



**World Health
Organization**

WHO Global Code of Practice on the International Recruitment of Health Personnel

National Reporting Instrument (2024)

World Health Organization
Geneva
March 2024

Background

Adopted in 2010 at the 63rd World Health Assembly (WHA Res 63.16), the [WHO Global Code of Practice on the International Recruitment of Health Personnel](#) (“the Code”) seeks to strengthen the understanding and ethical management of international health personnel recruitment through improved data, information, and international cooperation.

Article 7 of the Code encourages WHO Member States to exchange information on the international recruitment and migration of health personnel. The WHO Director General is mandated to report to the World Health Assembly every 3 years.

WHO Member States completed the 4th round of national reporting in May 2022. The WHO Director General reported progress on implementation to the 75th World Health Assembly in May 2022 ([A75/14](#)). The report on the fourth round highlighted the need to assess implications of health personnel emigration in the context of additional vulnerabilities brought about by the COVID-19 pandemic. For this purpose, the Expert Advisory Group on the relevance and effectiveness of the Code ([A 73/9](#)) was reconvened. Following the recommendations of the Expert Advisory Group, the Secretariat has published the [WHO health workforce support and safeguards list 2023](#).

The National Reporting Instrument (NRI) is a country-based, self-assessment tool for information exchange and Code monitoring. The NRI enables WHO to collect and share current evidence and information on the international recruitment and migration of health personnel. The findings from the 5th round of national reporting will be presented to the Executive Board (EB156) in January 2025 in preparation for the 78th World Health Assembly.

The deadline for submitting reports is 31 August 2024.

Article 9 of the Code mandates the WHO Director General to periodically report to the World Health Assembly on the review of the Code’s effectiveness in achieving its stated objectives and suggestions for its improvement. In 2024 a Member-State led expert advisory group will be convened for the third review of the Code. The report of the review will be presented to the 78th World Health Assembly.

For any queries or clarifications on filling in the online questionnaire please contact us at WHOGlobalCode@who.int.

Disclaimer: The data and information collected through the National Reporting Instrument will be made publicly available via the NRI database (<https://www.who.int/teams/health-workforce/migration/practice/reports-database>) following the proceedings of the 78th World Health Assembly. The quantitative data will be used to inform the National Health Workforce Accounts data portal (<http://www.apps.who.int/nhwportal/>).

What is the WHO Global Code of Practice?

The [WHO Global Code of Practice on the International Recruitment of Health Personnel](#) (“the Code”), adopted by the 63rd World Health Assembly in 2010, is a voluntary instrument that articulates the ethical principles on international recruitment and migration of health workers, in a way that strengthens the health systems of developing countries.

Objective	<ul style="list-style-type: none"> • Establish ethical principles and practices for international recruitment of health personnel. • Serve as reference for the legal/institutional framework for international health personnel recruitment. • Provide guidance for bilateral agreements and other international legal instruments. • Advance cooperation with a particular focus on developing countries.
Nature and Scope	<ul style="list-style-type: none"> • The Code is voluntary and global in scope.
Guiding Principles	<ul style="list-style-type: none"> • International migration of health personnel can contribute to strengthening health systems and safeguarding health personnel rights, if recruitment is properly managed and negative effects are mitigated. • International health personnel recruitment should be conducted in accordance with the principles of transparency, fairness and health system sustainability in developing countries. • Member States should consider the right to health of source countries’ populations and individual rights of health personnel. • The Code does not limit the freedom of health personnel, in accordance with applicable laws, to migrate to countries that wish to admit and employ them. • Developed countries should provide technical and financial assistance for health systems strengthening. • Member States should facilitate circular migration to the benefit of both source and destination countries.
Responsibilities, rights and recruitment practices	<ul style="list-style-type: none"> • Stakeholders should ensure fair recruitment and equal treatment practices of migrant health workers. • Recruiters and employers should not seek to recruit health workers with existing domestic contractual obligations.
Health workforce development and health systems sustainability	<ul style="list-style-type: none"> • Active recruitment from countries facing critical shortage of health workers should be discouraged. • Member States should use the Code as a guide when entering into bilateral, regional, and multilateral arrangements to promote international cooperation and coordination. • All countries should strive to meet the health service needs through domestic human resources.
Data gathering and research	<ul style="list-style-type: none"> • Member States should strengthen their human resources for health information systems (HRHIS), including health personnel migration, and use the data to inform health workforce policies and plans.
Information exchange	<ul style="list-style-type: none"> • Member States should designate a national authority for information exchange on the Code and migration.
Code implementation	<ul style="list-style-type: none"> • Member States are encouraged to publicize, implement, and incorporate the Code into applicable laws and policies, in collaboration with stakeholders. • Member States should promote Code principles among private recruitment agencies, assess the magnitude of active recruitment from countries facing health workforce vulnerabilities, and promote good practices among recruitment agencies.
Monitoring and institutional arrangements	<ul style="list-style-type: none"> • Member States should report on the application of the Code and associated challenges. • The WHO Director-General should periodically report to the World Health Assembly on Code implementation. • The World Health Assembly should periodically review the Code’s relevance and effectiveness in achieving its stated objectives and update it as required.
Partnerships, technical collaboration and financial support	<ul style="list-style-type: none"> • International entities, financial and development institutions, and other relevant organizations are encouraged to provide technical and financial support for health system strengthening and health workforce development in developing countries, countries with economies in transition, those that are facing critical health workforce shortages and/or have limited capacity to implement the Code.

Contact Details

Name of Member State:

Name of designated national authority:

Title of designated national authority:

Institution of the designated national authority:

Email:

Telephone number:

National Reporting instrument 2024

The questions marked * are mandatory. The system will not allow submission until all mandatory questions are answered.

Contemporary issues on health personnel migration and mobility

1.1 In the past 3 years, has the issue of international recruitment of health personnel been a concern for your country?

<ul style="list-style-type: none"><input type="radio"/> Yes, and it is increasing in intensity<input type="radio"/> Yes, and it is decreasing in intensity<input type="radio"/> Yes, and there has been no change in the intensity<input type="radio"/> No, this is not a problem in my country	Please describe the issue and any measures taken to address it
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1.2 In the past 3 years, has the issue of international reliance on health personnel (international recruitment of health personnel to meet domestic needs) been a concern for your country?

<ul style="list-style-type: none"><input type="radio"/> Yes, and it is increasing in intensity<input type="radio"/> Yes, and it is decreasing in intensity<input type="radio"/> Yes, and there has been no change in the intensity<input type="radio"/> No, this is not a problem in my country	Please describe the issue and any measures taken to address it
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Health personnel education, employment and health system sustainability

2. Is your country taking measures to educate, employ and retain a health and care workforce that is appropriate for the specific conditions of your country, including areas of greatest need? (*)

- ☐ Yes
- ☐ No

If no, please proceed to 3.1

If yes, please check all items that apply from the list below (*):

☐ 2.1 Measures taken to ensure the sustainability¹ of the health and care workforce

Measure	Yes	Please describe
Forecasting future health and care workforce requirements to inform planning	<input type="checkbox"/>	
Aligning domestic health and care workforce education with health system needs	<input type="checkbox"/>	

¹ Health workforce sustainability reflects a dynamic national health labour market where health workforce supply best meets current demands and health needs, and where future health needs are anticipated, adaptively met and viably resourced without threatening the performance of health systems in other countries (ref: *Working for Health and Growth, Report of the High-Level Commission on Health Employment and Economic Growth*, WHO, 2016, available from <http://apps.who.int/iris/bitstream/10665/250047/1/9789241511308-eng.pdf?ua=1>).

Improving quality of education and health personnel in alignment with service delivery needs	<input type="checkbox"/>	
Creating employment opportunities aligned with population health needs	<input type="checkbox"/>	
Managing international recruitment of health personnel	<input type="checkbox"/>	
Improving management of health personnel	<input type="checkbox"/>	
Specific provisions on health personnel regulation and recruitment during emergencies	<input type="checkbox"/>	
Others		Mandatory if yes

☐ **2.2 Measures taken to address the geographical mal-distribution and retention of health and care workers² (Check all that apply)**

☐ **2.2.1 Education**

Measure	Yes	Please describe
Education institutions based in rural/underserved areas	<input type="checkbox"/>	
Student intake from rural/underserved areas and communities	<input type="checkbox"/>	
Scholarships and subsidies for education	<input type="checkbox"/>	
Relevant topics/curricula in education and/or professional development programmes	<input type="checkbox"/>	
(Re)orientation of education programmes towards primary health care	<input type="checkbox"/>	
Others	<input type="checkbox"/>	Mandatory if yes

☐ **2.2.2 Regulation**

Measure	Yes	Please describe
Scholarships and education subsidies with return of service agreements	<input type="checkbox"/>	
Mandatory service agreements with health personnel that are not related to scholarships or education subsidies	<input type="checkbox"/>	
Enhanced scope of practice of existing health personnel	<input type="checkbox"/>	
Task sharing between different professions	<input type="checkbox"/>	
Provisions for pathways to enter new or specialised practice after rural service	<input type="checkbox"/>	
Others	<input type="checkbox"/>	Mandatory if yes

☐ **2.2.3 Incentives**

Measure	Yes	Please describe
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² [WHO guideline on health workforce development, attraction, recruitment and retention in rural and remote areas](#) provides recommendations to address the factors that influence rural health workforce shortages and inequities in their distribution.

Additional financial reimbursement	<input type="checkbox"/>	
Education opportunities	<input type="checkbox"/>	
Opportunities for career advancement or professional growth	<input type="checkbox"/>	
Professional recognition	<input type="checkbox"/>	
Social recognition	<input type="checkbox"/>	
Opportunity for pathways to permanent residency and/or citizenship for international health personnel	<input type="checkbox"/>	
Others	<input type="checkbox"/>	Mandatory if yes

☐ 2.2.4 Support

Measure	Yes	Please describe
Decent and safe working conditions	<input type="checkbox"/>	
Decent and safe living conditions	<input type="checkbox"/>	
Distance learning/e-learning opportunities	<input type="checkbox"/>	
Others	<input type="checkbox"/>	Mandatory if yes

- ☐ 2.3 Other relevant measures to educate, employ and retain a health and care workforce that is appropriate for the specific conditions of your country.

Please describe
Mandatory if yes

3.1 Are there specific policies and/or laws that guides international recruitment, migration and integration of foreign-trained health personnel in your country? (*)

- ☐ Yes

Law/policy 1	If yes, at least one row is mandatory
Law/policy 2	
Law/ policy 3	

- ☐ No

3.2 Are there any policies and/or provision for international telehealth services in your country through health personnel based abroad?

- ☐ Yes

Please describe

- ☐ No

3.3 Has your country established a database or compilation of laws and regulations related to international health personnel recruitment and migration and, as appropriate, information related to their implementation?

- Yes

Web-link	Web-site
Other documentation	Upload document

- No

4 Recognizing the role of other government entities, does the Ministry of Health have mechanisms (e.g. policies, process, unit) to monitor and coordinate across sectors on issues related to the international recruitment and migration of health personnel? (*)

- Yes

Please describe
Mandatory if yes

- No

5. Please describe the steps taken by your country to implement the following [Code](#) recommendations.

Check all items that apply from the list below (*):

5.1	Measures have been taken or are being considered to introduce changes to laws or policies on health personnel consistent with the recommendations of the Code.	<input type="checkbox"/>	Mandatory if yes
5.2	Actions have been taken to communicate and share information across sectors on the international recruitment and migration of health personnel, as well as to publicize the Code, among relevant ministries, departments and agencies, nationally and/or sub-nationally.	<input type="checkbox"/>	Mandatory if yes
5.3	Measures have been taken to consult stakeholders in decision-making processes and/or involve them in activities related to the international recruitment of health personnel.	<input type="checkbox"/>	Mandatory if yes
5.4	Records are maintained on all private recruitment agencies for health personnel authorized by competent authorities to operate within their jurisdiction.	<input type="checkbox"/>	Mandatory if yes
5.5	Good practices, as called for by the Code, are encouraged and promoted among private recruitment agencies. Skip to 6 if not checked; if checked, respond to 5.5a-5.5d	<input type="checkbox"/>	
5.5a	Promotion of the Code among private recruitment agencies.	<input type="checkbox"/>	Mandatory if yes
5.5b	Domestic legislation or policy requiring ethical practice of private recruitment agencies, as consistent with the principles and articles of the Code.	<input type="checkbox"/>	Mandatory if yes
5.5c	Public or private certification of ethical practice for private recruitment agencies.	<input type="checkbox"/>	Mandatory if yes
5.5d	Others	<input type="checkbox"/>	Mandatory if yes

5.6	None of the above	<input type="checkbox"/>	
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Government-to-Government agreements on migration or mobility of health personnel

6. Has your country or sub-national government entered into any bilateral, multilateral, or regional agreements and/or arrangements with respect to the international recruitment and/or mobility of health personnel? (*)

- ☐ Yes
- ☐ No

If no, please proceed to 7.

If yes, please answer the question related to the agreement(s) below (*)

6.1 Please use the table below to describe each of the active bilateral, regional or multilateral agreements or arrangements:

a. Title of Agreement*	b. Type of Agreement*	c. Countries involved*	d. Coverage	e. Main focus of agreement (check all that apply) *	f. Categories of Health Personnel (check all that apply) *	g. Validity period * (start year- end year)	h. Signatory of the agreement from your country*		i. Signatory of the agreement from the partner country (ies) *		j. Content of agreement *	
	<input type="radio"/> Bilateral <input type="radio"/> Multilateral <input type="radio"/> Regional		<input type="radio"/> National <input type="radio"/> Sub-national Please specify if sub-national:	<input type="radio"/> Education and training <input type="radio"/> Health cooperation <input type="radio"/> Promotion of circular migration <input type="radio"/> Philanthropy or technical support <input type="radio"/> Qualification recognition <input type="radio"/> Recruitment of health personnel <input type="radio"/> Trade in services <input type="radio"/> Other :	<input type="radio"/> Doctors <input type="radio"/> Nurses <input type="radio"/> Midwives <input type="radio"/> Dentists <input type="radio"/> Pharmacists <input type="radio"/> Other (include details as necessary)		<input type="radio"/> Ministry of Foreign Affairs <input type="radio"/> Ministry of Health <input type="radio"/> Ministry of Education <input type="radio"/> Ministry of Trade <input type="radio"/> Ministry of Labour <input type="radio"/> Ministry of Immigration or Home Affairs <input type="radio"/> Other:	If Ministry of Health is not a signatory, did the Ministry of Health participate in the development of the agreement? <input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Ministry of Foreign Affairs <input type="radio"/> Ministry of Health <input type="radio"/> Ministry of Education <input type="radio"/> Ministry of Trade <input type="radio"/> Ministry of Labour <input type="radio"/> Ministry of Immigration or Home Affairs <input type="radio"/> Other:	If Ministry of Health is not a signatory, did the Ministry of Health participate in the development of the agreement? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know	j.i. Does the agreement include elements to benefit the health system of your country and the partner country(ies)? <input type="radio"/> Yes, has elements to benefit the health system of my country and partner country(ies) Please explain: <input type="radio"/> Yes , has elements to benefit the health system of my country only Please explain: <input type="radio"/> Yes, has elements to benefit the health system of partner country(ies) only Please explain: <input type="radio"/> No, does not contain elements to benefit health system of either country	j.ii. Does the agreement include elements on health worker rights and welfare? <input type="radio"/> Yes Please explain: <input type="radio"/> No

Add 10 rows

6.2 Please use the table below to describe the implementation of each of the active bilateral, regional or multilateral agreements or arrangements

a. Title of Agreement	b. Has the agreement been implemented? * <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Partially implemented <p>If no, proceed to next agreement or next question</p>	c. If agreement has been partially or completely implemented <p>Start year of implementation: *</p>	d. How many health personnel have left or entered your country through this agreement since its implementation? * <p>Category of personnel:</p> <p>Number of personnel:</p>	<p>If you answered yes in table 6.1 column j.i:</p> <p>e. Please explain if and how has the health system of your country benefitted from the agreement. *</p>	<p>If you answered yes in table 6.1 column j.i:</p> <p>f. Please describe if and how the health system of other country(ies) has benefitted from the agreement. *</p>	<p>If you answered yes in table 6.1 column j.ii:</p> <p>g. Please explain if and how the provisions on health workers rights and welfare were implemented. *</p>	h. Please provide any other relevant information on the agreement (e.g., context, positive elements, gaps and lessons learnt).	i. Full text of the agreement and associated documents (implementation plan, progress report, implementation report, evaluation report, etc.) <p>Upload document(s)</p>	<p>If any document uploaded</p> <p>j. Do you agree to make this available in the WHO repository on bilateral agreements that will be publicly available? *</p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No
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Add 10 rows

Responsibilities, rights and recruitment practices

7. If your country employs/hosts international health personnel to work in the health and care sectors, which legal safeguards and/or other mechanisms are in place for migrant health personnel and to ensure that enjoy the same legal rights and responsibilities as the domestically trained health workforce?

Please check all items that apply from the list below (*):

Measures	Yes	Please describe
Migrant health personnel are recruited using mechanisms that allow them to assess the benefits and risk associated with employment positions and to make timely and informed decisions on the employment.	<input type="checkbox"/>	
Migrant health personnel are hired, promoted and remunerated based on objective criteria such as levels of qualification, years of experience and degrees of professional responsibility on the same basis as the domestically trained health workforce.	<input type="checkbox"/>	
Migrant health personnel enjoy the same opportunities as the domestically trained health workforce to strengthen their professional education, qualifications and career progression.	<input type="checkbox"/>	
Institutional arrangements are in place to ensure safe migration/ mobility and integration of migrant health personnel.	<input type="checkbox"/>	
Measures have been taken to promote circular migration of international health personnel	<input type="checkbox"/>	Mandatory if yes
Other measures (including legal and administrative) for fair recruitment and employment practices of foreign-trained and/or immigrant health personnel (please provide details)	<input type="checkbox"/>	Mandatory if yes
No measures in place	<input type="checkbox"/>	
Not applicable – does not host/employ foreign health personnel	<input type="checkbox"/>	

8. If health personnel from your country are working abroad in the health and care sectors, please provide information on measures that have been taken or are planned in your country to ensure their fair recruitment and employment; safe migration; return; and diaspora utilization in your country, as well as difficulties encountered.

Please check all items that apply from the list below (*):

Measures	Yes	Please describe
Arrangements for fair recruitment	<input type="checkbox"/>	Mandatory if yes

Arrangements for decent employment contracts and working conditions in destination countries	<input type="checkbox"/>	Mandatory if yes
Arrangements for safe mobility	<input type="checkbox"/>	Mandatory if yes
Arrangements for return and reintegration to the health labour market in your country	<input type="checkbox"/>	Mandatory if yes
Arrangements for diaspora engagement to support your country health system	<input type="checkbox"/>	Mandatory if yes
Other	<input type="checkbox"/>	Mandatory if yes
No measures in place	<input type="checkbox"/>	
Not applicable – health personnel from my country are not working abroad	<input type="checkbox"/>	

International migration and mobility pathways for health personnel

9.1 If your country hosts international health personnel to work in the health and care sector, how do they come to your country? (check all that apply)

	Direct (individual) application for education, employment, trade, immigration or entry in country	Government to government agreements that allow health personnel mobility	Private recruitment agencies or employer facilitated recruitment	Private education/ immigration consultancies facilitated mobility	Other pathways (please specify) (written comment)	Which pathway is used the most? <i>Please include quantitative data if available.</i> (written comment)
Doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Midwives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other occupations (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

9.2 If health personnel from your country work/study abroad, how do they leave your country? (check all that apply)

	Direct (individual)	Government to	Private recruitment	Private education/	Other pathways	Which pathway is
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	application for education, employment, trade, immigration, or entry in the destination country	government agreements that allow health personnel mobility	agencies or employer facilitated recruitment	immigration consultancies facilitated mobility	(please specify) (written comment)	used the most? <i>Please include quantitative data if available.</i> (written comment)
Doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Midwives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other occupations (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Data on international health personnel recruitment & migration

Improving the availability and international comparability of data is essential to understanding and addressing the global dynamic of health worker migration. Please consult with your NHTA focal point, if available, to ensure that data reported below is consistent with NHTA reporting³.

(For details on your country's NHTA focal point, please refer to the electronic version of the NRI or contact WHOGlobalCode@who.int)

10 Does your country have any mechanism(s) or entity(ies) to maintain statistical records of foreign-born and foreign-trained health personnel? (*)

- ☐ Yes
- ☐ No

If no, please proceed to 11.

If yes,

10.1 Where are the records maintained? (check all that apply)

- ☐ Employment records or work permits
- ☐ Ministry of health personnel database
- ☐ Registry of health personnel authorized to practice
- ☐ Other

(Others: please specify)

10.2 Does the record include gender-disaggregated data on the foreign-born and/or foreign-trained health personnel?

³ The National Health Workforce Accounts (NHTA) can be defined as a system by which countries progressively improve the availability, quality, and use of health workforce data through monitoring of a set of indicators to support achievement of universal health coverage, the Sustainable Development Goals and other health objectives. Since its launch in 2017, the NHTA has fostered a harmonized approach for annual and timely collection of health workforce information and defined core indicators in support of strategic workforce planning and global monitoring. The NHTA Handbook contains a standardized set of health workforce indicators and can be accessed at <https://www.who.int/publications/i/item/9789240081291>

- ☐ Yes
☐ No

Inflow and outflow of health personnel

11. Do you have a mechanism to monitor the inflow and outflow of health personnel to/from your country? (check all that apply)

- ☐ Inflow
☐ Outflow
☐ No

If no, please proceed to 12.

If yes for inflow:

- ☐ Fill in the table below
☐ Share data in the NHWA platform (indicator 1-09) through NHWA focal point

11.1 How many foreign-trained or foreign-born health personnel were newly active (temporarily and/or permanently) in your country in the past three years (inflow)?

	Doctors	Nurses	Midwives	Dentists	Pharmacists	Remarks
Data Source (e.g. Regulatory authority, immigration records, work permits, etc.) <i>Please ensure data source consistency for each category of personnel for the three years</i>						
2021						
2022						
2023						

If yes for outflow:

- ☐ Fill in the table below
☐ Share data in the NHWA platform (indicator 1-10) through NHWA focal point

11.2 How many domestically trained health personnel left your country in the past years for temporary or permanent migration (outflow)?

	Doctors	Nurses	Midwives	Dentists	Pharmacists	Remarks
Data Source (e.g. letters of good standing, emigration records, government						

Upload document

12.1 Consolidated stock on health personnel, disaggregated by country of training and birth

Please provide data on the stock of active health personnel in your country by one of the following ways (*):

- If data shared in the NHTSA platform or data not available, please proceed to the next question.**

[illegible]

12.1.1 If you have any document with information on stock of active health personnel for your country, their distribution by place of training and place of birth, please upload

Upload document

12.2 Please provide data on the top 10 countries of training for foreign-trained health personnel in your country.

This information can be provided by one of the following two options:

- **Fill in the table below**
- **Share data in the NHWA platform through NHWA focal point**

	Doctors	Nurses	Midwives	Dentists	Pharmacists
Total foreign-trained personnel					
1. Country of training					
Number of personnel					
2. Country of training					
Number of personnel					
.....					
10. Country of training					
Number of personnel					
*Source (e.g., professional register, census data, national survey, other)					
*Year of data (Please provide the data of the latest year available)					
Remarks					

12.2.1 If you have any document with information on the distribution of foreign-trained health personnel for your country by their country of training, please upload.

Upload document

Technical and financial support

13. Has your country provided technical or financial assistance to any source countries or countries in the [WHO health workforce support and safeguards list 2023](#), or other low- and middle-income countries on health workforce development, health system strengthening, or for implementing [other recommendations of the Code](#) (e.g., strengthening data, information and research on health workforce for translation to policies and planning, etc.) (*)

- ☐ Yes
- ☐ No

If no, please proceed to 14

If yes, please provide additional information below (*) (check all that apply):

- ☐ 13.1 Support for health workforce development (planning, education, employment, retention) (if checked at least one row mandatory)

Country supported	Type of support (please specify)

- ☐ 13.2 Support for other elements of health system strengthening (service delivery; health information systems; health financing; medical products and technology; and health leadership and governance) (if checked at least one row mandatory)

Country supported	Type of support (please specify)

- ☐ 13.3 Other areas of support: (if checked at least one row mandatory)

Country supported:
Support Area:
Type of support:
Country supported:
Support Area:
Type of support:
Country supported:

Support Area:
Type of support:

14. Has your country received technical or financial assistance from any WHO Member State or other stakeholders (e.g., development partners, other agencies) for health workforce development, health system strengthening, or for implementing [other recommendations of the Code](#) (e.g., strengthening data, information and research on health workforce for translation to policies and planning, etc.)? (*)

- ☐ Yes
- ☐ No

If no, please proceed to 15.

If yes, please provide additional information below (*) (check all that apply):

- ☐ **14.1 Support for health workforce development (planning, education, employment, retention) (if checked at least one row mandatory)**

Supporting country/entity	Type of support (please specify)

- ☐ **14.2 Support for other elements for health system strengthening (service delivery; health information systems; health financing; medical products and technology; and health leadership and governance) (if checked at least one row mandatory)**

Supporting country/entity	Type of support (please specify)

- ☐ **14.3 Other areas of support: (if checked at least one row mandatory)**

Supporting country/entity:
Support Area:
Type of support:
Supporting country/entity:
Support Area:
Type of support:
Supporting country/entity:
Support Area:
Type of support:

15. Please list in priority order, the three main constraints to the ethical management of international migration in your country and propose possible solutions:

Main constraints	Possible solutions/recommendations
15.1a	15.1b
15.2a	15.2b
15.3a	15.3b

16. What support do you require to strengthen implementation of [the Code](#)? (*)

Area of support	Yes	Description
Support to strengthen data and information on health personnel	<input type="checkbox"/>	
Support for policy dialogue and development	<input type="checkbox"/>	
Support for the development of bilateral/multi-lateral agreements	<input type="checkbox"/>	
Others	<input type="checkbox"/>	Mandatory if checked
No support required	<input type="checkbox"/>	

17. Considering that [the Code](#) is a dynamic document that should be updated as required, please provide reflections from your country on the past 14 years since the resolution on the Code.

Please comment on if/how the Code has been useful to your country. (*)	Please describe	
Do any articles of the Code need to be updated?	<input type="radio"/> Yes <input type="radio"/> No	Please describe
Does the process of reporting on Code implementation and the review of the Code relevance and effectiveness need to be updated?	<input type="radio"/> Yes <input type="radio"/> No	Please describe
Please comment on the WHO health workforce support and safeguards list (e.g. if your country is included in the list, how has that affected you; if your country is reliant on international health personnel, how has the list affected you; if your country is not in the list, how has it affected you)	Please describe	

18. Submit any other complementary comments or material you may wish to provide regarding the international recruitment and migration of health personnel, as related to implementation of [the Code](#).

Please describe OR Upload (Maximum file size 10 MB)

