

# Executive summary

## Main trends

Immigration flows are on the rise in most OECD countries. Preliminary data for 2014 suggest that permanent migration flows increased sharply for the first time since 2007 and are back to their pre-crisis level, with 4.3 million permanent entries to the OECD. Family reunification migration accounted for 35% of all permanent migration to OECD countries in 2013 and free movement for 30%.

Germany is consolidating its position as one of the main immigration countries, now second only to the United States in the number of migrants it receives. Overall, in 2013 the European Union (EU) received as many permanent migrants from outside the EU as the United States did from all countries. One in ten new immigrants to the OECD is Chinese and 4.4% are from India. Romania and Poland rank second and third, with 5.5% and 5.3% of overall inflows to OECD countries.

In 2014, the number of new asylum seekers in OECD countries rose by 46%, exceeding 800 000 for the first time since the beginning of the 1990s, the second highest level in 35 years. Preliminary data suggest that 2015 will also reach a historical high. The top destination countries are Germany, the United States, Turkey, Sweden and Italy. France is now sixth, down from its longstanding position among the top three destination countries.

A number of OECD countries have fundamentally revised their migration legislation in the past few years, responding to evolving patterns of migration and to the changing political environment. Most changes tend towards restrictions: i) skilled workers are still wanted, but countries are picking them more selectively; ii) investors and entrepreneurs are sought after, but are increasingly scrutinised; iii) some family immigration procedures are being eased, but the general trend is still towards restriction; iv) new measures have been adopted in response to the humanitarian crisis in the Mediterranean region; and v) actions to strengthen border controls, encourage voluntary returns and fight against illegal employment of foreign workers have been implemented.

For the vast majority of countries, the labour market outcomes of migrants and natives have been either stable or improving in recent years. However, some countries which have not yet recovered from the crisis (Greece, Italy and Slovenia) have seen migrants disproportionately affected. Overall, during 2011-14 the average employment rate of migrants in the OECD area increased slightly more for migrants than for natives, although no significant change in their unemployment rate was seen.

While targeted integration measures continue to be widely used, some countries with a longstanding tradition of hosting immigrants are trying to mainstream integration measures into all aspects of economic and social life. Many countries are placing particular emphasis on the recognition of foreign qualifications and on lifelong learning, in particular for those who lack basic skills.

## International mobility of health workers

In total, the number of migrant doctors and nurses working in OECD countries has increased by 60% since 2004. The trend mirrors the general increase in immigration to OECD countries – particularly that of skilled workers. It also points to the sizeable contribution that immigrants made to the rise in numbers of healthcare workers in OECD countries in the 2000s, although the very latest data show a fall in inflows in a number of countries.

Asian countries are the world's top suppliers of emigrant doctors and nurses, but there is also increasing mobility between OECD countries, chiefly because of growing intra-EEA flows. Small and island countries, however, still show the highest emigration rates.

In 2010/11, doctors and nurses who had emigrated to the OECD area from countries affected by severe shortages of healthcare professionals, as defined by the World Health Organisation (WHO), accounted for 20% of estimated healthcare workforce needs in their countries of origin, compared with 9% in 2000/01.

Against the background of burgeoning international student mobility, the number of medical students pursuing their education abroad has soared in recent years. This is the result of the increasingly international nature of medical studies, which is due both to unmet demand in countries that restrict access to healthcare education and training and to the growing offer of places in medical school in others. In coming years, the number of international medical graduates can be expected to continue rising.

## Main findings

### ***Migration is rising overall and has returned to its pre-crisis level***

- The total foreign-born population in OECD countries stood at 117 million people in 2013, corresponding to 35 million (40%) more than in 2000.
- Preliminary 2014 data suggest that permanent migration flows to the OECD reached 4.3 million permanent entries to the OECD, a 6% increase compared to 2013. In addition, most categories of temporary migration also increased.
- China and India remain important origin countries, but Poland and Romania are also significant, due to increased intra-EU mobility.
- Asylum seekers in OECD countries reached an historical high in 2014 and levels continue to increase in 2015.

### ***Some positive signs regarding labour market outcomes of immigrants***

- Overall, the average employment rate of immigrants in the OECD area increased by 1.3 percentage points during 2011-14, compared with 0.5 percentage points for the native population.
- The unemployment rate did not change much, remaining on average 3.3 points higher for foreign-born than for native-born.
- In the OECD area, the rise of long-term unemployment for migrants has slowed down recently, but it still affects 6% of the migrant labour force.

***The growing importance of health worker migration***

- The share of foreign-born among doctors grew in most countries between 2000/01 and 2010/11 from an average (across 23 countries) of 19.5% to more than 22%, while that among nurses rose from 11% to 14.5% (22 countries).
- In 2010/11, foreign-born doctors and nurses practicing in OECD countries made up about 5% of all healthcare professionals worldwide.
- In 2012/14, foreign-trained doctors and nurses accounted for 17% and 6%, respectively, of the healthcare workforce in the 26 countries for doctors and 24 countries for nurses for which data were available.
- Between 2000/01 and 2010/11 the number of doctors and nurses emigrating to OECD countries from countries with severe shortages in health workers grew by more than 80%.



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