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NEW ZEALAND NURSE MIGRATION TO THE UNITED STATES: WHAT MAKES THEM GO? WHAT WILL BRING THEM BACK?

A Thesis presented in partial fulfilment of the requirements for the degree of
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Lynette Whittaker
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ABSTRACT

Within the next ten years there will be a considerable global nurse shortage and as many countries consider a variety of ways to both recruit and retain their nursing workforce, nurse migration is coming under increased scrutiny as both contributing to and solving the problem. New Zealand is a significant importer of nurses yet also loses a substantial number of its nurses to overseas positions. Within nurse migration research there are few qualitative studies that look at the reasons behind the decision to migrate and the experience of nurse migrants travelling from one developed country to another. This qualitative study utilizing an interpretive descriptive research design was employed to study the reasons why nurses leave New Zealand to work abroad, specifically to California, U.S.A. and sought also to explore what kept the nurses in the United States. Six face to face interviews were conducted. From the data, thematic analysis was employed to identify a variety of themes related to the decision to migrate, the early ‘settling in’ period, and reasons that may influence the nurses decision to remain in California. Factors identified that contributed to the nurses leaving New Zealand were the opportunity to travel while working, accessible recruitment agencies and hospitals, and past travel experiences. Adjustment difficulties in the United States were mitigated by the presence of other expatriates in close proximity, financial support from hospitals, and continual travel opportunities. Firmly ensconced in California the majority of the nurses had no immediate plans to return to New Zealand citing work and educational opportunities within the US and a favourable Californian lifestyle as primary reasons for staying. In addition the ability to retain a strong connection to their families in New Zealand through technology and frequent trips home contributed to their length of stay in the United States. Supporting family left at home was considered to be a possible reason for returning to New Zealand on a more permanent basis while a type of circular migration where the ‘best of both worlds’ could be enjoyed would also be considered by the nurses. This small study highlights the need for further research on nurses leaving and returning to New Zealand. Only by gaining a better understanding of the migrating nurse’s motivation for travel and impetus for return can health policy makers develop strategies for recruiting and retaining experienced New Zealand nurses.
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CONTENTS

Abstract ii
Acknowledgments iii
Contents iv
List of graphs viii

CHAPTER 1. INTRODUCTION 1

Introduction 1
Employing nurse migrants 2
Highlighting the New Zealand story 3
Study aim 5
Research questions 5
Researcher position 6

Personal journey to migration research 6
Influences on the research design 7

Nature of the study 7
Organization of the study 7
Summary 8

CHAPTER 2. LITERATURE REVIEW 10

Introduction 10
Approach and parameters 10
The Context: Nurse migration in general 11

Statistical dilemmas 11
Migration pathways 13
Why do nurses move? 16
The ethics of nurse migration 18
Return migration 20

The United States as destination country 21
The New Zealand position 24

The New Zealand migrant nursing numbers 24
Summary

CHAPTER 5. PUTTING DOWN ROOTS

Introduction
Home is all around
Fitting in
  Day to day work life
  Financial and immigration assistance
  Venturing out
Summary

CHAPTER 6. WHERE IS HOME NOW?

Introduction
Living the California dream
  The best of both worlds
The work ladder
It’s a small world
  ‘It might pull us home’
It’s been a long time
Summary

CHAPTER 7. DISCUSSION

Introduction
Leaving New Zealand
Coming home
Study limitations
Implications for the New Zealand workforce
Looking to the future
  Looking forward
  Further research
  In conclusion: The focus for New Zealand
REFERENCES

APPENDICES

Appendix A – Participant Information Sheet
Appendix B - Introductory paragraph for Participants
Appendix C - Aide Memoire
Appendix D – Ethical approval
Appendix E - Participant consent form
LIST OF GRAPHS

Graph One: Percentage of foreign trained nurses in California 23
Graph Two: Numbers of new international nurse migrants to New Zealand 25