

Abroad Migration Intention Among Nursing Students in a Nursing Campus of Nepal

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ABSTRACT

Introduction

The migration of nurses abroad, especially after graduation, resulting in brain drain, has a significant impact on the health systems of developing countries and public health delivery. Different push and pull factors have been major causes of overseas migration among nurses. The objective of the study was to determine nursing students' abroad migration intentions.

Methods

A descriptive cross-sectional design was used, with a total enumerative sampling technique to select 119 nursing students of Maharajgunj Nursing Campus, Institute of Medicine. Data was collected using a self-administered questionnaire from April 28, 2024, to May 11, 2024. The data were analyzed in SPSS version 25 using both descriptive and inferential statistics.

Results:

The majority (60.5%) of the nursing students had migration intention. The major push factors were low salaries (93.3%), lack of personal and professional development (88.2%), lack of a good working environment (86.6%), and, lastly, family pressure (16.8%) and marriage (16.0%). The primary pull factors were personal and professional development (93.3%), high salary (88.2%), and future security of family (88.2%), and the least were availability of modern health facilities (79.8%) and political stability (65.5%). The migration intention was associated with age ($p=0.000$), marital status ($p=0.000$), educational level ($p=0.000$), family monthly income ($p=0.005$), and financing for the current education ($p=0.017$).

Conclusion:

The study concludes that the majority of nursing students have migration intentions. Young, single nurses with a Bachelor's degree are the most likely to move abroad. So, the policymakers should prioritize retaining nurses by addressing major problems to strengthen the health care system.

Keywords

Abroad; intention; migration; nursing students

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INTRODUCTION

Health care professionals, especially nurses, migrating towards developed countries is a growing and long-standing trend that is driven by many push factors, such as poor wages, poor infrastructure, unemployment, limited access to career growth, and pull factors from developed countries, such as higher salaries, advanced facilities, better working conditions, career advancements, job security, and quality of life.^{1,2} Although the Nepal Nursing Council (NNC) registry lists over 128,840 professionals, this figure masks a critical 'domestic active' shortage, as high turnover and systemic inability to integrate graduates into permanent civil service positions continue to undermine national health service delivery.¹⁻⁴ It further showed that nurse outmigration rose sharply after 2002, and an estimated 20,000-45,000 nurses have left since then.⁵ Around 10,000 nurses may be leaving the country each year. Primary destinations are the UK, USA, Australia, and Canada.⁶ While production volume is high, the public sector's staffing is still governed by the functionally obsolete 1991 Organization and Management (O&M) survey, which covers less than 50% of the technical requirement needed to meet 2031 health targets, resulting in dangerous nurse-to-patient ratios of 1:20 rather than the recommended 1:6.⁴

Nurses in Nepal have engaged in a persistent, long-term struggle for dignity and ethical recognition, challenging a healthcare system historically marked by profound inequality for which they are frequently protesting. Recent nationwide protests led by them in private hospitals and medical colleges in October 2025 brought to light Nepal's ongoing dispute over fair and dignified remuneration for nurses.^{5,8-16}

Hence, this study was done to explore the nursing students' abroad migration intentions.

METHODS

A descriptive cross-sectional design was used for the study. The study was conducted in Maharajgunj Nursing Campus. Currently, it offers Bachelor of Science in Nursing (B.Sc. Nursing), Bachelor of Nursing Science (BNS), Bachelor of Midwifery Science (BMS), and Master of Nursing (MN) programs. The study population comprised 390 students

at Maharajgunj Nursing Campus, of whom 72 were graduate students, and 318 were undergraduate students. All final-year students who met the inclusion criteria were enrolled in the study. The Total enumeration of the population was 119, which consists of Master in Nursing 2nd year: 32, Bachelor of Nursing Science 3rd year: 48, Bachelor of Science in Nursing 4th year: 39

A semi-structured Self-administered questionnaire was developed by the researcher and used to collect the data. The instrument consisted of three parts: Part I included 13 questions on respondents' socio-demographic information; Part II included nine questions on overseas migration intention. Part III included two questions on push and pull factors for the intention to migrate abroad. The adequacy of the instrument's content was maintained through an extensive literature review, consultation with the research expert, and a subject-matter expert. Pretesting of the instrument was conducted with 10% of the sample (12 students) from Janamaitri Foundation Institute of Health Science, Lalitpur, to ensure the test instrument's usability.

The ethical approval was obtained from the Institutional Review Committee (IRC) of Tribhuvan University, Institute of Medicine. Administrative permission was obtained from the Maharajgunj Nursing Campus. Written informed consent was taken from each respondent before data collection. The total duration of data collection was 2 weeks from April 28, 2024, to May 11, 2024.

The respondents' information was kept confidential and used solely for study purposes. The respondent's anonymity was maintained by providing a code number instead of their name. All the collected data was checked for completeness, consistency, and accuracy. The collected data were reviewed, organized, and coded before data entry. The coded data were entered into a spreadsheet and analyzed using the Statistical Package for the Social Sciences (SPSS) version 25.

The data were analyzed using both descriptive (frequency, percentage, mean, and standard deviation) and inferential (Chi-square test) statistics to assess the association between abroad migration intention and selected variables.

RESULTS

Most of the respondents (79.8%) belonged to the age group (21-30). The mean age was 27.30, and the standard deviation was 5.625. Among all respondents, the major ethnicities were Brahmin/Chhetri (58.8%) and Hindu (89.5%), with Hindu as the majority. Less than half of the respondents (40.3%) were in BNS's third year, (32.6%) were in BSc Nursing's 4th year, and (26.9%) were in MN's 2nd year. The majority of respondents (66.4%) were single, more than half had a nuclear family (68.1%), 47.9% had a family income of more than NRs 60000, 43.7% had a family income of NRs 25000-60000, and 8.4% had a family income of less than NRs 25000. More than two-thirds (78.2%)

had full scholarships to fund their present education. About (53.8%) of respondents completed their secondary school in private schools, government schools (43.7%), and public-private schools (2.5%). The educational status and occupation of the respondents' parents show that more than one-fourth of the respondents' parents had completed secondary education, with fathers (42.9%) and mothers (37.0%) being the most common. The parents of respondents who could not read or write were father (5.0%) and mother (13.4%). About 31.1% of the respondents' fathers were involved in business, while only 3.4% were in daily wage work. Similarly, about 72.3% of the respondents' mothers were homemakers.

Table 1. Intention of Respondents after Graduation from Nursing Program (n=119)

Variables	Number	Percent
Abroad Migration Intention	72	60.5
Preferred Country for Migration (n=72)		
USA	48	66.7
Australia	18	25.0
United Kingdom	3	4.2
Canada	2	2.8
New Zealand	1	1.4
Availability of Information Regarding Abroad Migration* (n=72)		
Self	47	65.3
Friends Abroad	34	47.2
Friends in Nepal	30	41.7
Family Members/ Relatives Abroad	29	40.3
Consultancy/ Agency in Nepal	24	33.3
Family Members/ Relatives in Nepal	21	29.2
Start to have Intention for Abroad Migration (n=72)		
Before nursing education	11	15.3
After nursing education	33	45.8
During nursing education	28	38.9
Duration of Planning to Migrate Abroad (n=72)		
Immediately after completing the study	2	2.8
Within 1 year	12	16.7
1-5 years	58	80.6
Currently Working on Migration Process (n=72)	2	2.8
Proposed Source of Funding for Migration (n=72)		
Family support	37	51.4
Personal effort	26	36.1
Undecided	9	12.5
Likely to Return to Work in Nepal once after Migration (n=72)		
Highly likely	8	11.1
Somewhat Likely	25	34.7
Neither likely nor unlikely	17	23.6
Somewhat Unlikely	15	20.8
Highly unlikely	7	9.7

*Multiple Responses

Table 1 indicates that a majority of respondents (60.5%) intended to migrate abroad after graduating from their nursing program, while 39.5% had no such plan. The USA was the most preferred destination (66.7%). Most respondents planned to migrate within 1–5 years after graduation (80.6%). Currently, only 2.8% were actively engaged in the migration process, while 97.5% were not. Regarding return intentions, 34.7% were somewhat likely to return to work in Nepal after migration.

Table 2. Primary Reason for Working in Nepal among Respondents* (n=47)

Variables	Number	Percentage
To be Close to Family/Home	30	63.8
Providing Services in the Country	7	14.9
Compulsory because of Scholarship Terms and Conditions	6	12.8
Social Prestige	4	8.5
Government Employee	4	8.5
Single Child	1	2.1
Family Rejection for Abroad Migration	1	2.1

*Multiple Responses

Table 2 shows the main reasons for working in Nepal, which were not intended for abroad migration, were to be close to family and home (63.8%), provide services in the country (63.8%), compulsory because of scholarship terms and conditions (12.8%), etc.

Table 3. Distribution of Respondents According to Push and Pull Factors for Intend to Migrate from Nepal *(n=119)

Variables	Number	Percentage
Push Factors		
Low Salary in Nepal	111	93.3
Lack of Personal and Professional Development	105	88.2
Lack of a Good Working Environment in Nepal	103	86.6
Lack of Job Opportunities	97	81.5
Political Instability	89	74.8
Poor Healthcare System	84	70.6
Poor Nursing Leadership	81	68.1
Personal Ambition	67	56.3
Lack of Modern Facilities in Nepal	64	53.8
Peer Influence or Pressure	37	31.1
Family Pressure	20	16.8
Marriage	19	16.0
Pull Factors		
Personal and Professional Development	111	93.3
High Salary	110	92.4
Future Security of Family	105	88.2
Better Working Conditions and Environment	102	85.7
High Living Standard	102	85.7
Better Job	98	82.4
Available Modern Health Facilities	95	79.8
Political Stability	78	65.5

*Multiple Response

Table 3 shows the distribution of respondents according to push and pull factors for abroad migration, where 93.3% of respondents agreed that low salary was a push factor. Similarly, other push factors

were lack of personal and professional development (88.2%), lack of good working environment in Nepal (86.6%), lack of job opportunities (81.5%), political instability (74.8%), poor healthcare system (70.6%), etc. Similarly, personal and professional development (93.3%) was the main pull factor for overseas migration among the respondents. Similarly, other pull factors for abroad migration were high salary (92.4%), future security of family (88.2%), better working conditions and environment (85.7%), etc.

Table 4. Association between Respondent Abroad Migration Intention with Selected Socio-Demographic Variables (n=119)

Variables	Abroad Migration Intention		Chi Square	p value
	Yes No. (%)	No No. (%)		
Age Group			26.163	0.000*
≤27	58 (78.4)	16 (21.6)		
>27	14 (31.1)	31 (68.9)		
Marital Status			23.462	0.000*
Single	60 (75.9)	19 (24.1)		
Married	12 (30.0)	28 (70.0)		
Education Level			28.573	0.000*
Master's in Nursing	8 (25.0)	24 (75.0)		
Bachelor of Nursing Science	30 (62.5)	18 (37.5)		
Bachelor of Science in Nursing	34 (87.2)	5 (12.8)		
Type of Family				0.649**
Nuclear	51 (63.0)	30 (37.0)		
Joint	20 (54.1)	17 (45.9)		
Extended	1 (100.0)	0 (0.0)		
Monthly Income of Family			10.715	0.005*
Less than NRs 25000	4 (40.0)	6 (60.00)		
NRs 25000-60000	40 (76.9)	12 (23.1)		
More than NRs 60000	28 (49.1)	29 (50.9)		
Financing of Education			5.717	0.017*
Paying	21 (80.8)	5 (19.2)		
Full Scholarship	51 (54.8)	42 (45.2)		

*Significant association ($p < 0.05$)

** Fischer's Exact Test

Table 4 reveals a significant association between overseas migration intention and age, marital status, academic year, family monthly income, and respondents' educational financing.

DISCUSSION

This study examined the socio-demographic determinants influencing the intention to migrate abroad among nursing students at Maharajgunj Nursing Campus. The majority of participants were aged 21–30 years, predominantly Brahmin/Chettri and Hindu,

consistent with previous findings.¹⁷ Most were unmarried bachelor-level students, aligning with earlier research.^{5,6} Notably, 60.5% expressed intentions to migrate abroad, comparable to findings by Kadel and Bhandari¹⁸ and Jadhav and Roy¹⁹, but lower than the 92.5% reported by Poudel et al.²⁰ The most

preferred destinations were the USA and Australia, reflecting a persistent attraction to developed nations offering higher salaries, professional growth, and advanced healthcare systems.¹⁸

Most of the respondents (80.6%) in this study intended to migrate within 1-5 years of completing the nursing program; however, 16.7% intended to relocate within 1 year, which is different from the survey conducted by Munikar & Thapa²¹ where 40.50% had the intention of migrating within 1-3 years, followed by 29.70%, migrating within a year. These differences may be due to variations in the study population and settings. The current study shows that only 2.8% of respondents were working on the migration process now, although they are students; a similar survey conducted by Kadel & Bhandari in 2019¹⁸ found 6% had submitted college applications, 8.1% had registered for country-specific license examinations, and 9.1% had registered for language tests. The discrepancy may be due to the level of enrolled nurses and their eligibility to work abroad.

Among respondents, 34.7% said possibility to return to work in Nepal in future, and 9.7% were doubtful about returning to Nepal, while asking the reasons to respondents who want to stay in Nepal 63.8% said they want to stay with family, want to provide services to the country (63.8%), compulsory because of scholarship terms and conditions (12.8%), social prestige (8.5%), government employee (8.5%), single child (2.1%) and family rejection for abroad migration (2.5%). The finding was similar to that of the International Labor Organization study.²² This showed that the main reasons for working in Nepal were to be close to family and home (61.5%), to gain social prestige (45.5%), and to pursue better scholarship opportunities in Nepal (36.4%).

Present study find common push factors in Nepal are low salary (93.3%), lack of personal and professional development (88.2%), lack of good working environment (86.6%), lack of job opportunity (81.5%), political instability (74.8%), poor healthcare system (70.6%), poor nursing leadership (68.1%), which is similar to the study conducted in Mangalore India at 2018²⁶. This finding is also supported by the study conducted by Hashish & Ashour in 2020 at Egypt²³ The perceived push factors for migration included economic, social,

political, health system quality, professional, and work-related factors. Familiar pull factors of developed nations are personal and professional development (93.3%), high salary (92.4%), future security of family (88.2%), better working conditions and environment (85.7%), high living standard (85.7%), better job (82.4%), available of modern health facilities (79.8) and political stability (65.5%), similar findings showed by previous study conducted in Nepal at 2017¹⁷ and 2014²⁴ Where the primary pull factors were peer group influence, education and cultural effects, technology and information systems, better opportunities, good living standards, better security & satisfaction, better working conditions and salaries, a good political environment, and a secure future for the children and family.

The intention to migrate abroad is significantly associated with age, marital status, academic year, family monthly income, and financing of respondents' current education, which aligns with a study conducted by Goštautaitė et al. in Lithuania in 2018²⁵. The findings showed that age, gender, family abroad, number of children, internship abroad, and financial factors were significant factors influencing nurses' migration. Similarly, the findings of this study are supported by a 2023 survey conducted by Shrestha & Bhattarai in Birgunj, Nepal⁶. However, this study was limited to the single setting of the oldest campus of Nepal, relied on self-reported data, and the generalizability of findings may be affected. Still, it can portray the current situation of nurses migrating abroad and the familiar pull-and-push factors behind this trend. Policymakers are advised to focus on improving pay structures, career development opportunities, and workplace environments to retain skilled nursing professionals in the country.

CONCLUSION

Based on the study's findings, the majority of nursing students intend to migrate abroad. The major push factor for overseas migration among nursing students is low salaries, and the major pull factor is personal and professional development. The intention to migrate abroad tends to be associated with age, marital status, academic year, family monthly income, and the financing of respondents' education. The concerned authority should address these

factors to retain nursing professionals and strengthen the healthcare workforce.

CONFLICT OF INTEREST

The authors declare no relevant financial or non-financial competing interests.

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