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REVIEW ARTICLE

The migration of doctors to and from Germany

T. Kopetsch

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Abstract
Aim To analyse the role of Germany in the context of the strong international migration of doctors. In doing so, the migration of German doctors abroad and foreign doctors to Germany is qualitatively and quantitatively presented.
Subjects and methods The annual statistical reports from the country's medical associations given to the Federal Medical Association were investigated on migratory movements. Furthermore, a survey on how many German doctors are working in these countries was done within relevant organisations in some European countries and the US.
Results Germany is affected by an international migration of doctors in two directions. German doctors are emigrating and as well foreign doctors are immigrating. The exchange is not balanced, Germany loses more doctors every year to foreign countries than it gains through immigration.
Discussion and conclusions The increasing emigration of German doctors reinforces the shortage of doctors in Germany. In addition, the functioning of the German health system increasingly depends on the immigration of foreign doctors.

Keywords Emigration of doctors · Immigration of doctors · Shortage of doctors

T. Kopetsch
KBV (Kassenärztliche Bundesvereinigung)–National Association of Statutory Health Insurance Physicians,
Herbert-Lewin-Platz 2,
10623 Berlin, Germany

T. Kopetsch (✉)
National Association of Statutory Health Insurance Physicians,
Herbert-Lewin-Platz 2,
10623 Berlin, Germany
e-mail: tkopetsch@kbv.de

Introduction

Many countries that until a few years ago were reporting a glut of doctors are now complaining of a shortage. Germany is one of them. Two separate developments are responsible for this: whilst there is an ever-increasing proportion of older doctors in the German medical profession, the supply of new young doctors is drying up (see Kopetsch 2005). The migration of doctors from and to Germany must be seen in this context. Many German doctors are emigrating because they find their working conditions intolerable. Surveys show that German doctors have three main motives for either emigrating or ceasing to practise curative medicine altogether. The first of these is the level of remuneration, which they consider inadequate for the services they perform. The second is their experience that medical practice allows them too little time for their families and leisure pursuits. Their third motive is the increasing bureaucracy and administrative burden faced by medical practitioners (see Ramboll Management 2004).

This shortage of doctors, which has now become a global phenomenon, is linked to a variety of migrations. Some countries, such as the UK and the Scandinavian countries, whose training capacities are too small for the number of doctors required, are using aggressive government-sponsored recruitment campaigns to attempt to lure doctors from other countries, among them Germany, where they are sorely needed. In other countries affected by a shortage of doctors, private employment agencies have sprung up that specialise in recruiting doctors from countries with lower salary levels. Such agencies recruit doctors in Poland, the Czech Republic, Slovakia, and the Ukraine specifically for German, and particularly eastern German, hospitals, which are no longer able to find German doctors to fill their medical vacancies. As a result, the

immigration of foreign doctors to Germany has increased in recent years.

Germany is thus affected by this global shortage of doctors not only as a result of the emigration of German doctors, but also in terms of recruiting foreign doctors, with both trends increasing in recent years. This article will therefore analyse the migration of doctors to and from Germany and examine more closely the numbers involved.

Subjects and methods

The annual statistical reports on migratory movements, which were given to the Federal Medical Association by the country's medical associations, were investigated. Furthermore, a survey on how many German doctors are working in these countries was done within relevant organisations in some European countries and the US.

Results

Emigration of German Doctors

Almost every article published about the shortage of doctors in Germany mentions that large numbers of German doctors are emigrating to take up positions in curative medicine abroad. The statistics accompanying these articles attribute different figures on the number of German doctors actually already working abroad. The numbers quoted vary from 6,000 to 15,000, but exact details of the source of information are never given. For this reason, original research was carried out to establish the number of German doctors in the most important countries of emigration. Table 1 shows the results.

This research shows that there is firm evidence of almost 15,000 German doctors working abroad. The actual figure is no doubt higher as it was not possible to include all countries in the study.

Now that the number of German doctors working abroad has been established, the question arises as to whether German doctors have really been emigrating in increasing numbers or whether this perception is due to the growing attention the issue has received.

An initial indication that the number of doctors leaving Germany has indeed recently risen is provided by the increased demand for the "Certificate of Good Standing" (*Unbedenklichkeitserklärung*). German doctors who want to practise abroad need this document in order to obtain a local employment contract. Statistics collated by the regional medical council in the German state of Hesse show a veritable explosion in the demand for this certificate from Hessian doctors.

Table 1 German doctors practising abroad

Country	Year	Number	Source
Belgium	2007	338	Federal Public Service for Public Health
Denmark	2004	87	Schneider et al.
Finland	2006	65	Finnish Medical Council
France	2006	975	French Medical Council
UK	2007	4,129	General Medical Council
Ireland	2004	105	Medical Council Ireland
Italy	2001	538	Conférence Européenne des Ordres des Médecins
Luxembourg	2001	116	Conférence Européenne des Ordres des Médecins
The Netherlands	2001	584	Ministry of Health, Welfare and Sport
Norway	2004	650	Physician combination Norway
Austria	2007	1,457	Austrian physician chamber
Portugal	2004	106	Conférence Européenne des Ordres des Médecins
Sweden	2006	1,118	National Board of Health and Welfare
Switzerland	2007	2,565	Association of Swiss Doctors
Spain	2001	259	Conférence Européenne des Ordres des Médecins
USA	2005	5,830	American Medical Association
Total		19,054	

The number of applications for certificates of good standing rose by a factor of more than ten between the years 2000 (19 applications) and 2005 (104 applications in the first 6 months) (see Köhler et al. 2005). This is, of course, only an indication and not proof that the permanent emigration of German doctors has increased in recent years, since the certificate of good standing is also required when a doctor wants to practise abroad temporarily (e.g., for weekend shifts).

However, there is other evidence. For example, in 2000 only 593 German doctors were practising in France. By 2005 this number had risen to 879. A similar development can be perceived in Switzerland, where in December 2003 only 1,474 German doctors were practising, whereas by July 2005 there were already 1,926. In Austria, too, the number of German doctors rose from 547 in 2003 to 786 in 2004.

Until a few years ago, the emigration of German doctors was not recorded by the regional medical councils. Since 2001, however, the majority of medical councils has recorded this information and can provide the corresponding data for the outflow of German physicians. The analysis of this data is based on the data filed by these 14 regional medical councils supplemented by a projection for the missing data from the other three councils. The analysis

shows that in 2006 a total of 2,575 doctors who had originally practised in Germany moved abroad. Of these, 78% were German nationals. This represents an increase of 14% in the number of doctors leaving Germany compared with the preceding year. What is astonishing is that the destinations of preference were the German-speaking Switzerland and Austria: 1,106 doctors moved to these countries. By contrast, a total of only 264 doctors emigrated to Scandinavia and the United Kingdom, the countries which the public perceives as attracting increasing numbers of German doctors.

Emigration has accelerated in the last few years, the figure for 2001 being only 1,437 (Table 2). The highest percentage of doctors moving abroad was recorded in Baden-Württemberg and Berlin. By far the most popular country of destination is Switzerland (744), followed by Austria (272), the USA (225), and the UK (143).

We can therefore conclude that there is now sufficient verifiable evidence to prove that the emigration of German doctors has increased considerably in recent years and remains at a remarkably high level.

Migration of foreign doctors to Germany

Anyone trying to estimate or assess the number of foreign doctors in Germany encounters a variety of problems. Doctors who were born in Germany or came as young immigrants, received their schooling, and studied in Germany, but do not have German citizenship appear in the statistics as foreign doctors, although from a professional point of view they should actually count as German. This section of our study is concerned only with those doctors who completed their training in a foreign country and then moved to Germany. However, for the reason given above, it is not easy to generate statistics for this category of physician.

In order to be allowed to practise medicine in Germany a doctor requires a temporary permit (a so-called Berufserlaubnis or 'professional work permit') or a medical licence. Professional work permits are issued on the basis of Sect. 10 of the Federal Medical Regulations (BÄO-Bundesärzteordnung). This leaves the final decision to the discretion of the relevant regional authority, which is obliged to take account of decrees issued by the state government.

Table 2 German doctors moving abroad

Year	Number
2001	1,437
2002	1,691
2003	1,992
2004	2,731
2005	2,249
2006	2,575

Source: German Federal Medical Council

Professional work permits are only issued to foreign applicants if they have a professional qualification and also fulfil certain other conditions (e.g., the applicant is a recognised asylum-seeker, a refugee, is married to a German or an EU citizen). Foreign doctors with a professional work permit are not allowed to work independently, but only under supervision. Only a medical licence entitles the holder to practise independently. A licence is issued by the official authorities on the basis of Sect. 3 of the Federal Medical Regulations when the applicant is a German or EU citizen or qualifies as a special case. However, licences are usually only issued to applicants who have long been in the possession of a professional work permit and have already been practising in Germany for several years.

As Fig. 1 makes clear, there are currently 19,513 foreign doctors living in Germany. Of these 13,735, representing 70% of the total, have a medical licence. The remaining 30% practise on the basis of a 'section 10' professional work permit.

However, only 42% of foreign doctors come from the countries of the European Union, while 29% come from other European countries. Of all foreign doctors in Germany, 6,313, or fully 32%, come from the countries of the former east European communist bloc or from former Yugoslavia.

Until 2000 the number of foreign doctors practising in German was growing approximately in line with the general development in the number of doctors. This means that the inflow of foreign doctors has increased noticeably only in the last few years.

The number of foreign doctors who have settled in Germany can be estimated from the registrations of new doctors from abroad recorded by the regional medical councils. As Fig. 2 makes clear, immigration began to increase in 2001 and peaked at just under 2,000 doctors 2 years later. Since then the inflow of foreign doctors has eased. These figures confirm the observation that doctors seeking to emigrate from Eastern Europe are increasingly avoiding Germany and moving directly to the UK and Scandinavia.

The number of foreign doctors practising in Germany rose by a further 6.8% in 2006 (as you can see in Table 3), a growth rate that is thus significantly higher than the average of 2.5% for the years 1994 to 2001 and considerably above the growth rate of 1.2.% for professionally active doctors in general. At 8.5% the growth rate for foreign doctors working in hospitals is particularly high. However, the highest rates of increase for the growth in the number of foreign doctors in hospitals were recorded in the years 2001 to 2003, when they were 11.8%, 13.3%, and 12.3%, respectively.

Doctors migrating to Germany come primarily from Austria and the countries of eastern Europe (Figs. 3 and 4).

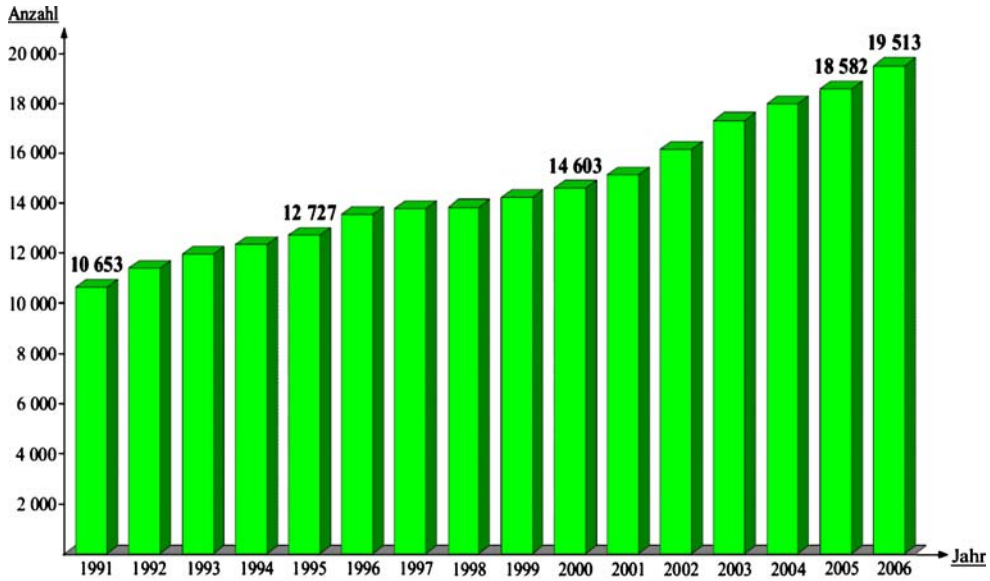

Fig. 1 Development in the number of foreign doctors in Germany

Accordingly, the growth rate in the number of east European doctors practising in Germany was very high: 15.9% in 2002, 16.3% in 2003, and 6.6% in 2004. Thus, the number of east European doctors practising in Germany has doubled since 1998, while the number of Austrian doctors has quadrupled since 1993.

A comparison of Fig. 4 with Sect. 2 of this study brings to light a curious phenomenon. While many Austrian doctors emigrate to Germany, Austria is the second most popular emigration destination for German doctors.

In 2006 immigrants accounted for 15% of the registrations of new doctors recorded by the regional medical councils. Although immigration affects the whole country, the percentage in eastern Germany is higher. For example, whereas in 2000 only 5.4% of all foreign doctors in Germany were practising in eastern Germany, in 2006 this proportion had already reached 12.4%.

Table 4 makes clear that the growth in the number of foreign doctors in eastern Germany is many times higher than in the rest of Germany. In the period from 2000 to 2006 the number of foreign doctors in the rest of Germany rose by 26%, while the corresponding figure for eastern Germany is considerably higher at 230%.

Table 5 shows us that between 2000 and 2006 some 1,200 east European doctors moved to eastern Germany and about the same number to the rest of the country. However, because the total number of doctors is much lower in eastern Germany this represents a much higher growth rate there.

The shortage of doctors in Germany is already being particularly keenly felt in hospitals, where many vacancies can only be filled by recruiting foreign doctors. There are reports of hospitals in eastern Germany where three quarters of the medical staff are foreign nationals. The provision of inpatient medical care in eastern Germany could no longer be maintained were it not for a corresponding immigration of east European doctors, especially from Poland, Russia, the Ukraine, the Czech

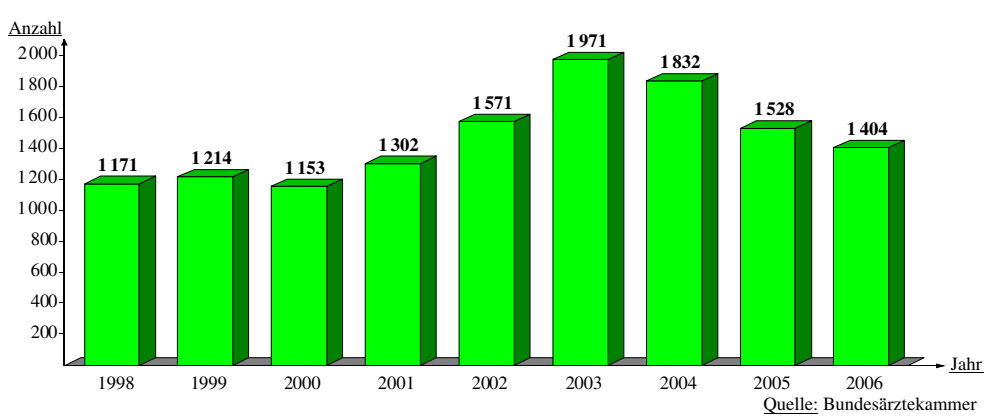

Fig. 2 Migration of foreign doctors to Germany

Table 3 Development in the number of foreign doctors in Germany

	Total		Of whom:	Practising		Hospital	
Year	Number	Increase over previous year in %	Not in medical practice	Number	Increase over previous year in %	Number	Increase over previous year in %
1998	13,836	0.5	2,847	10,989	−0.9	6,044	−2.3
1999	14,243	2.9	2,830	11,413	3.9	6,364	5.3
2000	14,603	2.5	2,952	11,651	2.1	6,581	3.4
2001	15,143	3.7	2,973	12,170	4.5	7,360	11.8
2002	16,160	6.7	2,980	13,180	8.3	8,338	13.3
2003	17,318	7.2	3,145	14,173	7.5	9,360	12.3
2004	17,991	3.9	3,210	14,781	4.3	10,042	7.3
2005	18,582	3.3	3,520	15,062	1.9	10,309	2.7
2006	19,513	5.0	3,433	16,080	6.8	11,186	8.5

Source: German Federal Medical Council

Republic, and Slovakia. The rates of increase for this group were 48.9% in 2002, 90.6% in 2003, and 43.1% in 2004.

An influx of foreign doctors is also needed in the rest of Germany. This can be seen from the fact that without immigrant doctors the number of hospital doctors in the rest of Germany would have sunk by 0.2%. This means that the health system in Germany is increasingly dependent on the 'import' of foreign doctors. Without this increased inflow of foreign doctors, which has been observable for the last 6 years, the ability of the German health system to function would be at risk.

Discussion and conclusions

Germany is affected by international migrations of doctors in both directions. German doctors are leaving, while at the same time foreign doctors are entering the country. However, the two movements do not cancel each other out. Every year Germany loses more doctors to emigration than she gains by immigration. The emigration of German doctors is motivated primarily by the higher salaries and better working conditions (regular working hours, flatter hierarchies, etc.) in the countries to which they move (see Ramboll Management 2004). Foreign doctors are primarily attracted by the higher level of pay offered in Germany compared with their homelands.

The situation of the migration of doctors to and from Germany is special, as only a few countries are simultaneously affected in such a substantial way by migration of doctors. Britain and the Scandinavian countries are the traditional immigration countries for doctors, as their training capacity is not sufficient to meet domestic needs. For this reason, in these countries there have been for some

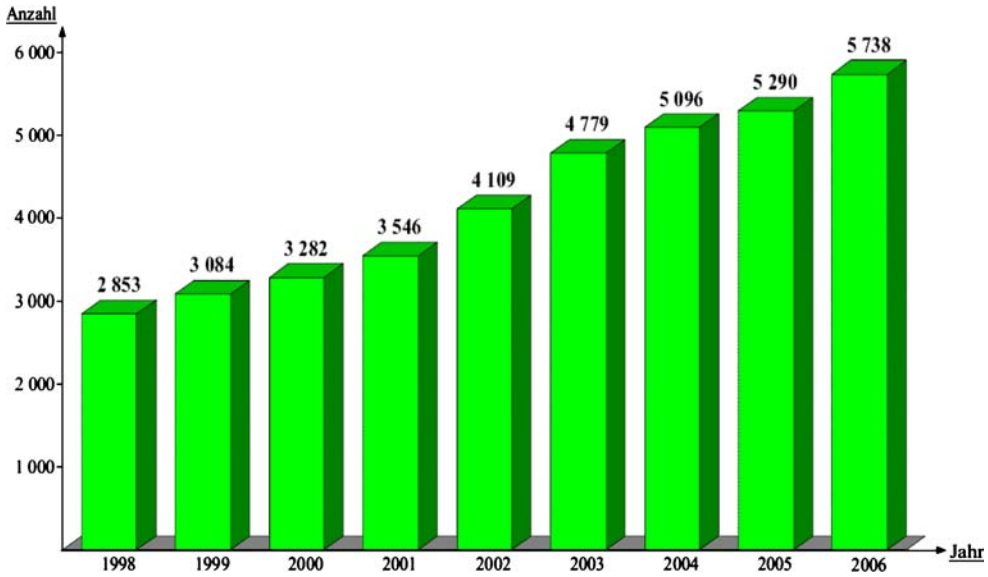

Fig. 3 Development in the number of practising East European doctors

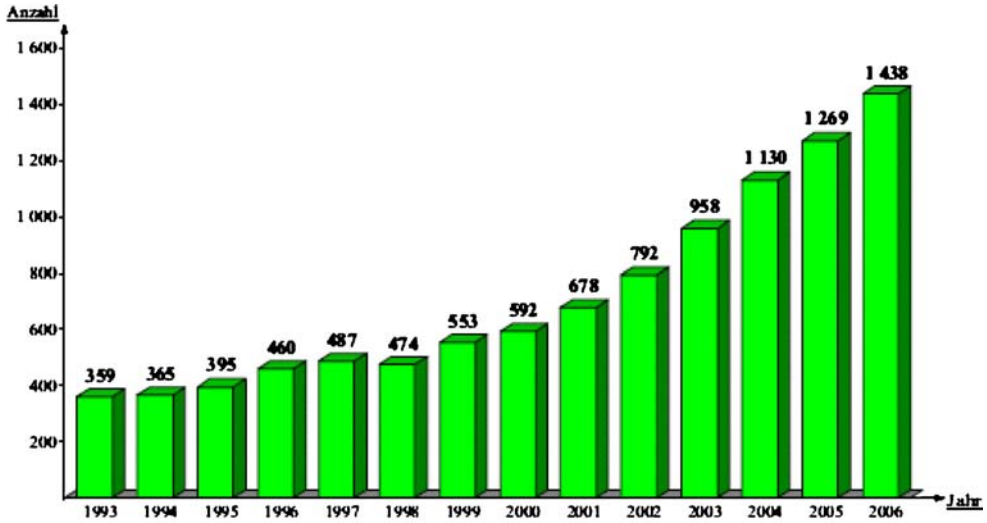

Fig. 4 Development in the number of practising Austrian doctor

time programmes of "structured immigration" that target integration into the workflow, including language acquisition. Those countries will hardly have any problems reported. For Germany, however, the phenomenon of a shortage of doctors and the related increased immigration of foreign doctors is still relatively young. Since no central integration programmes exist, but the immigration and labour absorption is decentralized, there are no specific programmes for structured training on the working procedures in German hospitals and for the systematic improvement of the German language. The often inadequate language skills cause problems, both for patients and for handling day-to-day dealings with the German colleagues. When having patient contact, it may cause misdiagnosis if the patient is not properly understood. The lack of knowledge of the written language often leads to the "paperwork" being done by the German colleagues, which again leads to displeasure.

The most important results of this study are that, firstly, the increasing emigration of German doctors is aggravating the shortage of doctors. Secondly, it can be seen that the proper functioning of the German health system is increasingly dependent on the immigration of foreign doctors.

The lack of doctors in Germany will continue to worsen. First of all, the unfavourable age structure means that many physicians continue to retire. Secondly, the conditions of medical activity, which hold many young doctors back from carrying out curative action, will not significantly improve. Thus, many German doctors will continue to move abroad, and Germany will depend on a high level of immigration. Since the lack of doctors and the willingly increased emigration of German doctors cannot be explained by one cause, one programme for effective counter-measures

Table 4 Development in the number of foreign doctors in eastern Germany compared to the rest of the country

	Western Germany (states constituting West Germany prior to reunification in 1989)		Eastern Germany (states constituting communist East Germany prior to reunification in 1989)	
Year	Number	Change over previous year in %	Number	Change over previous year in %
2000	10,969	2.1	682	2.1
2001	11,405	4.0	765	12.2
2002	12,217	7.1	963	25.9
2003	12,763	4.5	1,410	46.4
2004	12,956	1.5	1,825	29.4
2005	13,034	0.6	2,028	11.1
2006	13,821	6.0	2,259	11.4

Source: German Federal Medical Council

Table 5 Development in the number of east European doctors in Germany

	Western Germany		Eastern Germany	
Year	Number	Change over previous year in %	Number	Change over previous year in %
2000	2,935	6.0	347	9.8
2001	3,185	8.5	361	4.0
2002	3,598	13.0	511	41.6
2003	3,899	8.4	880	72.2
2004	3,863	−0.9	1,233	40.1
2005	3,937	1.9	1,353	9.7
2006	4,233	7.5	1,505	11.2

Source: German Federal Medical Council

is not sufficient. A whole set of programmes is necessary to raise the attractiveness of the medical profession in Germany again.

Conflict of interest The author discloses any relevant associations that might pose a conflict of interest.

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