment: Modern diagnostic tools, treatment technologies, and patient monitoring systems can empower nurses and midwives to deliver better care and improve patient outcomes.

Comfortable and functional workstations: Adequate workspace, ergonomic furniture, and access to technology can help reduce stress and fatigue, leading to improved job satisfaction and productivity.

Safe and clean working environment: Providing a safe and hygienic working environment is essential for the well-being of nurses and midwives. This includes ensuring proper sanitation, ventilation, and infection control measures.

Support facilities: Access to childcare facilities, transportation options, and accommodation can significantly impact nurses' and midwives' work-life balance, influencing their decisions to stay in the profession.

Investing in technology: Implementing digital health technologies, such as electronic health records and telemedicine, can streamline workflows, improve communication, and enhance patient care. This can empower nurses and midwives to be more efficient and effective in their roles, leading to increased job satisfaction.

Managed Migration of Nurses and Midwives Balancing Retention and Global Demand

Despite facing a paradox of nurse and midwife unemployment within Ghana, participants proposed a formalized policy for managed migration to meet the high demand in HICs. This approach, however, demands a nuanced health workforce migration policy tailored to Ghana's specific labor market context. The benefits of managed migration include:

- **Address Global Nurse Shortage:** Contribute to addressing the critical shortage of nurses faced by HICs.

- **Financial Remittances:** Generate valuable foreign currency income through remittances sent back by migrated nurses and midwives, supporting the Ghanaian economy.
- **Skills Transfer:** Enhance the skills and knowledge of Ghanaian nurses through international exposure and experience, ultimately benefiting the domestic healthcare system upon their return.
- **Improved Healthcare Standards:** Foster collaboration and knowledge exchange between Ghanaian and HIC healthcare systems, leading to advancements in quality and standards of care.

The policy components should consider Ghana's unique health labor market context including¹⁸:

- **Production of Nurses:** Optimizing nurse training programs to align with national and international needs, addressing potential overproduction and skill gaps.
- **Inflows and Outflows:** Establishing policies to regulate the movement of nurses, balancing international demand with domestic needs.
- **Maldistribution and Inefficiencies:** Implementing strategies to address the uneven distribution of nurses across the country and improve system efficiency.
- **Private Sector Regulation:** Enacting policies to ensure ethical recruitment practices and fair compensation within the private healthcare sector.

Programmatic and Policy Recommendations:

- **Health Worker Migration Program:** Establishing a dedicated program within the MOH to facilitate and manage the ethical migration of nurses and midwives.
- **Return Migration Incentives:** Implementing policies to encourage the return of migrated nurses and midwives, such as skills recognition, loan forgiveness programs, and career advancement opportunities.
- **Bilateral/Multilateral Agreements:** Negotiating strategic and mutually beneficial agreements with recipient countries to streamline ethical recruitment practices, ensure fair compensation, and contribute to Ghana's healthcare development and economic growth.

Challenges to Consider:

- **Potential Brain Drain:** Unmanaged migration can exacerbate the existing shortage of nurses within Ghana, impacting the quality of healthcare services.

- **Ethical Recruitment Concerns:** Unethical recruitment practices and exploitation of nurses in HICs must be addressed through robust regulations and ethical agreements.
- **Reintegration Challenges:** Returning nurses may face challenges reintegrating into the Ghanaian healthcare system due to skill mismatch, lack of recognition, or career advancement opportunities.

Moving Forward:

Implementing a carefully designed managed migration program for nurses and midwives can offer substantial benefits for both Ghana and recipient HICs. By addressing potential challenges and implementing accompanying policies, Ghana can ensure the ethical and sustainable movement of nurses, contributing to the global healthcare workforce while strengthening its own healthcare system.

Conclusion

This report underscores the critical role of political and policy support in enhancing the nursing workforce in Ghana and highlights the need for comprehensive policy reforms that prioritize the healthcare workforce. It serves as a call to action for policymakers and stakeholders in Ghana's healthcare sector to strengthen Ghana's healthcare system, improve patient care, and retain skilled healthcare professionals. This report encourages a collective effort to address these disparities and calls on destination countries to recognize and value the skills and experiences that migrant nurses bring with them. It also highlights the role of unions in advocating for nurses and midwives' rights and interests in bilateral agreements and lays out multiple recommendations for Ghana to ensure that migrant nurses receive the treatment and benefits they rightfully deserve irrespective of their location.



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APPENDIX

Acknowledgements

We would like to thank the Nursing and Midwifery Council of Ghana for allowing us to host the roundtable on their premises. We also want to thank the Executive Team of G-DNA for contributing to the planning of the roundtable. We would like to acknowledge Eugene Davis who served as the reporter for this roundtable.

Biographies (in alphabetical order)

Hannah Akua Oparebea Acquah, MPhil, RN, Rector, Ghana College of Nurses and Midwives (GCNM)



Hannah Akua Oparebea Acquah (Ms) is currently the Rector of the Ghana College of Nurses and Midwives. Presently, a PhD Candidate in Health Policy and Management at the University of Ghana Business School, Legon, she studied MPhil Nursing in 2008 at the School of Nursing and Midwifery, College of Health Sciences, University of Ghana, Legon; Leadership in 2013 at the Global Nursing Leadership Institute (GNLI) at Geneva, Switzerland. Hannah is a Nurse and a Midwife, as well as an educationist. She is a Fellow of the West African College of Nursing and an executive member; Fellow of Ghana College of Nurses and Midwives and a Member of Sigma Theta Tau International, Lambda Chapter, and a Member of GNLI. She is

secretary to the Governing Council and Academic Board of the Ghana College of Nurses and Midwives. In her 37 years of service to Ghana, she practiced as a competent and dedicated nurse-midwife in Ho and Korle-Bu Teaching Hospitals. She is a member of the Advisory Council of the Ghanaian-Diaspora Nursing Alliance(G-DNA).

Evelyn Amoako, BSN, RN, MPH, Ghana Liaison, Ghanaian-Diaspora Nursing Alliance



Evelyn Amoako BSN, RN, MPH, is a Deputy Director of Nursing Services at the St. Dominic Hospital, Akwatia, where she manages over three hundred nurses comprising different cadres. She has over thirteen years' experience of practicing nursing, mostly in the districts and rural areas in Ghana. She holds a BSc Nursing Degree from the University of Ghana and a Master of Public Health from KIT Royal Tropical Institute and the Vrije Universiteit, Amsterdam specializing in Health Systems' Policy and Management. Evelyn is a Preceptor for the MSc Advanced Nursing Practice Programme for the University of Cape Coast as well as other student nurses. In this role, she mentors MSc student nurses on clinical rotation, facilitates and supports them to acquire new clinical competencies and achieve clinical objectives. She is a licensed SafeCare Quality Improvement

Facilitator who supports healthcare facilities in resource-limited settings to improve their quality through capacity building, mentoring, innovation and use of context-specific solutions. She also serves as a co-chief editor for St. Dominic Today, a quarterly news bulletin from the St. Dominic Hospital. In 2017, Evelyn was awarded the Mandela Washington Fellowship under the US Government's Young African Leadership Programme. Evelyn is also a 2022 International Ambassador for the American Association of Nurse Practitioners. She has interests in nursing education, HIV, cervical cancer prevention and stigma-related issues. She hopes to pursue her PhD and teach at the University.

Cecilia Akrisie Anim, CBE FRSA FRCN, Former President, Royal College of Nursing(RCN), UK



Dr. Anim's journey began in Ghana where she trained as a midwife in 1968. In 1977, she moved to the UK and qualified as a nurse, embarking on a remarkable career dedicated to advancing the profession. For over 40 years, she served as a passionate member of the Royal College of Nursing (RCN), holding key positions and advocating for nursing excellence. Her achievements include serving as RCN President from 2014 to 2018, tirelessly supporting members, and playing a pivotal role in promoting the arts and sciences of nursing. As a clinical nurse specialist in sexual and reproductive health, Dr. Anim specializes in family planning and women's health, with a special focus on menopause. Her expertise and dedication have been recognized through numerous awards, including the RCN Certificate of Merit, the CBE, and the British Journal of Nursing's lifetime achievement award. Beyond her nursing

career, Dr. Anim is a dedicated member of her community. She serves as a school governor, church member, and lay reader, demonstrating her commitment to giving back. This dedication was acknowledged by her receiving the Chair's Special Award for the Windrush Generation.

Kwesi Asabir, PhD, Director of the Human Resources for Health Directorate, Ministry of Health, Ghana



Dr. Kwesi Asabir is the Director of the Human Resource for Health Directorate of the Ministry of Health.

He has currently led the development of the National Human Resource for Health Policy and Strategies document for the Health Sector. He had a Master of Science in Human Resource Development (2004-2005) and a Doctor of Philosophy, Development Policy and Management (2005 to 2008) at the University of Manchester, United Kingdom. He is married to Mrs. Christiana Asabir, blessed with four (4) children and 21 adopted children.

James Avoka Asamani, PhD, M.Phil, Team Lead, Health Workforce, World Health Organization, Africa Region



Prof. James Avoka Asamani is the Health Workforce Team Leader for the WHO in the African Region, where he coordinates technical support to 47 governments of countries. His work has informed transformative policies and investment decisions in several countries, collectively stimulating more than \$150 million in health workforce investments. He is a Ghanaian registered nurse, a health economist and health systems scientist with expertise in the health workforce, health planning and policy, health financing, health systems modelling, and healthcare management. He has more than 55 peer-reviewed publications and book chapters. He was the WHO Technical Advisor on Human Resources Health Systems

and was Health Economics Advisor in the WHO Ghana Office. He was also a Health Workforce Planner at the Ghana Health Service until 2018. He is a Commonwealth Scholar with a PhD in Health Sciences specializing in health modelling and workforce planning from the North-West University in South Africa. He also has an M.Phil. degree in Nursing, specialising in Healthcare Management and Human Resources for Health, from the University of Ghana and an M.Sc. with distinction in Health Economics and Health Policy from the University of Birmingham, UK.

Naana Akyaa Asante, RN, BNS, Board Chair, Nursing & Midwifery Council of Ghana



Naana Akyaa Asante, RN, BNS is currently the board chairperson of the Nursing and Midwifery Council of Ghana (NMC) and a former Board Member of the Komfo Anokye Teaching Hospital. She is the founder and CEO of Isabella HealthCare Services, a medical supply and services company based in Accra, Ghana. She is a Registered Nurse with over 27 years of clinical experience in Women and Children's health from several hospitals in New York, USA, including New York-Presbyterian Weill Cornell, Columbia Presbyterian, Good Samaritan, Vassar and Albert Einstein Hospitals. She received a Bachelor of Nursing Degree from Howard University, Washington DC. In 2021, she co-authored "Nurses and midwives' perspectives on the

participation in national policy development, review and reforms in Ghana. Ms. Asante is among the 2023 Vital Voices Grow Fellowship, a leading global accelerator program for women. She participated in Growth Africa in 2020 and was among the 2018 Cohort of Women Entrepreneurship & Leadership for Africa (WELA) offered at the China Europe International Business School. A breast cancer survivor, Ms. Asante is the founder of Embrace Society, an organization which seeks to raise awareness through the "Embrace Your Breast Campaign" emphasizing the importance of early detection to save lives. This organization provides support through patient navigators who help patients navigate the complex health care system, offering financial aid, counseling and referrals to community resources. She is a member of the Advisory Council of the Ghanaian-Diaspora Nursing Alliance (G-DNA).

Lydia Aziato, PhD, MPhil, RN, the Vice Chancellor of the University of Health and Allied Sciences (UHAS)



Prof. Lydia Aziato is the Vice Chancellor of the University of Health and Allied Sciences (UHAS) in Ho. She is the first Nurse in Ghana and West Africa to be appointed Vice-Chancellor and second in Africa. Prof. Lydia Aziato was the first substantive Dean of School of Nursing and Midwifery, University of Ghana. She has been a nurse for more than 20 years with a specialty in Oncology Nursing. She graduated with a PhD in Nursing from the University from Western Cape, South Africa in 2013. She holds both local and international positions in nursing organizations such as Sigma Theta Tau International. She serves on several boards and committees. She is the first nurse to be a fellow of the Africa Science Leadership Programme and was the first

faculty chairperson for the Oncology nursing specialist programme in Ghana". As of October 2022, Prof. Lydia Aziato had published over eighty (80) peer-reviewed journal articles, four (4) edited books, two (2) co-authored books, and four (4) book chapters with citations of her works exceeding nine hundred (900). Her research developed clinical guidelines for post-operative pain management and the Colour-Circle Pain Scale. She received numerous awards for her passion in research and teaching established of Research Mentorship Alliance (RMA), an NGO focused on training and mentoring nurses and midwives in research. . She is a member of the Advisory Council of the Ghanaian-Diaspora Nursing Alliance(G-DNA).

Neil Barklem, Founder and CEO of Future Perfect International Group Ltd (UK.)



Founded in February 2020, Future Perfect International Group Ltd – trading as "Future Perfect Health" is a non-profit, social enterprise UK Company Limited by Guarantee. In its short history the company has primarily been active in delivery of core language and vocational skills programmes for overseas healthcare professionals, notably: Occupational English Test (OET) and IELTS English Language Test preparation courses and has been a listed and accredited OET Preparation Provider since 2020. Future Perfect Health also provides OSCE Part 2 preparation programmes and has completed University of Northampton NMC OSCE Part 2 Train the Trainers NHS Programme. Company founder Neil Barklem holds a Postgraduate Dip TEFLA English Language qualification from

International House (UK), as well as an MBA from Babson College USA. In 2021, Future Perfect Health completed an Action Research Study in Ghana on OET Skills Programmes. The company has achieved renown for co-ordination of the delivering the first independent OET Test Centre in West Africa by the launch of the Accra Campus OET Test Centre in Haatsu, North Legon in October 2022 and is registered as an ethical recruitment provider by the UK DHSC. The company has a network of active strategic partners in Ghana, the Caribbean and north America.

James M. Buchan, PhD, DPM, MA (hons), Senior Health Fellow, Health Foundation; Consultant, International Council of Nurses (ICN)



Professor James M. Buchan is a Senior Fellow at the Health Foundation, London, and Adjunct Professor at the WHO Collaborating Centre for Nursing, University of Technology, Sydney, Australia (UTS). He has specialized in nursing workforce policy throughout his career. His background includes periods working in government agencies in Scotland and Australia; and for the Royal College of Nursing, (RCN), UK. He has also been employed by WHO in Geneva, and Copenhagen. In recent years he has worked extensively as a consultant on nursing workforce policy and planning, in Europe, Asia and the Pacific, for governments and international agencies. He is a Trustee of the Florence Nightingale Foundation.

Howard Catton, RN, BSC, MA, CEO, International Council of Nurses



Mr. Howard Catton was appointed the Chief Executive Officer of the International Council of Nurses (ICN) in February 2019. He is committed to ensure that ICN effectively represents nursing worldwide, advances the nursing profession, promotes the well-being of nurses and advocates for health in all policies. He firmly believes that nurses should be at the heart of health policy decision-making and leading healthcare systems and delivery. Throughout his career Howard has worked and written extensively on issues relating to the nursing and healthcare workforce and he co-chaired the first ever State of the World's Nursing Report. He has led ICN's work to respond to and support nurses globally during the pandemic and has been at the forefront of advocating for the protection of and investment in the nursing profession. Howard joined ICN in April 2016 as the Director, Nursing, Policy and Programmes. His team led the development of ICN policy and position statements, working closely with WHO and other International Organisations to provide nursing advice on global health challenges and input into formal WHO and UN decision making meetings and processes. He also co-ordinated ICN Programmes and projects including Leadership development and worked closely with other Non-Government Health Organisations, civil society and private sector organisations. Howard also oversaw the development of scientific programmes for ICN events including its world congresses, held every two years. In December 2019 the Royal College of Surgeons in Ireland appointed Howard as Fellow of the Faculty of Nursing and Midwifery. This Fellowship without examination is granted in exceptional circumstances to nurses who have rendered outstanding service to the profession.

Yvonne Commodore-Mensah, PhD, MHS, RN, President and Co-Founder, Ghanaian-Diaspora Nursing Alliance, Associate Professor, Johns Hopkins School of Nursing



Dr. Commodore-Mensah is the President and Co-founder of the Ghanaian-Diaspora Nursing Alliance. She is an Associate Professor at the Johns Hopkins School of Nursing and the Department of Epidemiology at the Johns Hopkins Bloomberg School of Public Health. She is also faculty at the Johns Hopkins Center for Health Equity. As a nurse scientist and cardiovascular disease epidemiologist, her program of research seeks to advance cardiovascular health equity among African-descent populations locally (United States) and globally (sub-Saharan Africa) through epidemiological and community-engaged methods. She is the Principal Investigator of the LINKED-BP Program and co-PI of the LINKED-HEARTS Program, two cluster-randomized controlled trials, which are testing the implementation of multi-level interventions to improve hypertension control and the management of chronic conditions in community health centers. She was co-PI of the Addressing Hypertension CaRe in Africa (ADHINCRA) Study, a cluster-randomized controlled trial testing the effectiveness of a nurse-led, mobile health intervention to improve hypertension control in Ghana, using an implementation science approach. Dr. Commodore-Mensah is a member of the Steering Committee of the National Hypertension Control Roundtable and serves on the Advisory Boards of the National Hypertension Control Initiative and Target: BP. She is a Board member for the American Heart Association Baltimore and Greater Maryland area.

Kaley Cook, MHS, Program Manager at Commission on Graduates of Foreign Nursing Schools (CGFNS)



Kaley Cook is the Program Manager for the Alliance for Ethical International Recruitment Practices. She works with recruitment firms that are committed to ethical practices and participates in research on issues faced by immigrant nurses, as well as migratory trends in healthcare. As a previous CGFNS credentials analyst, Kaley worked to develop new credentialing training and provided guidance to nurses seeking to work in the US.

Kaley completed a Bachelor of Arts in International Studies from the University of Nebraska-Lincoln in 2014 and was awarded a Fulbright teaching assistantship in Holešov, Czech Republic from 2014-2015. She completed a Master of Science in International and Cultural Encounters at Roskilde University in Denmark in 2018.

Matilda Decker, DNP, APRN, FNP-C, Vice-President & Co-founder, G-DNA



Matilda Decker, DNP, APRN, FNP-C, is a board-certified Family Nurse Practitioner in Maryland and Delaware. She earned her Bachelor of Science in Nursing from Towson University and a Master of Science in Nursing from Walden University. Dr. Decker received her Doctor of Nursing Practice and Nurse Educator Certification from the Johns Hopkins School of Nursing. She is a member of the Sigma Theta Tau International Honor Society (inducted), American Nurses Association, American Association of Nurse Practitioners, and Delaware Nurses Association.

Dr. Decker is a clinical faculty at the Johns Hopkins School of Nursing. She also has an independent practice in Dover, Delaware, specializing in occupational health and DOT exams. Dr. Decker is passionate about addressing health disparities and finding solutions to improve health outcomes in underserved populations.

Eva Mensah, Mphil, RN, Director of Nursing And Midwifery Service, Ghana Health Service(GHS)



A product of the School of Nursing and Midwifery, University of Ghana Legon, Mrs Mensah holds a Bachelor of Arts degree in Nursing with Psychology, an Mphil in Nursing and a certificate in Health Administration and Management from GIMPA. She is also a fellow of the Ghana College for Nurses and Midwives and the West African College of Nursing. Mrs Mensah worked at the Korle Bu Teaching Hospital in various departments but worked extensively in Trauma Intensive Care Nursing and Administrative nursing at the Nursing Directorate. She joined the Ministry of Health and Ghana Health Service in 2012 serving under the then Director for Nursing and Midwifery. During this period, she engaged in policy development, strategic networks, monitoring and evaluation. She holds numerous positions both locally and internationally, including Council Member of the West African College of Nursing, Board member of the 37 Military Hospital Nursing and Midwifery Training College (NMTC), National Programme Coordinator for the USAID /GHS G to G Implementation of Supportive Supervision and other quality innovations in the Health Service, Health Care Quality Specialist, member of the Clinical Governance Committee of the Ghana Health Service Council, among others. Mrs Mensah believes that the Nursing and Midwifery walk should be strategic and grounded on fundamental foundational pillars which will stand the test of time. Building a structure on a poor foundation leads to the formation of cracks and the overall collapse of the structure.

Martha Nugent, RGN, BSC, President, Ghana Nurses Association, UK



Mrs. Martha Nugent is a retired Specialist Cancer and Palliative Care Nurse, born and educated in Ghana. She started her nursing journey in 1976 at the Korle Bu Nurses and Midwifery Training College. She became a Staff Nurse in 1979 and a Midwife in 1981. She worked in the Children's Orthopaedic Ward and Neonatal Intensive Care at the Korle Bu Teaching Hospital until 1984. In April 1984, she migrated from Ghana to the United Kingdom to join her husband. When she arrived in the UK, she completed the then "adaptation course" and worked at the Kings College Endoscopy unit for 15 months. In 1987 she moved on to work at Greenwich District Hospital in a Care of the Elderly Ward as a Registered Nurse. She was subsequently promoted to Ward Sister and then a Ward Manager in 1996 after completing her Diploma in Higher Education. Shortly after, she became a Practice Development Nurse for Elderly Care and Stroke. In 1998 she embarked on a degree course in Specialist Practice as an Associate Student and completed the program in 2002. She worked as a Community Specialist Cancer and Palliative Care Nurse until she retired in 2019. Mrs. Nugent is the current Chairperson of the Ghana Nurses Association, UK (GNA UK). Under her leadership, GNA UK has been awarded 'The Most Engaged International Nurses Association in the UK' in 2023 by NHS England, The Chief Nurse, and the Florence Nightingale Foundation. She is coordinating a project funded by Florence Nightingale Foundation for Pastoral Care to support Internationally Educated Nurses and Midwives from Ghana.

Perpetual Ofori Ampofo, MPH, RN, President, Ghana Registered Nurses and Midwives Association (GRNMA)



Mrs. Perpetual Ofori-Ampofo is the President of GRNMA and has over fifteen years experience in Trade Unionism. She is the current Chairperson of the West African Health Sector Unions Network (WAHSUN) of Public Services International (PSI) and the Chairperson of the Ghana PSI National Coordinating Council. She is a Nurse Educator and has over twenty years' of experience in the health sector of Ghana as a nurse. She has taught and influenced many young Ghanaians to become nurses and midwives.

Since becoming the President of the GRNMA, she has changed the face of nursing and midwifery in Ghana. She holds a Master of Public Health and a Bachelor of Arts

degree in Nursing with Psychology from the University of Ghana, Legon and a Post Graduate Diploma in Education from the University of Cape Coast. She is also a certified Pension's Trustee licensed by the National Pensions Regulatory Authority of Ghana and sits as a Member Secretary of the Board of Trustees of the Health Sector Occupational Pension Scheme. She is a Foundation Fellow of the Ghana College of Nurses and Midwives and a Fellow of the West African College of Nurses and Midwives. She is also a member of Sigma Theta Tau International Honor Society of Nursing. She has received a couple of awards in recognition of her dedication to the strengthening of Trade Unions and her passion and commitment in addressing issues of Social Protection, Migration and adolescent sexual and reproductive health.

Nancy Reynolds, PhD, RN, Associate Dean of Global Affairs, Johns Hopkins School of Nursing, Professor, Johns Hopkins School of Nursing



Dr. Nancy R. Reynolds is the associate dean of global affairs at the Johns Hopkins University School of Nursing; director, Center for Global Initiatives; co-director, WHO Collaborating Centre for Nursing Information, Knowledge Management; and co-Secretary General, Global Network of the WHO Collaborating Centers of Nursing and Midwifery. She is a researcher in the field of chronic illness self-management (especially HIV) with over 20 years of continuous funding from the National Institutes of Health (NIH). She has extensive research experience as PI of multidisciplinary teams and as an investigator with the AIDS Clinical Trials Group and the Center for Interdisciplinary Research on AIDS

at Yale University. In Ghana and India, Dr. Reynolds has implemented programs to improve medication adherence and mental health outcomes of women and children living with the disease. She is a fellow of the American Academy of Nursing and the recipient of numerous research awards, including induction into the Sigma Theta Tau International Researcher Hall of Fame.

Philomena Woolley, MPhil, BSc. RN, Acting Registrar, Nursing and Midwifery Council of Ghana



Ms. Woolley is a Ghanaian healthcare professional with 30 years of experience in nursing and administration. She holds an MPhil in Nursing and various other qualifications, including certificates in qualitative research and cyber security. As Acting Registrar, she provides leadership for the Nursing and Midwifery Council and has been instrumental in implementing online licensing exams and developing policy documents. Ms. Woolley is actively involved in various professional organizations and has presented at numerous workshops. She is a Fellow of both the Ghana College of Nurses and Midwives and the West African Postgraduate College for Nurses and Midwives, and a member of Sigma Theta Tau International.

Barnabas Yeboah, PhD, RN, Head for Nursing and Midwifery at the Ministry of Health, Ghana



Dr. Yeboah is currently the Director of Nursing and Midwifery at the Ministry of Health in Ghana, overseeing policy, planning, and management of all nursing and midwifery systems. He holds a PhD in Public Health, two Master's degrees in Health Services planning and management, and an MBA in management. With over 22 years of experience in government health, Christian Health institutions, and private institutions, Dr. Yeboah has expertise in public health, clinical practice, healthcare administration, training and development of health workers, patient safety, community health coordination, and maternal and child health & nutrition. He has built and maintained relationships with healthcare institutions and policymakers across Ghana. Dr. Yeboah has a strong track

record in policy development, having been involved with the National Health Policy, Nursing and Midwifery Strategic Plan, and the contextualization of SDGs for health in Ghana. He also serves as a program coordinator and focal person for various health projects and committees. He has participated in several national policy dialogues and workshops, sharing his expertise and insights.