Labour migration still difficult

By DTI

CEBU CITY, Philippines: Aiming to facilitate dental workforce mobility among member states of the Association of Southeast Asian Nations (ASEAN), a mutual recognition agreement (MRA) for dental practitioners was signed by member economies in 2009. However, almost a decade later, the ASEAN community still seems far from realising the unhindered movement of skilled professionals.

Among other factors, the implementation of the MRA has reportedly faced difficulties because of differences in national regulations. According to Rahmat Pramono, representative of Indonesia to the ASEAN, implementation of services by medical and dental practitioners are among the most difficult to negotiate because of the different systems of instruction and curricula followed in each country.

According to a Migration Policy Institute report, titled Open Windows, Closed Doors: Mutual Recognition Arrangements on Professional Services in the ASEAN Region, dental, medical and nursing MRAs are the least open of those signed by ASEAN member states. Unlike their counterparts in tourism, for which the framework automatically recognises competency certificates as issued at origin, health professionals interested in working in another ASEAN country have to follow a complex application process. After obtaining a licence from their respective professional regulatory agency and meeting MRA-related criteria, such as minimum years of experience, applicants are still faced with additional local requirements, which vary from country to country.

In an interview with Philippine newspaper SunStar, oral surgeon and implantologist Dr Steve Mark Gan, the Philippines’ representative to the MRA on dental practitioners, pointed out that members of the economic bloc are still apprehensive about allowing foreign dental professionals to practise in their respective countries. “It’s a tricky situation right now. It may take some time,” Gan said.

While Philippine dentists still cannot work freely in the ASEAN region, the country’s own products remain among the world’s best, drawing dental tourists from the US and Australia, Gan remarked.

In 2015, medical tourism in the Philippines generated US$3 billion in revenue from about 200,000 tourists, according to data from the Department of Tourism. In the ASEAN community, Singapore and Thailand are the country’s strongest competitors in the field, but services in the Philippines still cost 40 per cent less, Cebu Daily News recently reported.

In addition to the MRA for dental practitioners, the Philippines has signed agreements for eight other professions, including surveying, engineering, nursing, architecture and accountancy.

However, so far, the ASEAN bloc has only managed to implement the MRAs for engineers, architects and tourism professionals.

Addressing the untapped potential of the MRAs to build and utilise human capital in the long term, Dovelyn Rannveig Mendoza, a senior policy analyst at the Migration Policy Institute and lead author of the above-mentioned report, said: “The greatest achievement of the ASEAN MRAs so far is rather indirect: The signing of these agreements has inspired a significant capacity-building effort in the less-advanced ASEAN Member States to upgrade professional regulation and training standards.”