Sociocultural Integration of Filipino migrant nurses: Findings from the Triple Win Project (TWP) Implementation

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Abstract

Health work migration and the issues that surround it such as the global shortage of nurses have initiated policy formulation and research among and between countries. In fact, this has also paved way for global public policies such as the Global Compact for Safe, Orderly, and Regular Migration (GCM) to highlight the importance of international cooperation on the governance of international migration. Given that some countries demand for health professionals such as doctors and nurses, bilateral labor agreements (BLAs) between countries with oversupply and undersupply of workers emerged. This study focused on how health work migration as a response to a global challenge transcends to the individual through integration. Recognizing the need to assess and better understand how one of the major key players in migration adapt to the destination country, this study aimed to determine and assess the sociocultural integration of the Filipino migrant nurses in Germany hired through the Triple Win Project (TWP), a BLA on the recruitment of qualified nurses between the Philippines and Germany. Using the human and social capital theories, this paper explored the importance of five indicators (language proficiency, social contacts with native population, circle of friends, participation to organizations, and ethnic identification) to the nurses' sociocultural integration. This study employed qualitative research where the focus is mostly about the perspectives and experiences of Filipino nurses with regard to their integration. To gather primary data, a semi-structured interview was conducted with 10 Filipino nurses who were part of the pioneer batch and those who have been living in Germany for a minimum of two years. Interviews with the TWP implementing agencies were also conducted to determine the integration policies they are conducting. Secondary data were also obtained to conceptualize the TWP processes and their statistics relevant to the study. Results show that although the indicators affect their integration, the degree of the nurses' sociocultural integration varied due to some other external factors like their interests and experience. The integration policies and activities conducted by the TWP are also perceived helpful by the nurses but can still be improved. Some of these are the inconsistent integration plan and not uniform recognition processes of the nurses which they think posts a significant impact of their integration. To improve the nurses' sociocultural integration, the study recommends a more structured, comprehensive, and coordinated integration plan for the nurses hired through the TWP.

Keywords

sociocultural integration, migration, Filipino nurses, triple win project, health worker migration

1. INTRODUCTION

1.1. Background of the Study

The migration of health workers across the globe has become a trend due to several push-and-pull factors, such as economic and social inequalities among countries. Since the global shortage of nurses, the migration of nurses to developed nations has emerged. During the 1970s, 6% of physicians and 5% of nurses were employed abroad (Angenendt et al., 2015). Subsequently, Kingma (2007: 1281) studied that "the number of international migrants has doubled since 1970 and nurses are increasingly part of the migratory stream."

In 2010, the World Health Organization (WHO) adopted the Global Code of Practice on the International Recruitment of Health Personnel, where the migration of health workers benefits the health systems of both the origin and destination countries. Given the shortage of nurses in some countries like Germany, various recruitment migration programs were launched.

The Philippines is historically known to produce health workers for export. The Philippine Overseas Employment Agency (POEA) (2016) reported that 92,277 nurses (an average of about 19,000 annually) went abroad for work from 2012 to 2016. The Philippines has also been shaped into an 'empire of care' since the onset of health workers' migration. According to Ong and Azores (1994), the Philippines has the largest outflow of nurses not only in the U.S., but across the world, having at least 25,000 Filipino nurses migrate to the U.S. from 1966 to 1985. Choy (2003) argued that this phenomenon occurred because of the U.S colonialism in the Philippines and the motivation of Filipino nurses to migrate abroad due to economic, social, and cultural factors. The Philippines became the leading exporter of nurses abroad, deploying nurses to more than 50 countries (Guevarra, 2010 & Yeates, 2009). The Philippines has also entered bilateral labor agreements (BLAs) with other nations concerning the recruitment of medical professionals from the Philippines (Dussault et al., 2009).

Germany is one of the many other Organization for Economic Cooperation and Development (OECD) countries that is experiencing a shortage of healthcare professionals. In 2012, a total of 29,037 vacancies were reported in Germany (Bundesagentur für Arbeit (BA) or Federal Employment Agency, 2013; Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH [GIZ], 2013). According to Angenendt et al. (2015), an additional 150,000 to 180,000 skilled nurses in the country are needed by 2025 due to the possible doubling of the old-age dependency ratio by 2060.

To address the above-mentioned situations, a BLA was agreed upon by the Philippines and Germany. The Triple Win Project (TWP) is a government-to-government (GTG) agreement between Germany and the Philippines, Serbia, Bosnia-Herzegovina, and Tunisia. Since the program's launching in 2013, the TWP, as a sustainable migration of qualified nurses, has been facilitated by the German authorities, namely, Zentrale Auslaunds- und Fachvermittlung (ZAV) or International Placement Services and the GIZ. While in the Philippines, the POEA is the primary agency in-charge of the implementation and recruitment of Filipino nurses through the TWP.

Migration has attained a remarkable spot under the 2030 Sustainable Development Goals to "leave no one behind". Although integration is still being debated upon by literature and studies, the Migration Data Portal (2020) revealed an increasing rate of researcher interest in immigration, thus, better data collection and organization is recommended. The inclusion of integration in the global agenda explains the need for a two-way adaptation process by the migrants and the host country (International Labour Organization [IOM], 2019). More focused and well-defined data on integration can better contain the migrants' economic, social, cultural, and political compasses.

1.2. Health Worker Migration

Over the last decade, migrant doctors and nurses in OECD countries increased by 60% (WHO, 2017). Stewart et al. (2007) elaborated that health worker migration resulted from both supply-push (bad working conditions and low salaries) and demand-pull factors (better opportunities). The migration of health professionals across the globe seeking better salaries and working conditions is a familiar phenomenon. Most of the health professionals from outside of OECD have migrated to developed countries in Europe, North America, and Australasia. The OECD (n.d.) recorded that among the over 900,000 nurses in Germany in

2018, 8% are immigrants. Buchan et al. (2019) also reported that the average dependency levels on foreign-trained doctors and nurses across OECD countries were 17% and 6%, respectively.

Although health worker migration introduces benefits to both origin and host countries, the effects and impacts also vary; hence, some challenges may follow. The reliance of destination countries on foreign-trained highly skilled workers is unsustainable since the possibility of returning to their home countries may happen. The facilitation of training (language and professional) also costs the host country. The origin country may also be affected by worsening the health workforce distribution and affect the healthcare sector in general (International Labour Organization [ILO], 2019).

1.3. Triple Win Project

On 13 June 2013, a BLA involving the placement of Filipino health professionals in Germany was signed by the German and Philippine authorities. The legal basis for the TWP implementation is supported by Section 14 of Republic Act 10022 or the amended Migrant Workers and Overseas Filipinos Act in the Philippines and §18 Residence Act in Germany. The recruitment process is organized and formalized to guarantee that both governments adhere to the approved procedures and to minimize irregular recruitment or migration from private recruitment agencies (OECD, 2007).

The TWP structure operates with the GIZ and ZAV are responsible on the German side for spearheading the management, coordination, placement processes, and integration assistance towards the nurses while the GIZ office in the Philippines and POEA are responsible for preparing the qualified nurses with a pre-departure orientation seminar (PDOS). Accordingly, the TWP intends to provide the following benefits (GIZ, 2019):

- The recruitment of nurses from the Philippines aims for a long-term knowledge transfer to foster development and improvement from the destination country. The overcapacity of nurses in the Philippines can be relieved through the TWP.
- The health facilities in Germany are provided with skilled and qualified nurses to address the shortage of nurses.
- Individuals (Filipino nurses) are given employment opportunities along with career and personal development.

The four phases of TWP are (1) employer consultation; (2) placement of qualified nurses; (3) pre-arrival preparation; and (4) after/upon arrival. Figure 1 illustrates the necessary steps in the implementation of the TWP.



Figure 1. Triple Win Project Process (GIZ, 2019)

The processes administered in the Philippines include interviews (from TWP team and employer), a 6-month mandatory language course from A1 to B1 (Manila, Cebu, or Baguio), professional orientation (by GIZ), a medical examination, contract signing (at POEA office), visa preparation (at GIZ office), PDOS, and pre-flight briefing (at Overseas Workers Welfare Administration [OWWA] and POEA offices). The entire application process normally takes up to fourteen (14) months (GIZ, 2019).

According to GIZ (2020), 3,771 nurses from Bosnia and Herzegovina, the Philippines, Serbia, and Tunisia are employed at a German health facility as of March 2020. Of these, 1,381 are still in their origin country undergoing the preparation process, such as studying the German language as a pre-requisite to deployment in Germany. Out of over 3,000 nurses deployed in Germany, 2,258 are Filipino nurses and about 1,100 are still in the Philippines (POEA and GIZ, 2020).

Aside from addressing the shortage and reducing unemployment of nurses from the origin countries through a fair and coordinated recruitment process, the TWP also guarantees an integration process through professional and linguistic preparation and testing, as well as the support of integration in Germany. Such integration policy is an initiative towards successful immigration. This is important to the immigrants especially in terms of social and cultural aspects as their foundations of values and how their networks in a new environment function and interact. Integration, as an important aspect of migration, incorporates "the social, economic, cultural, and political life of the receiving community" to the migrants (IOM, 2019: 104). Assessing integration is essential to ensure that plans and processes are specifically targeting the influences, determinants, and other factors that affect their overall integration.

This study assessed the effects of the integration policies and activities of the TWP to the Filipino migrant nurses in their sociocultural integration. Specifically, it (i) identified the present integration policies implemented by the TWP; (ii) determined how the TWP facilitated the sociocultural integration of the Filipino migrant nurses in Germany; (iii) analyzed the level of sociocultural integration of Filipino migrant nurses in the German society; and (iv) identified the challenges faced by the nurses in terms of integration.

2. Theoretical Underpinning

2.1. Sociocultural Integration

Migration integration theories have emerged from different migration literature and studies. According to Van Tubergen (2006), four general immigrant integration theories are used to explain the social, cultural, and economic integration of immigrants in a host country. The following theories are: 1) human capital theory; (2) structural opportunity theory; (3) prejudice theory; and (4) social capital theory.

In consideration of the research aims of this study, structural, social, and cultural integrations will be characterized. Structural opportunity theory explains the differences in

immigrants' sociocultural and economic integration (Van Tubergen, 2006). Structural integration refers to "the incorporation of immigrants into the core institutes of the host society, such as the labor market or the educational system" (Wachter & Fleischmann, 2018: 156; Heckmann, 2006). Social integration pertains to the degree to which immigrants interact with the native population and participate in the country's social life (Martinovic et al., 2009). Cultural integration focuses on the acquisition of core elements of the destination society's culture such as their language (Heckmann, 2006). Van Tubergen (2006) revealed that when the structural opportunity theory was used, cultural integration among immigrants was generated due to more social interaction with natives.

Becker's (1964) human capital theory is applied in this study. Thus, social resources are identified to be useful in developing human capital. Human capital arises when a person acquires new skills that enable them to be integrated. Such refers to skills, qualifications, experiences, and cultural characteristics (Van Tubergen, 2006; Magnusson, 2013). Schultz (1961) and Sjaastad (1962) identified migration as an investment decision, arguing that what people consume is an investment in human capital, such as our educational, health, and domestic migration to access better employment. Cebula (1978) supported this argument by elaborating that this is due to expected real income benefits, expected amenity benefits, and expected real benefits from state and local government policies.

At first, the theory was only relevant to the economic integration of immigrants. It only explained the direct relationship between an immigrant's economic productivity and the length of stay in the host country. Chiswick (1979) explained that although immigrants are initially at a lower economic position, they also have an opportunity to develop it through time. In 1991, Chiswick argued that language skills as part of someone's human capital are essential in achieving sociocultural integration. The motivation to improve the language fluency of the immigrant is a form of integration that increases with the duration of stay in the host country.

Loury (1977, 1987) defined social capital as the resources required or needed to create social structures and thus achieve social development. According to Coleman (1990), social capital is less tangible compared to human capital because it is primarily molded through interactions and relationships with people. Literature also explained that human capital complements social capital because the former can influence the acquiring of the latter to be integrated into the host society. Social capital can be further demonstrated by building a team's trust which makes it stronger and thus, more probable to achieve something. Social capital is mainly formulated in the relationships among individuals; characterized as "the norms and networks that enable people to act collectively and may either result positively or negatively" (Woolcock and Narayan, 2000: 225). Like human capital, social capital isconsidered as an investment in interpersonal relationships and was later useful to be integrated into the labor market (Lin, 2002: 25; Ford, 2018).

Studies revealed that social capital can be two-fold (bonding and bridging). Putnam (2000: 22–24) argued that bonding is a type of exclusive social capital that exists within a homogenous group. Meanwhile, bridging is considered more inclusive and open to other immigrant groups. This idea proposes that having a high social capital does not automatically result in a high-level sociocultural integration since individuals determine from which social network groups they want to be engaged with. Magnusson (2013) added that social integration concentrates on the connections with the host country's natives that an immigrant establishes proving that social capital also gives importance to various networks, including the immigrant's group.

2.2. Indicators of Sociocultural Integration

This study emphasizes the importance of sociocultural integration as a dimension of integration because it is largely connected to the individual's life and way of living. According to Van Tubergen (2006: 7), sociocultural integration is characterized as a mixture of social integration (the level of social interactions between immigrants and natives) and cultural integration (the extent to which shared cultural values and patterns among immigrants and natives occur). Immigrants are socioculturally integrated into the host society when "interethnic contacts, friendships, and marriages are common, and when immigrants speak the destination language well."

For this study, the sociocultural integration of the Filipino migrant nurses is identified by looking into five of the seven indicators from Fokkema and De Haas (2015). Considering time constraints without compromising more concentrated results, this paper uses the following indicators: (1) language proficiency; (2) circle of friends; (3) social contacts with native population; (4) participation in organizations; and (5) ethnic identification.

3. METHODOLOGY

3.1. Site and Participants Selection

The interviewees were selected based on the location where they are predominantly deployed as per the 2020 GIZ records. Based on statistics, the states of Bavaria, Baden-Wüttemberg, Nordrhein-Westfalen, and Brandenburg recorded the highest number of nurses; hence, selected as the site or locale for this study.

Ten TWP-hired Filipino migrant nurses recognized as official nurses in Germany who stayed in the country for at least two years were selected as interviewees for this study. Filipino nurses are required to undergo a mandatory recognition or *Anerkennung* process to be officially recognized as a nurse in Germany. Upon arrival in Germany, nurses are recommended to finish the said stage within 12 months. Therefore, since the focus of this paper is on sociocultural integration to the host country, the pioneer batches of nurses deployed were chosen to establish a clear association to integration. This rationalization assumes that those who are still undergoing the *Anerkennung* stage are most likely newly-arrived individuals, and thus do not have many experiences yet.

The 10 interviewees' age ranges from 26 to 35 years old. Of the 10 nurses, three were female and 7 were male. Only one of them is married. The nurses are currently residing and working in the states of Bayern, Baden-Wüttemberg, Berlin, Nordrhein-Westfalen, and Brandenburg. The nurses are assigned to various departments in their health facilities such as cardiac surgery, neurology, neurosurgery intensive care unit, surgical ward, and winning stations. The nurses interviewed have been practicing their profession for 9-14 years. Some respondents have also worked as nurses in other countries (e.g. Saudi Arabia and Singapore) before working in Germany.

3.2. Data Collection and Analysis

3.2.1. Data Collection

Primary Data. Due to time constraints and limited access to mobility, sources of information, and connections brought by the COVID-19 pandemic¹, the researcher considered the nature and availability of the nurses as front liners of the said global problem; hence, this study employed convenience sampling to conduct online semi-structured interviews for 10 selected Filipino migrant nurses and implementing agency representatives through video-conferencing software for primary data gathering. Convenience sampling as defined by Etikan (2016) is used to gather data from respondents who are easily accessible, available, and willing to participate. The data collection was conducted in June 2020. The guide questions and interviews were conducted in English.

Table 1 shows the five selected indicators and their respective assumptions from Fokkema and De Haas (2015) which were adopted and modified. This matrix served as the researcher's main guide in formulating questions and in analyzing the interview responses by the Filipino migrant nurses.

Indicator	Description	Assumption
Language	Fluency in German in	The better German language skills the nurses
proficiency	terms of reading,	possess, the higher the level of sociocultural
	writing, and speaking	integration.
Social contacts	Migrants keeping	The more often and established connection the
with native	company with native	nurse is with a native, the higher the level of
population	citizens	sociocultural integration.
Participation in	Participation in either	The more active involvement of the nurse is in
organizations	native or foreign	native organization in Germany, the higher the
	organizations in the	level of sociocultural integration.
	host country	
Circle of	Migrants with native	The closer the nurse is to a native, the higher
friends	close friends	the level of sociocultural integration.

Table 1. Indicators of Sociocultural Integration (Adopted and Modified from Fokkema and De Haas, 2015)

¹ COVID-19 or coronavirus pandemic is a global pandemic that is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), with the first case discovered in December 2019.

Indicator	Description	Assumption
Ethnic	Sense of	The higher the nurse's perception of
identification	"belongingness" in a	belongingness in Germany, the higher the level
	particular population	of sociocultural integration.
	group (either in	
	Germany, Philippines,	
	or another group)	

Language proficiency as human capital is important in attaining cultural integration to the host country. Hence, the interviewees were asked about their ability in speaking, writing, and reading the German language. Furthermore, social integration explores the relationships of the nurses to the host country's natives. The interviewees were asked how often they are meeting with the native population, their compatriots, and people from other countries.

Participation in either native or foreign organizations is also an indicator that can be explored, especially the language being utilized in that specific organization. The circle of friends measures how close a Filipino migrant nurse is with a native because this assumes that there is a sociocultural training or exchange between the two individuals. A subjective question about the migrant nurse's sense of belongingness to a population group (Philippines, Germany, or another country) was also tackled. This indicator highlights the perceptions of the individuals concerning their sociocultural integration into German society. Also, the challenges experienced with the sociocultural integration were evaluated during the interview.

Secondary Data. Secondary data were collected from published articles and reports. The nurses' evaluation of TWP was used in the study's analysis to assess how the nurses perceive the TWP and its activities. The TWP project scheme and its integration policies and activities were also used to have an overview of how the structure and processes work and how it benefits the Filipino migrant nurses. These served as supplementary information to the answers provided by the implementing agencies during the online interview.

Ethical Consideration. From the start of the conduct of the data gathering, letters requesting for an interview were sent to the interviewees via e-mail along with a brief background of the subject matter. Subsequently, before proceeding with the interview, the

researcher reiterated the nature of the study and the purpose of the interview for full disclosure. The consent of the interviewees to share their personal experiences was sought following the importance of the participant's protection in research (Arifin, 2018). The interviewer also guaranteed that the interviewees' identities are kept confidential, anonymous, and used solely for the study.

3.2.2. Data Analysis

A thematic analysis by Bryman (2012) was used in this study. Thematic analysis is primarily used for qualitative research as it categorizes, identifies, and analyzes patterns or terms using qualitative data (Braun and Clarke, 2006). Thematic analysis through a framework creates an index of themes and sub-themes as products of the transcripts of interviews. Themes are categories identified by the researcher that are relevant to the research aims (Bryman, 2012). A framework was made based on the five sociocultural integration indicators along with other formulated questions, such as the structure of the TWP's integration activities, as well as current challenges.

4. RESULTS

4.1. Integration Policies and Activities of the Triple Win Project

4.1.1. Preparatory German Language Training

The implementing guidelines of the BLA for TWP enumerate the scope and steps of the recruitment process, including the Preparatory German Language Training (PGLT) and PDOS as integration activities of the TWP. Section 5.2 of the guidelines states that nurses should undergo a 4-hour PDOS conducted by the OWWA and a 5-day orientation training conducted by the GIZ. The PDOS includes modules on the rights and obligations of workers, cultural orientation, etc., while the GIZ will facilitate various trainings with intercultural modules and approaches to bridge the differences between the education system and professional roles in medical facilities in the Philippines and Germany (2013).

Interviews with the implementing agencies were conducted to understand their involvement in the TWP and the integration aspect of the project. The POEA through the Division Chief of the Government Placement Branch (GPB) also explained that like other recruitment processes, a hiring announcement is posted. After the submission deadline, the POEA schedules interviews For the shortlisted applicants they selected along with ZAV. Since the ZAV promotes the TWP to employers, they send interviewers for the application process. Once the applicant has successfully passed the interview, he/she is sent to language school for six months. The POEA explained that:

"During the nurses' language training, the applicant/workers are matched with an employer. As part of the nurses' cultural integration and as a requirement for visa application, the nurses are required to obtain a B1 level certificate."

One institution primarily involved in the TWP's policy and program matters is the Philippine Overseas Labor Office (POLO), which is based in Berlin, Germany. The POLO is led by the Labor Attaché, which also facilitates employment and ensures the protection and welfare of the migrant workers within their jurisdiction. They participate in the review of the TWP processes in an annual Joint Committee Meeting (JCM). The JCM addresses the issues on the implementation of TWP through the introduction of policy developments.

4.1.2. Pre-Departure Orientation Seminar

Both the POEA-GPB's Division Chief and POLO's Labor Attaché mentioned that PDOS is mandatory to all OFWs before departure. They elaborated:

"We conduct a 5-day professional course wherein we invite previous TWP applicants to discuss their experiences when they arrived in Germany, what are the things needed, and the dos and don'ts. Issues on culture and adjustment are discussed in this 5-day professional integration course."

The OWWA orients the nurses about the government programs and services for OFWs. The PDOS is divided into three modules, namely, (1) Working Overseas; (2) Employment Contract; and (3) Government Programs and Services (Mosuela, 2017: 170). The sessions address the important facts and information that the nurses need to know when working abroad, specifically in Germany. The nurses are also educated about the availability of assistance provided by the Philippine government through the Philippine Embassy in Berlin and its consulates in different parts of Germany as well as POLO Berlin. Important hotlines are also provided to the nurses in case of emergency.

However, POLO mentioned that although PDOS is helpful, it is limited because integration is not automatic. POLO said:

"PDOS has limited time because it is the most practical time that you could give. The absorptive capacity level of an individual is not long because she has other things in mind such as personal matters including pre-departure expenses, family, etc. The individual is already stressed."

Absorptive capacity is vital in knowledge transfer since the ability of an individual to understand a speaker or information has its maximum tolerance, especially when other factors are present (Junni and Sarala,2013: 423) Although this context varies among the nurses, this situation is still happening and is another problem.

The GIZ is an international organization with offices in partner countries. The GIZ conducts a 4-day professional course for the nurses before departing from the Philippines which includes topics on the healthcare system in Germany; nursing profession in Germany; nursing theories, models, and concepts; communication; infection control; laws; nurses' role in patients' hygiene; geriatric nursing (caring for the elderly). The GIZ through the TWP's Adviser for Integration mentioned that their team in the Philippines primarily facilitates and supports the pre-migration process by the applicants, while the team in Eschborn continues to assist the nurses once they arrive in Germany. The GIZ also prepares the employers before the nurses' arrival and continues to support them after their arrival, especially on matters like registrations, visa, work permit extensions, professional recognition, and integration.

4.1.3. Post-Arrival Integration Activities

The GIZ designed a one-day mechanism for post-arrival assistance to the nurses by organizing and accompanying the nurses for opening a bank account and registering for health insurance upon their arrival, then applying for a residence permit at a later point.

The POEA has also emphasized that the Post-Arrival Orientation Seminar (PAOS) is still being developed since POLO Berlin was just established last year. Previously, the GIZ was in-charge in assisting the TWP nurses in terms of integration in compliance with the BLA. In addition to the assistance provided by the GIZ upon the nurses' arrival, the pioneer batches of nurses were also helping the newly deployed nurses in their integration, by providing tips and other information that are useful to their stay in Germany.

Since POLO Berlin has already stated that integration is a continuing process, PAOS should therefore not just be one-shot. The interviewee mentioned South Korea as a model for PAOS wherein prior to their deployment, they are housed for a couple of days to be taught about basic Korean labor law, insurance, culture, etc.

4.1.4. Recognition Process

Another important integration policy of the TWP is the continuation of language training by the nurses. After gaining a B1 certificate in the Philippines, the nurses are all required to attend German language classes in Germany to obtain a B2 language certificate as a pre-requisite for their professional recognition. Both the POEA and POLO have pointed out that language has been one major challenge to the nurses' integration into German society. The employers financially support the language training and recognition process of the TWP nurses.

4.2. Sociocultural Integration of Filipino Migrant Nurses

This paper only captures the importance of sociocultural integration of migrants in the host society because the nurses are already assumed to have been integrated into the labor market. The TWP nurses shall receive fair salaries at the same rate as the German nationals. Furthermore, the GIZ mentioned in an interview that if an employer would want to join the project, they must guarantee a minimum wage of 2,400€ gross salary after the nurses' recognition With advanced payments for their personal needs upon arrival.

4.2.1. Language Proficiency

The first indicator from Fokkema and De Haas (2015) used in the study is language proficiency. Most interviewees shared their stories of improvements in their German language skills from their arrival until today. Seth, a 32-year-old male,² observed that his German has improved from four years ago because now, he would refrain from just saying "*Ja*" or "Yes" at all times. Ella, a 29-year-old female, also added that Google Translate was her best friend in her first months in Germany.

"I often use Google Translate to translate German words and phrases before, but now, I do not use it much often anymore."

The nurses mentioned that they have to speak German every day at work and even in their daily activities. Philip, 30-year-old male shared that although he is with some Filipino nurses, they tend to speak in German than English or Filipino.

"Even when I am with other Filipinos, we would speak in German not just to master the language, but also as a sign of respect to our colleagues."

Language learning, which involves how the people in the receiving society treat the immigrants, is also another aspect of cultural integration. No matter how much the government of the host country facilitates language integration, anti-immigrant sentiments from the native population may occur and can potentially affect the language proficiency of the destination country (Van Tubergen and Kalmijn, 2005). Findings from this study showed that some nurses pointed out that Germans whom they have interacted with (colleagues and patients) were appreciative that the Filipino nurses were giving their best in speaking German even at times when they are grammatically incorrect.

 $^{^2}$ The names of all interviewees have been changed for anonymity, while the names of representatives interviewed from the implementing agencies are not specified.

Although the TWP nurses have passed the B2 German level, results show from the interviews conducted with the TWP nurses, that language is always a big challenge. Nash, a 35-year-old male, reiterated that:

"I have lived here for six years already and even if we speak Deutsch every day, there are still some words that I still need to study."

From Nash's experience, fluency to speak or understand a certain language is difficult, especially when you have not practiced it in the Philippines before the departure. This assumption means that the exposure to the German language was only during the German language courses and not outside lectures. According to Van Tubergen (2006: 140), immigrants' proficiency in the destination-language is considered a function of the amount of exposure to that language. The experiences proved that it is possible to learn the native language through time.

4.2.2. Social Contacts with the Native Population

The nurses were asked the extent of their social contacts with the Germans. Leo, a 35year-old male, shared his story about how his friendship with his German friends and colleagues developed.

"Most of my German friends are from my workplace. However, it took two years before I felt I was their friend. During our PDOS, we were oriented that Germans separate work from their private lives. I realized that it was true, but when you get to know them better, they will be the first to invite you to parties and other events."

One of the nurses interviewed has also made friends with one of her patients. The 93year-old German patient often invites her for *Kaffee und Kuchen*³ at her place. Beth, a 35-yearold female narrated:

³ Kaffee und Kuchen is a German tradition where friends or family meet for a coffee break between 3–4 pm.

"I have patients who became my friends. They often invite me on weekends for *Kaffee und Kuchen*. Filipino nurses are known for our tender loving care to patients."

Beth's story also increases her level of sociocultural integration because she had been interacting with a German national as she was being accustomed to a German tradition.

Aside from meeting Germans at the health facility, some of the nurses interviewed have used dating applications like Tinder and Bumble, to meet and socialize with German nationals. Others were also able to have contacts with the native population through mutual friends who have already lived in Germany. Julia, 29-year-old female, found her partner in Germany who introduced her to German friends. Victor, 30-year-old male, has the same story and elaborated the extent of social contacts he has with his German friends:

"We travel together, hang out during weekends, and we often drink altogether too."

Victor also mentioned that his social contacts with the native population taught him about the practicalities of living in Germany, such as the culture and traditions not mentioned during the PDOS.

4.2.3. Circle of Friends

While social contacts with the native population are occurring, it does not mean that they are the migrants' constant friends. Most of the nurses interviewed have said that their close friends are still Filipinos. Ella detailed:

"Other Filipinos, especially the nurses, are still my closest friends here. I think Filipinos always look for Filipinos to lessen the homesickness. I am more comfortable sharing my stories with them."

Most nurses have also found their close friends from other population groups because there are only a few Filipinos deployed with them in the same city. Beth shared: "I normally hang out with my Polish and Syrian friends because some of my Filipino friends are from other cities and stations at work."

Two of the interviewees have mentioned that they are closer to Germans than other Filipinos. Leo mentioned:

"I still have my close groups with Filipinos, but my super close friends are Germans."

Nash has the same story, but he added that it must have been the location. He is now in a different city where he knows fewer Filipinos than before making him more surrounded by the native population group. Van Tubergen (2006) argued that the level of social capital is contingent on the immigrant's motivation and enthusiasm since such resource is important in achieving more and better life-chances.

One out of 10 nurses interviewed has a relative in Germany prior to migration, while six nurses had friends who already reside in Germany. Those friends were also TWP nurses whom they met in the language training course in the Philippines and were deployed in Germany earlier. The remaining three nurses did not know anyone in Germany before their arrival.

4.2.4. Participation to Organizations

The interviewees were asked whether they are members of different types of organizations. Since the increase of nurses, the pioneer batch of the TWP has founded an organization for nurses in Germany, namely, the Association of Filipino Nurses in Germany (AFNG). Participation to native organizations is non-existent among these nurses despite the invitations they get from their German or other foreign friends due to lack of time. Nurses interviewed mentioned that they spend their free time relaxing at home, doing household chores, or traveling. Nurses also shared that they do not find some organizations interesting as these are not their preference. Some nurses are members of other organizations that are either

Filipino organizations or mixed with different nationalities. Mostly, they prefer to actively participate in Filipino Catholic church activities in Germany and LGBT Europe.

4.2.5. Ethnic Identification

This indicator addresses a subjective remark as to which population group does the nurses feel they most belong to. Diverse responses were gathered from the interviews conducted. For Beth, the Philippines is still her home and where she feels more belong or comfortable.

"I still choose the Philippines. It is still different; I feel home when I am in the Philippines."

Some nurses have said that they felt a sense of 'belongingness' in Germany because of their past experiences living abroad. Rick, a 33-year-old male, shared:

"I am used to living abroad already. I don't feel any homesickness. I felt more belong and welcome here in Germany."

The interviewees also expressed that their choice depends on different categories or aspects. Aaron, 26-year-old male, said that if it is about work-life balance, security, safety, and health, Germany is better than the Philippines. Seth added that he has more freedom living in Germany than home since he was still living with his family and his activities are limited. Two nurses have also shared their intentions to stay longer in Germany, and are already processing their German citizenship or naturalization.

The nurses' choices of which population group or country were largely dependent on economic, health, and security conditions, especially given the current situation of a global pandemic. The nurses are more comfortable living in a society where the basic needs are met and where their profession is given importance. One of the aforementioned reasons for their migration is the low salary in the Philippines. Most of the nurses interviewed are also breadwinners of the family; hence, demand higher income to sustain their needs.

4.3. Effects of TWP's Integration Policies to the Nurses' Sociocultural Integration

Results showed that most nurses regarded the integration policies helpful in their sociocultural integration primarily because of the information they obtained about professional and cultural facts they need to adapt as immigrants. Philip said:

"The PDOS was a big help because it will give you an idea about how life in Germany will be, what it is like, and the do's and don'ts."

Although the nurses recognize that these policies are helpful, some also mentioned that the said integration policies could have been more consistent and improved. Since Leo belongs to the pioneer batch of TWP nurses deployed in Germany, he mentioned how they were taken good care of. He thought that it was also because they are the pilot batch and that agencies are providing them with all the necessary assistance and services they need for their employment and integration in Germany. However, the treatment for the succeeding batches varied. Nevertheless, he also shared that the pioneer batches have also initiated help and support to the incoming TWP nurses through the Filipino nurses' organization (AFNG) which also establishes networks and connections among themselves.

Leo's observation was supported by Nash and Rick. According to them, they had higher expectations compared to what they have experienced first-hand. Rick added that the predeparture integration activities conducted were more focused on the professional rather than the cultural side of Germany. Nonetheless, Rick liked the idea of having an adaptation course or *Anpassungslehrgang*, specifically to target their career development as it allows nurses to explore other fields of study that they lacked and served as a bridging program to their current job assignments.

Aside from the integration courses mentioned, the nurses also shared their stories on their first days at their health facilities. Philip narrated:

"On our first day at work, they toured us around the facility and we were introduced to each department as the new nurses from the Philippines." The employers are also providing integration policies by hosting social events where nurses are invited for some multi-cultural social activities. Julia shared that in her facility, they hold an annual social dinner wherein foreign and German nationals are invited. As King and Lulle (2016: 68) emphasized, the relationship between two cultures that become in contact results in either barriers or opportunities to language learning. Hence, if the social and cultural distances are wide between the two groups, it will cause a smaller impetus for immigrants to learn the language; consequently, social integration will also be obstructed (Matano and Ramos, 2013; King and Lulle, 2016: 68).

Though integration policies are present, the nurses have also been exerting their efforts. Beth mentioned that she also took the time to research about living expectations and conditions in Germany. That initiative saved her, especially in terms of the administrative and daily bureaucracies she had to face in her first months in Germany. Therefore, the drive to be integrated into the destination country also depends on how much an individual wants to be integrated.

The GIZ (2018) reported that 92.6% of 901 nurses were happy about the TWP. Figure 2 shows the evaluation results (translated to English) from a survey conducted by the GIZ from the TWP nurses who were deployed from 2013 until 2017. Although the majority are satisfied with the TWP, the nurses recommended incorporating more medical-related vocabulary during the language training or that B2 level should be achieved before departure. They suggested more frequent contact with the implementing agencies through workplace visits or further surveys or consultative meetings with the nurses.



Figure 2. Triple Win Project Evaluation by Nurses (GIZ, 2018)

The integration activities are generally perceived helpful by the nurses, but like any other project, it also needs improvement. According to them, the support of the institutions or agencies had been relevant in ensuring that they are integrated into the German society.

4.4. Challenges of the Triple Win Project's Integration Aspect

The most common problem mentioned by the nurses was the language. The nurses only studied conversational and basic German language under the B1 in the Philippines, they couldn't understand the natives on their first days because they were not used to it. Another challenge was their lack of knowledge of German medical terms. Studies also prove that language proficiency of the destination country is not automatic and requires more time and exposure to be mastered. Nonetheless, the nurses became motivated with this challenge as they practice speaking in German even with other Filipinos, especially in the workplace.

The nurses are still required to obtain a B2 language certificate by taking the language classes in Germany to earn professional recognition. POEA and POLO emphasized that language was a major challenge to the nurses' integration. Nevertheless, the employers fund the TWP nurses' training and recognition process.

Aside from a year-long process to be recognized as an official nurse, the difficulty level of the processes and examinations vary from state to state. A uniform recognition process has also been supported by the Philippine government so that nurses are on the same track. The POLO forwarded a proposal for a pilot test in a specific state, where the nurses will be officially recognized automatically.

Despite all this, the nursing course in Germany is considered a vocational course rather than a Bachelor's degree. The GIZ (2018) reported that 77.7% of those TWP nurses surveyed in 2018 have passed the professional recognition, the Anerkennung, to be recognized as official nurses in Germany. However, professional recognition among nurses abroad is still a longstanding debate experienced even in the United States and the United Kingdom. This means that despite earning their degrees, nurses may still undergo separate training or process to obtain a special license to work as an official nurse in the host country. Ortiga (2014) revealed that the need for higher institutions to adjust their curriculum to the global demand of nurses (e.g., language electives in Japanese, Arabic, and German) undermines nursing education and professionalization. Although this may cause demotivation among nurses, the interviewed nurses mentioned that they found inspiration from their families and compatriots as they all undergo the recognition process. Previous studies such as Mosuela (2018) revealed that some Filipino nurses in Germany felt more appreciation on their knowledge and qualifications from their colleagues and local patients.

Another challenge is emotional unpreparedness. Philip and Leo observed other nurses' emotional vulnerability on social networking sites like Facebook due to separation from their families. The POEA also reported that nurses request for transfer due to subtle discrimination or racist cases (e.g. odd jobs/shifts given to Filipino nurses).

The inconsistency of integration policies also poses a challenge. Seth observed the comparison between implementation among TWP batches and the emerging problems it could bring.

Although the TWP provides a hotline for nurses, the paper recognizes the importance of actual communication among the TWP nurses and implementing agencies. Additionally, the institutions and integration policies are essential to the sociocultural integration of nurses. King and Lulle (2016: 68) emphasized that communication strategies must be improved among all relevant actors and institutions (i.e. government, employer, and other stakeholder groups). Fortunately, these challenges are already being looked upon by the involved agencies and stakeholders.

5. DISCUSSION AND CONCLUSIONS

The indicators used in this study provided significant impacts on the nurses' sociocultural integration but not all have the same effect for each nurse. Although they share similar experiences and perspectives, the nurses' extent of sociocultural integration differed due to their backgrounds, personalities, and interests.

The nurses' language skills served as human capital to build networks with both the native population and other population groups. Hammer (2017: 92) described language as a vehicle for sociocultural integration. Moreover, Esser (2006) added that the ability to use the destination language is necessary for participating in the host society's sociocultural activities.

The nature of the nurses' employment helped them develop their German language skills. According to Isphording (2015), language skills are essential to an immigrant's human capital. Given that the nurses were exposed to a subsidized German language before migration, they already have a greater advantage when it comes to being integrated into the labor market. From the responses gathered during the interview, most of the nurses were confident about their language skills since they are 'learning by doing' through speaking in German at their workplaces daily. As studies have concluded, the time spent in the host country has more impact on the language acquisition of an immigrant.

Social contacts with the native population also exist among nurses interviewed. Being knowledgeable and exposed to the host country's tradition also proves that social capital is being "converted into other forms and results in the maintenance or improvement of the persons' position in society" (Ford, 2018: 18). Furthermore, cultural integration also covers this aspect since it refers to learning the dominant values, customs, and traditions in the host country (Spitzer, 2018).

Friends among the native population and other population groups were also present among the nurses. Magnusson (2013) explained that social capital is not only built among the destination country's native population, but also from other international population groups. Following the human capital theory, Van Tubergen (2006: 20) argued that "country-specific human capital is important for immigrant integration." This indicator shows that the sociocultural integration of the nurses is influenced by the friends and connections they built regardless of the population group. Such bonding increases their capacity to access more social networks which are vital to their overall integration.

Social contacts are more probable for those who have friends or family in the destination country before their migration. Friends and family are considered as connectors for individuals in certain communities; hence, some studies argued that these relationships build up someone's adjustment or adaptation in the host society (Ritchey, 1976; Uhlenberg, 1973; Rainer and Siedler, 2009: 744).

Given that integration takes time, immigrants also tend to be closer with their compatriots like their co-language trainees in the Philippines, earlier batches of TWP nurses, and others whom they met during the process. The networks built by immigrants are essential to attain social integration, however, the individual still has the liberty to decide whom to interact with depending on their needs. Studies revealed that immigrants having close relationships with their compatriots do not necessarily have negative impacts on their social integration but could potentially result in lower human capital, as Laurentsyeva and Venturini (2017) argue that such circumstances might negatively affect how immigrants acquire certain skills from the host country.

Participation in organizations, as an indicator of sociocultural integration, also contributes to an immigrant's social capital. Magnusson (2013) and Van Tubergen (2006) explained that social capital can also be attained from social networks with other population groups, not only from the native population. The nurses interviewed were engaged to AFNG, a social network among compatriots. Interview results added that social capital theory highlights the positive effects on an individual's resources from their social networks and interactions. According to Rainer and Siedler (2009), integration is essential to increase social capital that permits migrants to participate in the destination country. Putnam (2000) also

pointed out that social capital is increased progressively through participation in organizations, such as civic and political associations and unions.

Sociocultural integration has different interesting angles regarding migration. The nurses interviewed have manifested different opinions on where they feel more belong. The ethnical identification indicator highlights the importance of the nurses' subjective and personal perspectives on their integration. Such also extends to the feelings of belongingness expressed in terms of "allegiance to ethnic, regional, local, and national identity or so-called identity integration" (King and Skeldon, 2010; Fokkema and De Haas, 2015: 2).

Not only the indicators affect the nurses' integration, but also the integration activities facilitated by the Philippine and German parties. These integration policies (e.g. PDOS and PAOS) are perceived as helpful by the nurses, but at the same time has room for improvement.

Evidently, a lot of things have changed and will continue to change especially during this bigger demand for healthcare professionals in the battle against a global pandemic. Therefore, both the participation of the nurses and the institutions are important; hence, communication among these key players is vital for an increased level of sociocultural integration. This study also concludes that socio-cultural integration requires adaptation not only from the nurses but also from the receiving country.

Furthermore, the case of Filipino nurses hired through the TWP also adds to the policy debate on ethical recruitment. The Global Compact for Safe, Orderly, and Regular Migration (GCM) which aims to facilitate fair and ethical recruitment and safeguard conditions that ensure decent work complements WHO's advocacy of ethical recruitment and ILO's agenda of decent work. The TWP's ethical recruitment scheme has "humble and mundane mechanisms which appear to make it possible to govern" (Miller and Rose, 2008: 32) because of a systematic process between countries from the nurses' pre-departure until employment. Based on the study of Mosuela (2017: 180), ethical recruitment of the TWP only covers the number of nurses supplanted without considering the working conditions in health care facilities in both the sending and receiving countries. Given the global pandemic we are facing, this study also highlights the importance of having sustainable and ethical recruitment in such a situation. Hence, the TWP also opens a big discussion not only on nurses' professional recognition in Germany but also on the supply of nurses in the Philippines, especially during this time.

6. RECOMMENDATIONS

Elicited from the findings and analyses of this study, the following are recommended: (1) a reformed pre-departure and post-arrival integration activities, such as integrating medical vocabulary and work set-up during the language training and expanding the PAOS upon arrival in Germany by including psychological and personality development training; (2) a more consistent and coordinated integration plan such that all nurses are exposed to Germany's daily life and work and interaction with the people, and (3) an institutionalized uniform recognition process through revising curricula of both nursing courses in the Philippines and Germany for a possible pilot study in response to the varying state regulations in the destination country. In this way, nurses in the pipeline or those who intend to be part of the TWP will receive and experience the same standards for recognition. These recommendations may also depend on how the Filipino migrant nurses perceive them to be valuable and useful for their sociocultural integration.

For future research, the indicators of sociocultural integration can be expanded to include and test other factors affecting one's sociocultural integration, such as pre- and postmigration factors like age, having a native partner, etc. Other aspects of integration such as political integration can also be further explored.

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