

HEALTH PROFESSIONS EDUCATION AS A NATIONAL INDUSTRY:  
FRAMING OF CONTROVERSIES IN NURSING EDUCATION AND MIGRATION  
IN THE PHILIPPINES

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## **ABSTRACT**

**LEAH E. MASSELINK: Health Professions Education as a National Industry: Framing of Controversies in Nursing Education and Migration in the Philippines**  
(Under the direction of Shoou-Yih Daniel Lee)

During the past few decades, the nursing workforce has been in crisis in the United States and around the world. An aging work force and high rates of burnout and turnover has caused a global shortage of nurses of unprecedented proportions. Many health care organizations in developed countries have resorted to recruiting nurses from other countries in order to maintain acceptable staffing levels. The Philippines is the largest source country for foreign-trained nurses in the United States and an important supplier of nurses worldwide. Exporting nurses has been a long-standing economic strategy for the Philippine government, despite the fact that the Philippines' domestic health system is weak and existing supplies of health workers are poorly distributed. The Philippine nursing profession is now aimed more at global markets than supplying domestic needs. Despite longstanding awareness of the "internationalization" of the Philippine nursing profession, the logics and thought processes that underlie the phenomenon are poorly understood. This study aims to uncover the discursive construction of nurse migration by various stakeholders ("migrant institutions") through case studies of two recent controversies in nursing education and migration in the Philippines: a leakage of answers on the nursing licensure exam and the inclusion of nurses in a trade agreement with Japan. It employs frame analysis of the newspaper coverage of the two controversies and key

informant interviews of government, health sector, education and professional organization representatives to examine how the priorities of economic development, migrants' rights and professional development of nurses are debated in the Philippines. The study finds broad support for interpretations of the controversies that position Filipino nurses as export products on the global market, which are linked to their professional development and often minimize concerns about their rights as migrants. It demonstrates the domestic importance of protecting the Philippine "brand" of nurses, links nursing professional development to Philippine economy and nation building, and challenges "brain drain" understandings of health professional migration. It also makes a case for approaches which account for the role of migrant institutions in shaping public understanding and policy decision-making related to migrants and migration.

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## LIST OF ABBREVIATIONS

ADPCN	Association of Deans of Philippine Colleges of Nursing
ANSAP	Association of Nursing Service Administrators of the Philippines
BES	Bureau of Employment Services
BON	Board of Nursing
BSN	Bachelor of Science in Nursing
CFO	Commission on Filipinos Overseas
CGFNS	Council on Graduates of Foreign Nursing Schools
CHED	Commission on Higher Education
DOH	Department of Health
DOLE	Department of Labor and Employment
EVP	Exchange Visitor Program
GDP	Gross Domestic Product
GMA	Gloria Macapagal Arroyo
IT	Information Technology
JPEPA	Japan-Philippines Economic Partnership Agreement
JNA	Japanese Nurses Association
MT	<i>Manila Times</i>
NBI	National Bureau of Investigation
NCLEX	National Council Licensure Exam
NCSBN	National Council of State Boards of Nursing
NEDA	National Economic Development Agency

NSB	National Seamen Board
OEDB	Overseas Employment Development Bureau
OPA	Overseas Performing Artist
PDI	<i>Philippine Daily Inquirer</i>
PNA	Philippine Nurses Association
POEA	Philippines Overseas Employment Administration
PRC	Professional Regulation Commission
PS	<i>Philippine Star</i>
RA 8042	Republic Act 8042
UK	United Kingdom
US	United States

## **CHAPTER 1**

### **INTRODUCTION**

During the past few decades, the nursing workforce has been in crisis in the United States (US) and around the world. The combination of an aging work force and high rates of burnout and turnover has caused a global shortage of nurses of unprecedented proportions (Andrews & Dziegielewski 2005), leading health care organizations in the US and other developed countries to recruit nurses from other countries in order to maintain acceptable staffing levels. The Philippines is the largest exporting country of foreign-trained nurses for the US and an important supplier of nurses for other developed countries.

Because of its link with migration opportunities (particularly to the US), nursing education has become a large and growing industry in the Philippines in recent years. The number of nursing schools has increased from 40 in the 1980s to 240 in 2002 to 470 in 2006 (Lorenzo 2007). Nursing schools have also responded to the growing demand by increasing enrollment. Some of the demand, interestingly, comes from second-career nursing students, particularly physicians (Lorenzo 2007, Masselink 2009).

In this context, nurse education and migration have become not only a health care problem but also an economic or labor issue in the Philippines. While the migration of health professionals from developing countries to developed countries is often framed as “brain drain”—an uncontrolled flow of a poorer country’s health professionals to

wealthier countries in search of higher wages—the situation of the Philippines is more complex. The training of nurses for overseas employment appears to be part of a broad and concerted program of government-facilitated labor export, introduced during the administration of President Ferdinand Marcos in the 1970s (Tyner 2004). As such, the Philippines is recognized around the world for its experience and expertise in managing labor migration; its representatives are frequently invited to advise other countries interested in building up their labor migration management systems (Ball 1997).

From a global perspective, the Philippines is at the forefront of a trend of developing countries positioning themselves as niche producers of health workers. Cuba also has a longstanding practice of sending physicians to work abroad (Lee 1996), and India and China are said to aspire to follow the Philippine model of training nurses to work overseas (Khadria 2007, Fang 2007). The implications of policies that encourage training of health workers for export are unclear, particularly in countries with documented domestic health workforce shortages and mal-distributions. In light of the possibility that training-for-export policies may seek economic growth at the expense of domestic health care systems, it is also unknown how policymakers understand this tradeoff of priorities and justify it to the public. This study aims to uncover these thought processes by examining what happens when the Philippines' *de facto* policy of training nurses for export is the subject of controversy: who defends the policy when it is called into question, and what values do they invoke to do so?

This project uses case studies of two recent controversies to examine policymaking priorities regarding nursing education and migration in the Philippines. The study's specific aims are the following:



**Aim #1:** To describe the frames in Philippine newspaper coverage of two recent controversies in nursing education and migration in the Philippines: (1) a leakage of test answers on the June 2006 Philippine nursing licensure examination and (2) a provision in a newly signed trade agreement opening Japanese markets to Filipino nurses. How do journalists and other sources identify these controversies as problems, and what solutions do they recommend? What values do they invoke in these discussions?

**Aim #2:** To identify views of policymakers, educators and journalists about the nursing licensure examination controversy and the Japan trade agreement. How do these stakeholders define the controversies as problems, and what solutions do they recommend? What values do they invoke, and how do these overlap with or differ from how the issues are framed in the newspaper coverage?

**Aim #3:** To describe how these controversies reflect policymaking priorities and power dynamics between stakeholders with respect to nurse migration in the Philippines. How do the decisions made to address each controversy reflect the values invoked in the newspaper coverage and key informant interviews? Which stakeholders' views influence the decisions made, and which stakeholders' views are minimized or ignored?

The first controversy erupted in June 2006, when a group of nursing licensure examinees made a formal complaint regarding an alleged leak of exam questions by an exam review center. Although the leak was ostensibly a domestic problem, the implications of the “tainted” results of the June 2006 nursing licensure examination for future overseas employment opportunities for Filipino nurses were debated in the media for months. The leak was the subject of a lengthy cabinet-led investigation that ended when President Gloria Macapagal Arroyo issued an executive order for a partial retake of the exam.

The second controversy, the inclusion of a provision opening Japanese markets to Filipino nurses in the Japan-Philippines Economic Partnership Agreement (JPEPA), is currently under debate in the Philippine Senate. Although this agreement (which would require Filipino nurses to learn Japanese and to be licensed under the Japanese system)

represents a “forced fit” compared to arrangements with English-speaking markets and has been opposed by nursing associations in both Japan and the Philippines, it has been promoted by the Philippine government as a mechanism for developing new markets for Filipino migrant nurses.

This study will be the first examination of how the Philippines’ de facto policy of training nurses for export is contested in situations of controversy. The controversies over the nursing licensure exam leakage and the JPEPA nursing provision offer a unique opportunity to examine the discursive construction of nurses and nurse migration in the Philippines. First, the reasons why each controversy has become the focus of such concerted and consistent attention are themselves worthy of further examination. Dutton and Ashford (1993) have argued that social problems are not objective conditions, but reflections of claims made by groups or individuals with respect to a particular issue or condition—in other words, social problems themselves are formed discursively. In both situations, the nature of the “problem” under debate is contested among policymakers and other actors. What do different groups claim is the problem in each situation, and what interests motivate their participation in the debate? When the practice of training of nurses for export is called into question in situations of controversy, how do different institutional actors react, and how do they seek to influence the discussion? Particularly in light of the current problems of proliferation of schools, declining quality of nursing education, and loss of experienced nurses to migration, have the controversies sparked any movement to change existing practices, or are institutional actors more interested in justifying and perpetuating the status quo? How do they do this discursively?

Second, Schön and Rein (1994) suggest that policy controversies such as the licensure exam leakage controversy and the inclusion of nurses in the JPEPA represent an important opportunity to study “frame conflicts” in public discussion of these issues. Both of these issues fit Schön and Rein’s definition of “policy controversies”, which arise when different parties put forward competing definitions of a problem and its proposed solutions and cannot be resolved by simply examining the facts of the situation, rather than “policy disagreements”, which can typically be resolved once stakeholders examine the facts of a situation. Controversies are rarely resolved completely, but examining the competing frames (“underlying structures of belief, perception, and appreciation”) that contending parties put forward in public discussion offers insight into the logics and power dynamics that influence policymaking and public opinion on the contested issues (Benford 1993, Entman 1993, Gamson & Modigliani 1989, Schön & Rein 1994).

Understanding how controversies in nursing education and migration are framed in the Philippines can be instructive for policymakers in countries that are considering similar models of state-facilitated nurse migration. The Philippines has arguably the most advanced system of training nurses for export in the world, and its mechanisms have been cited as models for countries such as India and China (Aiken 2004, Khadria 2007) that are also interested in developing state-facilitated mechanisms of nurse migration. How institutional actors in the Philippines argue about this practice when it is the subject of intense public debate demonstrates the power relations that underlie it and exposes the tradeoffs that it forces them to balance: the rights of nurses to migrate with the responsibility to build a sustainable health care system, the desires to seek new overseas markets for nurses with the welfare of nurses working overseas, and so on.

Highlighting the dilemmas of the Philippines' well-established approach of training nurses for export can give leaders in other countries a glimpse of what they might expect if they choose to pursue similar policies.

This study will contribute to a more complete understanding of how an important trend in the globalization of nursing education—training nurses for export by developing countries—is perceived and debated in a key source country, the Philippines. The study of how controversies in nursing education and migration are framed in newspaper coverage will constitute one of the first studies of how nursing as a “national industry” is debated in public discourse, and key informant interviews will shed further light on the priorities and power dynamics that influence the decision-making processes documented by the newspaper coverage.

It also will contribute to the building of theory or theoretical frameworks to support similar analyses within other developing countries, including analyses of how health workforce policies are framed in public discussion and how those frames reflect tradeoffs of public health and economic development. This study may also form the basis for important comparisons with other developing countries' health workforce policies, particularly those that have also begun to pursue health professional education as strategic mechanisms (e.g., Cuba and India), helping global health policy leaders to understand how developing countries balance the health of their own citizens with the potential economic benefits of exporting health workers.

## **CHAPTER 2**

### **BACKGROUND AND SIGNIFICANCE**

As developed countries such as the United States cope with massive shortages of nurses, many health care organizations have resorted to recruiting nurses from developing countries in order to maintain acceptable staffing levels. The Philippines has become the largest source country for foreign-trained nurses in the US and an important supplier for many other developed countries. In fact, the vast majority of Filipino nurses (over 85% or 150,000) are employed overseas (Aiken 2004). The mass migration of nurses from the Philippines occurs despite the fact that the country's health system is poorly funded and plagued by shortages and serious mal-distribution of physicians, nurses and other health workers between urban and rural areas (Lorenzo 2007).

Staffing shortages in the Philippine health care system have been exacerbated by mass migration of physicians and nurses (Brush & Sochalski 2007), particularly in rural areas (Lorenzo 2007). Migration has also contributed to rapid nurse turnover in urban hospitals (Lorenzo 2007). As a result, many domestically employed nurses are relatively inexperienced. More experienced nurses, including many nursing instructors, often pursue employment opportunities overseas as soon as they can, a trend that threatens to undermine the Philippines' nursing education sector, its health system and its future as a source country of nurses (Prystay 2002, Galvez Tan 2005).

With this history of under-investment in health services, poorly distributed manpower in its own health facilities, and an already depleted supply of nursing educators, the dominant position of the Philippines in the worldwide market for nurses seems unlikely. In light of persistent domestic needs, the strong connection between nursing and overseas work—the fact that 85% of Filipino nurses work outside of the Philippines—is also surprising. This study seeks to examine the forces that underlie the link between nursing and migration in the Philippines by asking the following questions: What are the logics and power dynamics that underlie the Philippines’ de facto policy of training nurses for export? How are nurses viewed and represented in a society in which their profession has become closely associated with migration, and how does this representation influence policy decisions?

### ***Literature Review***

Sassen (1993) has argued that “Migrations do not just happen; they are produced. And migrations do not involve just any possible combination; they are patterned.” In other words, migration patterns occur for specific reasons—there are reasons why some migration pathways are more well-trodden than others. Sassen’s proposition suggests that the association of nursing with migration in the Philippines may not be as surprising as it appears, if it is understood in the context of the activities of government and other stakeholders that have created and perpetuated it.

Iredale (2001) has examined the phenomenon of “internationalization” of professions and suggests a variety of reasons why certain professions have become strongly associated with international migration: cross-national standardization of professional training (e.g. physicians in British Commonwealth countries), trade

agreements, and the emergence of labor markets that are relatively free of national controls (e.g. information technology workers). The degree to which the physician workforce has been “internationalized” is evident in the fact that foreign-trained physicians compose between 23 and 28 percent of the workforce in the US, the United Kingdom (UK), Canada and Australia (the largest receiving markets for physicians—Mullan 2005). Iredale (2001) and Kingma (2007) have described a similar trend in the nursing profession: nearly all of the nurses in some Middle Eastern countries are foreign-trained, and the US, Canada and Australia also receive huge numbers of nurses from overseas (although foreign-trained nurses comprise a smaller percentage of the workforce in these countries compared to the physician workforce). Many of the foreign-trained nurses in these countries come from the Philippines and other Asian countries (India, South Korea, etc.).

Iredale (2001) notes that some countries have established themselves as source countries for certain types of workers, while other seemingly similar countries are much less involved in producing workers for overseas markets. She attributes much of the difference to the ways that source countries’ educational systems “keep pace” with the growth of overseas markets: for example, India has emerged as an important source country for information technology (IT) workers because of the growth of its IT education programs, while other Asian countries such as China, Japan and South Korea have remained relatively small players of the global market for IT workers because their educational programs have not experienced similar growth. Mullan (2006) has described a similar trend in India’s medical education sector, noting that the idea of medicine as a “ticket to emigration” has contributed to the rapid growth in the number of medical

schools in India. India's medical education sector is said to be increasingly "aimed at an export-oriented market" (Supe & Burdick 2006), training physicians that are "locally responsive but globally competitive" (Mullan 2006).

While these examples demonstrate that "internationalization" of professions and the establishment of particular source countries is not unique to the case of Filipino nurses, they do not explain what compels source countries to maintain policies of training certain types of workers for export. Also, the degree of "internationalization" in these examples from the Indian IT and medical sectors is relatively small when compared to the Philippine nursing sector: for example, only 10% of Indian physicians work overseas, compared to 85% of Filipino nurses (Mullan 2006, Aiken 2004). For these reasons, the case of Filipino nurses—as an extreme example of an "internationalized" sector—can offer insight into how source countries seek and maintain policies of training certain types of workers for overseas markets.

Brush and Sochalski (2007) note that overproduction of nurses in order to supply overseas markets has been the "prevailing practice" since the 1950s, when Filipino nurses began entering the US as exchange visitors. As immigration policy changes expanded the US market for Filipino nurses in the 1960s, recruitment activities made the connection between the nursing profession and migration opportunities more explicit, with advertisements such as "your cap is your passport" appearing in Philippine nursing publications (Brush & Sochalski 2007, Choy 2003). Since being incorporated into a system of state-sponsored labor migration established by President Ferdinand Marcos in the 1970s, nurses have become the "international specialty" of the Philippines (Choy 2003, cited in Brush 2007), valued abroad for their image as highly trained and capable



health care providers and at home for the contributions of their remittance income to the national economy.

Since the 1970s, the Philippines has supplied nurses to an ever-growing range of receiving markets, including countries in the Middle East, Europe and Asia along with the US (Ball 1996, Brush & Sochalski 2007). In response to growing overseas opportunities for nurses and economic stagnation in the Philippines, nursing education has become a popular way for Filipinos to gain access to lucrative overseas job markets (Hicap 2005, Brush & Sochalski 2007). The nursing education sector has grown rapidly since the 1980s, despite concerns about poor quality of education, lack of qualified instructors, and exacerbation of health workforce imbalances between rural and urban areas (Lorenzo 2007).

In light of its relationship to these problems in the domestic health system, it might be expected that local health system leaders would be critical of the policy of training nurses for export. While local perceptions of the policy have not been thoroughly examined in the literature, Perrin and colleagues (2007) questioned hospital nursing chiefs in the Philippines about it as part of a larger survey and were surprised to find that a majority of nursing chiefs interviewed expressed support for the policy of training nurses for export. They attributed this to a “culture of migration” in the nursing profession (Choy 2003)—a situation in which migration becomes so ingrained in a group’s behavior and shared norms that is practically taken for granted. A culture of migration has been identified by Hagopian et al. (2005) and Akl et al. (2007) as an important driver of physician migration in many developing countries, often supported by educational institutions whose instructors help students to seek training opportunities and

positions abroad. Similarly, Perrin et al. (2007) found that Philippine nursing leaders were supportive of the policy of training nurses for export because it provided opportunities for professional development and economic opportunities for Filipino nurses.

While Perrin et al.'s (2007) work suggests the “culture of migration” as a possible explanation for the broad support for the de facto policy of training of nurses for export in the Philippines, it does not explore in depth the logics and power dynamics that contribute to its perpetuation. In particular, nursing leaders expressed support for the policy as a way for individual nurses to pursue economic and professional opportunities, but nurse migration is not a phenomenon that affects only individual nurses—it also has profound consequences for the economy and health care system of the society that they leave behind. Migrant nurses are an important source of remittance income for the Philippine economy (Lorenzo 2007), but Ball (1996) has argued that their departure contributes to “national dissolution” because it undermines the country’s ability to develop a sustainable health care system. In this context, how can health care leaders continue to support the policy of training nurses for export? How do policymakers and the public justify or make sense of the practice, particularly in light of the negative effects of the overseas orientation of the nursing sector on the domestic health system?

This study uses case studies of two recent controversies in nursing education and migration to examine how the Philippines’ policy of training nurses for export is represented in policymaking and public discussion. It examines evidence from newspaper coverage and key informant interviews discussing the two controversies to uncover the competing discourses put forward by the government and other stakeholders

to justify and influence future decisions about the policy in the Philippines—and to understand the broader implications of deliberate overproduction of health workers for overseas markets for other countries (such as India—Khadria 2007) that are considering similar policies.

### ***Theories of Skilled Worker Migration***

This section describes several existing theories or explanations for patterns of skilled worker migration: microeconomic and human capital theories and the “colonial tie” perspective. It points out that these approaches provide incomplete explanations for the dynamics of Filipino nurse migration and suggests a “structuration” or “institutional” perspective as an alternative that offers a more complete framework for understanding the logics and power dynamics that underlie the phenomenon. The structuration/institutional approach forms the basis for this study’s research questions and design.

**Microeconomic and Human Capital Theories.** Much of the existing literature on migration of skilled workers represents migration as essentially an individual-level, rational decision (Iredale 2001, Kline 2003). This assumption is evident in two traditional theories of skilled worker migration: the microeconomic and “human capital” theories. Microeconomic theories of migration emphasize “push” factors (in sending countries) and “pull” factors (in receiving countries) as primary reasons that individuals decide to migrate (Iredale 2001). The microeconomic perspective on skilled worker migration posits that individual workers make rational choices to stay or to migrate after weighing “push” and “pull” factors against each other. Frequently cited push factors include low pay, poor working conditions, political instability and insecurity, inadequate

housing and social services, and lack of educational opportunities and professional development. This approach has been used frequently in studies of physician and nurse migration, which have cited job dissatisfaction, lack of motivation, and weak professional leadership in sending countries as “push” factors and opportunities for professional training, better job opportunities, and higher wages in receiving countries as influential “pull” factors motivating physicians and nurses to migrate internationally (Kline 2003, Saravia 2004, Forcier 2004).

A human capital understanding of skilled worker migration is described by Meyer (2001) as “a substantialist view of skills as a stock of knowledge and/or abilities embedded in the individual”. It posits that skilled workers leave resource-poor areas for richer areas in order to find jobs that are commensurate with their skills and training (their individual stocks of human capital—Iredale 2001). However, the human capital paradigm still conceives of migration in economic terms; it proposes that when skilled workers find low demand for their skills in their home countries, they make rational decisions to move to places where demand is higher and they are more likely to find jobs (Goss & Lindquist 1995). Like the microeconomic perspective, the human capital perspective suggests that migration is an individual-level rational decision, and by extension migration patterns of skilled workers from developing countries to developed countries are the simple aggregation of these decisions.

These theories of skilled worker migration have a major deficiency when they are used to attempt to explain migration of Filipino nurses: namely, they fail to explain why nurses from the Philippines are so overwhelmingly involved in overseas work while nurses from countries with even sharper disparities between domestic “push” factors and

“pull” factors in developed countries migrate at significantly lower rates. For example, while sharp disparities exist between nurses’ salaries (\$3000-4000 per month in the US vs. \$180-200 per month in the Philippines—Galvez Tan 2005) and working conditions in the Philippines and those in developed countries, these disparities are even greater for nurses in other developing countries, particularly some countries in sub-Saharan Africa (Vujicic 2004). Also, Filipino nurses migrate to a variety of receiving countries, including some with strong “pull” factors and others with weaker “pull” factors (lower salaries, etc.).

**Colonial Tie Perspective.** Portes (1989) has suggested that higher-level forces such as colonial ties help to explain migration patterns between developing and developed countries. Countries with historical colonial ties generally share a common language and have similar education systems, both factors that can facilitate migration between them long after the formal colonial relationship ends. In particular, transnational professional networks between former colonial powers and colonies are likely to influence professionals such as physicians and nurses to migrate between them in pursuit of work opportunities and professional training (e.g. movement of physicians from former British colonies such as India and Pakistan to the UK—Mullan 2005).

This argument can certainly be made in the case of nurse migration from the Philippines, which has been influenced heavily by early 20<sup>th</sup>-century colonial ties between the Philippines and the United States. Aiken and colleagues (2004) note that the colonial link with the US provides Filipino nurses with two key traits that facilitate their migration: first, Filipino nurses are educated in college degree programs, which were

aligned with US standards during the colonial period (Choy 2003). Second, Filipino nurses are able to communicate well in English. English language education has been a part of nursing education in the Philippines since the US colonial days of the early 20<sup>th</sup> century, and Filipino nurses continue to be valued by US employers for their English-language fluency (Choy 2003).

Movement of nurses from the Philippines to the United States has also been facilitated by US government exchange programs and immigration policies. The US colonial period in the Philippines lasted from 1898, when it annexed the Philippines at the end of the Spanish-American War, until 1946, when the Philippines gained its independence after World War II. In 1948, the US established exchange programs with other countries under the US Information and Education Act in order to promote understanding of the US and counteract Soviet propaganda. The Exchange Visitor Program (EVP) represented the beginning of mass migration of health care personnel from the Philippines to the United States. During the 1950s and 1960s, US institutions sponsored exchange workers for both work and study in the US under the EVP. Filipinos represented 80% of participants in this program by the late 1960s, including an “overwhelming majority” of exchange nurses (Choy 2003).

During the same period, the US Immigration Act of 1965 ended a national origin quota system that had been in place since the 1920s, which heavily favored immigrants from Europe. Under the new system, sending countries in the Eastern Hemisphere were allowed to send up to 20,000 immigrants per year to the United States (Choy 2003). Skilled immigrants and those who already had relatives in the US were given preference for immigrant visas. This policy shift coincided with a period of high unemployment in

the Philippines during the 1960s, so many health workers—both physicians and nurses—migrated to the US either as exchange visitors or under the new immigrant visa provisions.

A 1970 law changed EVP policy to allow exchange workers to make their status permanent without returning to their home countries, changing the orientation of nurse recruitment efforts from “exchange” to “immigration”. In the early 1970s nurses began to come to the US under H-1 visas (occupational immigrant visas); foreign workers were allowed to fill permanent positions after 1970, with relatively low waiting time (30 to 90 days—Choy 2003). The 1989 Immigration Relief Act enabled nurses with H-1 visas with 3 years’ residency in the US as of 1989 to adjust their status to permanent residency. This new provision exempted H-1 visa nurses and their families from visa quotas and backlogs (Choy 2003).

As a result of these policies, the Philippines has become the largest sending country or region of nurses to the US: census estimates indicated that of 218,720 foreign-educated registered nurses in the US, over 80,000 were born in the Philippines (Aiken 2007). But the US is not the only destination for Filipino nurses: in fact, nearly half of Filipino nurses work in countries besides the United States (Lorenzo 2007) and the number of destination countries for Filipino nurses has increased significantly since the 1980s (Ball 1996, Lorenzo 2007). These include countries with a wide variety of languages and educational systems, such as Saudi Arabia, the Netherlands and Ireland (Lorenzo 2007). So the Philippines’ colonial tie with the United States does not fully explain the massive migration of Filipino nurses to other countries.

**Institutional/Structuration Theory.** If explanations attributing migration patterns to individual-level push and pull factors or state-level colonial ties cannot account for massive movement of Filipino nurses, perhaps a better explanation can be found by examining the “meso” level—higher than the individual-level focus of microeconomic theories, but lower than the state-level colonial ties. Goss and Lindquist (1995) have attempted to bridge the gap between state-level and individual-level drivers of migration by introducing the concept of the “migrant institution”. Leitch (1992) defines institutions as including “both material forms and mechanisms...and ideological norms and protocols”, which together “constitute and disseminate systems of rules, conventions, and practices that condition the creation, circulation, and use of resources, information, knowledge, and belief”. Goss and Lindquist’s study of migrant institutions examines how “material forms” such as government agencies and private recruitment agencies act to control the flow of information to potential migrants for their own political and financial gain, and in the process create systems of “rules and resources” that structure access to migration opportunities.

Their idea of the “migrant institution” is rooted in Giddens’s (1984) structuration theory, which posits that social action is organized by a “dialectical process” in which structural properties of the social system are both the medium and outcome of social actors’ practices. In other words, social action is neither a function of structural conditions nor individual activity alone: instead, actors (individuals, organizations, etc.) take action within the structural constraints of the social system, and by doing so they change the system’s constraints on their subsequent activities and those of other social actors. Migrant institutions act within opportunities and constraints of the existing



environment, and by doing so they alter the material (financial constraints, regulatory policies, etc.) and ideological conditions (public perception, norms of migration) of the environment in which they act. This perspective likely provides a much better explanation of Philippine nurse migration than the microeconomic or colonial tie perspectives, as it allows for an important role of the country's state migration apparatus and other organizational actors. It also acknowledges the dynamic nature of nursing education and migration policymaking in the Philippines, as the attempts of actors in these two spheres to manage and benefit from the process constantly alter the structural conditions in which they operate.

The Philippines' state migration apparatus is composed of government agencies and policies that have explicitly encouraged labor migration for several decades (Ball 1997, Tyner 2004). The practice of state-promoted labor migration was introduced in the 1970s as a temporary strategy to generate income from migrant remittances and reduce domestic unemployment (Tyner 2004). Since its initial formation, the state migration apparatus has been formalized through the establishment of a permanent government agency, which oversees state-sponsored migration of Filipino workers, and a variety of policies governing recruitment of Filipino workers and the collection of remittance income.

### ***State Migration Apparatus and Migration Discourses***

Leitch (1992) and Tyner (2004) state that institutions disseminate systems of rules and conventions through "technical" and "discursive" means. The term "discourse" in this case refers not simply to spoken or written words, but to "disciplines of knowledge", statements that construct objects by labeling and describing them in a particular way:

...Statements do not have as their correlate an individual or a particular object that is designated by this or that word. This is crucial, for it directs attention to the fact that there is no “true” referent that we are attempting to describe. Rather, there are bodies, and any statement that ascribes the label “migrant” to these individuals does so discursively...a statement has a discursive object which does not derive from a particular state of things, but stems from the statement itself. (Tyner 2004, 13)

In other words, migrant institutions contribute to the social construction of migrants and the migration process by putting forward certain discourses of migration—by labeling and describing people who migrate and the actual process of migration in particular ways.

Tyner (2004) has argued that a variety of “migrant institutions” such as state apparatuses, media, and other actors position themselves as producers and brokers of knowledge about migrants. As various stakeholders put forward competing and overlapping discourses of migration, they socially produce the objects of their discussion. He connects this idea with Foucault’s (1979) “power/knowledge nexus”:

And yet it is through the interactions of power and knowledge that fields of objects (i.e. migrants) are made real through the activities of state apparatuses, universities, research foundations, the media, and so on...More properly, these institutionally situated discursive formations position the body as both an object of knowledge and a space for the exercise of power. Foucault is clear on this matter, in that he sees the subject and the knowledge of the subject, together with the institutional expression of that knowledge, as produced together. (56)

In other words, institutions exercise power by producing and disseminating knowledge—in this case, “discursive formations” (labels and descriptions) of migrants and migration.

The Philippine state migration apparatus has put forward a variety of overlapping discourses to promote and legitimize its activities. By doing so, the state migration apparatus has positioned itself as the producer and broker of knowledge about migration

and has contributed to the social construction of migrant workers and the migration experience. This section traces the evolution of the state migration apparatus and its discursive construction of migrants and migration from its origins until the present.

**Origins of the State Migration Apparatus.** President Ferdinand Marcos introduced a policy of export-oriented industrialization in the Philippines in the late 1960s in response to failure of import-substitution industrialization strategy in the 1940s and 1950s and growing external debt. At this point in time, the main exports included agricultural products, electronic chips and clothing. Marcos declared martial law in 1972, centralizing economic planning under the National Economic Development Authority (NEDA). Martial law remained in place until 1981. During this time Marcos reoriented the nation's economic policies to attract private investment and facilitate the production of exportable goods. A new Labor Code was signed in 1974; it included provisions for wage restraint, banned strikes, and reduced penalties for anti-union labor practices (Tyner 2004).

These policy changes left many Filipinos landless and under- or unemployed. In this context, the Marcos administration introduced a new policy of labor export; the original policy was justified by a discourse of “development diplomacy”, the idea that workers from developing countries with large populations and labor surpluses could meet demands in developed countries, thereby facilitating “interdependent development”. The administration touted several particular benefits of the new policy: it would reduce under- and unemployment, improve the skills of the domestic labor force through return

migration, and promote the Philippines' development and facilitate debt servicing through remittance income (Tyner 2004, Tyner 2009).

Tyner (2009) has suggested that the discourse of development diplomacy put forward by the Marcos administration was “coupled with a discourse of ‘personal sacrifice for national good’” (57)—the idea that participants in the state-facilitated migration program sacrifice their own liberties for the sake of the Philippines' economic development. The administration also began to represent Filipino labor as a commodity on the world market: by 1977 Marcos's Minister of Labor and Employment described manpower as “the major export of the country” and the “fifth biggest earner of foreign exchange” behind coconut oil, sugar, copper concentrates, and copra. An agent of the country's Overseas Employment Development Bureau (OEDB) described Filipino labor as “a prized living export [and] the best bargain on the world market”, which the OEDB sought to “package and deliver...to various work sites round the world” (Ball 1997).

**Formalization of the State Migration Apparatus: POEA.** Marcos's program of labor export was intended as a temporary solution to the Philippines' foreign debt and unemployment issues in the 1970s—even the Secretary of Labor at the time stated that he thought the program would help the Philippine economy to grow to the point that it was no longer necessary within 20 years (Tyner 2009). But in reality, it has become a permanent part of Philippine policy and practice (Ball 1997, Lorenzo 2007). The formation of the Philippine Overseas Employment Administration (POEA) in 1982 was an important step in the organization and formalization of the Philippines' state migration apparatus. The POEA was formed from the consolidation of three existing organizations

(the OEDB, the National Seamen Board [NSB], and Bureau of Employment Services [BES]) and is a division of the department of Labor and Employment (Tyner 2004).

The POEA serves several related functions: it regulates private sector participation in labor export, markets Filipino labor internationally, engages in government-to-government recruitment agreements, and works to inform and protect overseas Filipino workers (Ball 1997). Its marketing division conducts missions to potential labor receiving countries with the goal of “securing pledges for preferential hiring of Filipino labor and to affirm the stability of the Philippines as a manpower partner capable of delivering high quality Filipino manpower despite prevailing adverse conditions” (POEA 1984, quoted in Ball 1997). The POEA also works to speed up legal channels in order to compete with illegal recruiters and make legal migration more appealing to workers.

Tyner (2009) has argued that the formation of a separate government agency to manage overseas employment highlighted the growing importance of overseas work as a way of generating “capital for capital’s sake” (61). The Philippine state was certainly in need of capital: its foreign debt had grown to US\$26 billion by 1986, when Marcos was removed from office and sent into exile and President Corazon Aquino took office (Bello 2004). Her administration maintained a policy of state-facilitated labor migration in order to service this debt, with an increasing focus on marketing of Filipino labor abroad (Tyner 2004). Tyner (2009) suggests that administration and POEA rhetoric at the time also reflect interests in management of the image of Filipino workers around the world and marketing Filipino workers in an ever-broadening range of professional fields.

Tyner (2009) also notes that the POEA introduced a discourse of migration as “heroism” and migrant workers as “heroes and heroines” during this period. By lionizing migrant workers (declaring official recognition days in their honor, describing them as “ambassadors of goodwill”—Tyner 1996a), the state migration apparatus sought to legitimize migration as a brave, patriotic act and to make overseas work more appealing in order to build up supplies of migrant workers. He suggests that the “heroism” discourse lacked element of “self-sacrifice” put forward by the Marcos administration (the idea that migrant workers sacrifice their own well-being for national development), and that the representation of migrants as “heroes and heroines” is distinct from that of “victims” during the early days of the state migration apparatus. In any case, these activities did not correspond with a significant policy shift from the orientation under the Marcos administration, but rather “reaffirmed the government’s intention of maintaining overseas employment as a vital development strategy” (66).

**Formalization of the State Migration Apparatus: RA 8042.** The administration of Aquino’s successor, President Fidel Ramos, oversaw the development of the Migrant Workers and Overseas Filipinos Act (Republic Act 8042) of 1995. The Migrant Workers and Overseas Filipinos Act has two stated functions: the protection of overseas Filipino workers and the deregulation of the international recruitment process under a “full disclosure” policy, which assumes that workers are primarily responsible for making informed decisions about whether and how to seek overseas employment (Ball & Piper 2002, Lorenzo 2007, Tyner 2000). Ball (2002) and Tyner (2000) have argued that these functions are contradictory, saying that the state cannot simultaneously protect workers

while simultaneously relinquishing responsibility for regulating the international recruitment process.

Tyner (2009) points out that the full disclosure policy's discourse of "empowerment" of migrant workers attempts to position them as rational decision makers, in continuity with earlier discourses of personal sacrifice or heroism. However, instead of these altruistic motives, workers have other (usually unspecified) reasons for choosing to migrate. As they weigh information and make personal decisions about migration, the government is primarily responsible for protecting the freedom to make these choices "in the context of full understanding of the risks and rewards for participating in the global labor market" (79). This discourse removes some of the responsibility for mass migration from the government by positioning it not as an exporter of labor, but as a protector of individual citizens' rights to participate in labor migration.

Kelly (1997) has argued that the Ramos administration "elides" discourses of individual rights with discourses arising from a neoliberal understanding of the global economy, which construct international migration as a "natural process" (Tyner 2000) and immutable feature of a globalized economy (Tyner 2009). Together these discourses remove responsibility for mass migration from state institutions. Migration is no longer represented as a method that state institutions use to accumulate capital, but instead...It is merely responsible for protecting individuals' rights as fully informed participants in the system and "managing" an "inherent structural feature" (POEA 1994, quoted in Ball & Piper 2002) of the global economy. The state migration apparatus cannot be responsible for influencing migration because "migration [is] a natural feature not only of the global

economy, but also of humankind, and...operates *beyond the reach of institutions*” (74). Tyner (2009) says that the “globalization” discourse also represents the position of the Philippines in the global economy as a supplier of human resources as if it is somehow uncontrolled by the Philippine government and the governments of other states. Rather than being an active promoter of migration, the government is a “neutral mediator” of a natural process (Tyner 2009).

Ball (1997) and Tyner (2009) have argued that the attempts of the Philippine state migration apparatus to avoid responsibility for the migration of its citizens by representing labor migration as the result of “external” forces does not change the fact that the Philippine state is “highly active” in organizing and facilitating labor migration. Ball argues that the Philippine government plays the role of a “social engineer”, using labor migration as a mechanism to increase its own stores of capital and to increase income for its citizens. The state’s mechanisms of organizing labor migration treat Filipino labor as a commodity, a product useful for generating foreign exchange that is “promoted internationally as a saleable and competitive item”.

### ***Stakeholders in Nurse Migration in the Philippines***

While it offers a detailed look at state-produced discourses about migrant workers, Tyner’s most recent work does not discuss discourses surrounding different professions separately, so it offers less insight into the discursive formation of nurses and nurse migration in particular. It also focuses on discourses produced by the state migration apparatus with less attention to discourses produced by other entities with a stake in the public discussion and production of migrant nurses. The work of Ball (1996, 1997) discusses the formation and implications of nurse migration policies more specifically,



but also tends to focus on state-produced discourses. It is also over 10 years out of date, so does not reflect many of the changes that have occurred in nursing education and migration policies in the Philippines in recent years.

Foucault's (1980) work on power suggests that studies of how migrant institutions shape the structural conditions of nursing education and migration must consider that power is dispersed—it is not held by a single hegemonic entity, but exercised by multiple entities which “simultaneously undergo and exercise...power” (98). In Tyner's (2004) words, “power is not the privileged domain of dominant class; authorities do not have a monopoly on the exercise of power, or on the production of knowledge” (12). In this context, the state migration apparatus—while it could be argued to be the “dominant” migrant institution that forms and justifies policies with respect to nurse migration—is not the only body that exercises power or produces knowledge about nurses and nurse migration. Instead, knowledge about nurses and nurse migration is contested between a wide variety of stakeholders, each with their own goals and perspectives. As these organizations act in pursuit of their own interests, they shape the structural conditions in which policy decisions and individual nurses' educational and migration decisions are made.

In addition to their role as export “commodities” in the state migration apparatus, nurses have an important role as providers in the domestic health care system. As such, the prospect of their overseas migration matters to the public and to stakeholders in the health system such as hospitals and the country's Department of Health (DOH). Nurse migration also matters to a domestic profession with a strong sense of professional identity and a long history of political advocacy, as evidenced by the longstanding

prominence of professional organizations such as the Philippine Nurses Association (PNA). As the nursing education sector has grown in influence and profitability in recent years, mostly due to the association of the profession with migration opportunities, nursing educators have emerged as another key stakeholder in nurse migration (Masselink 2009). Finally, as education has become increasingly linked with commercial activity around licensure exam review and overseas recruitment, organizations that provide these services have emerged as new stakeholders in the processes of nursing education and migration (Masselink 2009).

By promoting their competing interests with respect to nurse migration in the public sphere, these actors all contend for position as creators and brokers of knowledge (“institutions”) about nurses and nurse migration. As such, a study of the activities of migrant institutions related to nurse migration in the Philippines cannot be limited to discourses put forward by the state migration apparatus. The discourses presented by other key stakeholders must be examined as well. The following section describes several of these actors and their likely interests in the processes of nurse education and migration: the state migration apparatus, health care organizations, the PNA, nursing schools, licensure exam review centers and overseas recruitment agencies.

**State Migration Apparatus.** Nurses have been placed overseas by the Philippines’ state migration apparatus since the late 1970s. While most migrant physicians and nurses went permanently to the United States in the 1960s and early 1970s, by the early 1980s increasing numbers of nurses left the Philippines for Saudi Arabia and other countries in the Middle East on short-term labor contracts. Many nurses placed in Saudi Arabia were

recruited under a government-to-government agreement between the POEA and the government of Saudi Arabia, while nurses recruited to most other countries (including the United States) were recruited privately (Ball 1996).

Accurate figures on nurse migration are difficult to obtain because temporary and permanent migrant nurses are processed through different government agencies, the POEA and the Commission on Filipinos Overseas (CFO) respectively (Tyner 2004). POEA data show Saudi Arabia to be the most popular destination for temporary migrant Filipino nurses through the mid-1990s (Ball 1996), but the United States is widely considered to be the most popular destination for Filipino nurses overall. Many of these are not counted in POEA figures because they enter the US under permanent immigrant visas. Estimates from the Philippines Professional Regulation Commission (PRC) show sharply increasing deployments of nurses in recent years, from 5000 nurses deployed in 1999 to 19,000 deployed in 2003 (Lorenzo 2007). Since recruitment to the US is often arranged privately, these figures likely underestimate the total number of nurses deployed there.

In any case, the state migration apparatus has a stake in promoting the migration of nurses among other professionals. The Philippine state reaps enormous financial benefits from the migration of its citizens: as of 2004, an estimated 6.5 million Filipinos (nearly 10% of the country's total population) lived overseas (Bello 2004). Remittances from overseas Filipino workers have also increased dramatically, from US\$290.85 million in 1978 to US \$10.7 billion in 2005 (Lorenzo 2007). The Philippines receives more income from overseas workers' remittances than from direct foreign investment and foreign loans (Ball 1997, Galvez Tan 2005).

**Philippine Health System.** Ball (1996) has argued that the current policy orientation is a “mechanism for national dissolution” because the training of nurses for overseas markets, while bringing in remittance income in the short term, undermines the development of an adequate health care system in the long term. While income from remittances is perceived as an opportunity for “nation building”, she states that the inability of the state to build an adequate health care system “undermines its mandate” to pursue broader development goals. These concerns have been highlighted recently by policymakers’ concerns that the growth in the number of programs has been accompanied by a decline in quality of education: fewer than half of students pass the nursing licensure examination during the past few years, meaning that many students do not find work as nurses in the Philippines, much less in the United States and other overseas markets. Nonetheless, thousands of students enter nursing education programs in the Philippines every year.

The domestic health care system is already suffering in the face of these trends. The country has a net surplus of nurses because of high production and relatively low demand (mainly due to underfunding of the health system), but it has lost many of its most skilled nurses to migration (Lorenzo 2007). Hospitals have reported serious staffing shortages and rapid turnover as a result of nurse migration, and nursing schools have also lost many of their instructors to migration (Prystay 2002). Schools find themselves competing for the few qualified deans and instructors who have remained in the country, and for training space at tertiary hospitals.

The Philippine Department of Health has found itself at odds with the Department of Labor and Employment (DOLE) over nursing education and migration policy (Galvez

Tan 2005). While the DOH seeks to enact policies that encourage production of nurses for domestic health needs, the DOLE is focused on maintaining and seeking new markets for Filipino nurses (Ball & Piper 2002). For example, DOH leaders have attempted to engage more directly in addressing the situation of poor quality nursing education and poorly controlled nurse migration, developing a Master Plan for Health Human Resources to address domestic health human resources distribution, motivation (compensation—provision of living wages for government workers), and production from 2005 to 2025 (Ronquillo 2005). The president has rebuffed their efforts and encouraged the POEA to take up the issue instead. While nursing migration continues to be addressed as a labor issue, the Department of Health remains chronically underfunded (1.1% of the national budget in 2005—Galvez Tan 2005).

Stakeholders in the Philippines' domestic health system have a distinctive interest in nurse migration: ensuring a consistent supply of qualified nurses to provide care for the public in hospitals and clinics around the country. Many health system leaders have protested the current state of the country's domestic health workforce, characterizing the loss of many experienced doctors and nurses to migration and the imbalances between urban and rural supplies of health workers evidence of "brain drain" (Galvez Tan 2005) and calling for policy changes to stem the flow of nurses from the Philippines to developed countries.

**Philippine Nurses Association.** The Philippine Nurses Association (PNA), the key professional organization for Filipino nurses, was founded in 1922 (PNA website, [www.pna-ph.org](http://www.pna-ph.org)). The PNA's initial goals included a variety of professional

development projects for the nursing sector (Choy 2003). The group's stated vision reflects its commitment to professional development, as well as a growing commitment to protecting the welfare of Filipino nurses: "The caring and fortifying light giver committed to providing opportunities for the professional growth and development of world class Filipino nurses." As communities of Filipino nurses abroad have grown, the PNA has expanded to include 28 chapters in the United States and several other countries (Kingma 2006). As it has expanded its international reach, the PNA has become an important broker of knowledge for and about migrant nurses. Besides the legal and political advocacy work of its overseas chapters, the PNA also conducts seminars for nurses in the Philippines who are interested in working abroad (Kingma 2006).

As the PNA's role is now consolidated around nurses' welfare and professional development, the organization has distinct goals with respect to nurse migration: to protect nurses before and during their work abroad and to promote high standards of professionalism within the domestic and overseas nursing sectors. The PNA does not take a particular position on whether nurse migration should be promoted or prevented. Instead, it simply aims to advance nurses' welfare and professional training wherever they choose to work.

**Nursing Schools/Educators.** As a result of its association with migration opportunities, the nursing education sector has become a prominent and lucrative industry. The Philippines has a well-established (Cardozier 1984) but poorly regulated private higher education sector; over 75% of college and university students were enrolled in private institutions as of 2006 (Levy 2006). Nursing schools have taken advantage of a relatively

weak regulatory environment and huge demand for nursing education to expand and diversify their programs. The number of nursing schools has grown explosively, from 40 schools in the 1980s to 470 documented programs in 2006, which graduated 20,000 nurses (Lorenzo 2007). As the number of programs has grown, some schools have also sought rapid, drastic expansions to their enrollment, so the overall number of nursing students has grown exponentially in recent years.

Some nursing schools in the Philippines had also made their educational programs available to new student populations by establishing special “second course” nursing programs designed for physicians and other professionals including businesspeople and lawyers (Galvez Tan, 2005). By offering nursing education to traditionally high-status professionals, the programs also highlight the desirability of nursing education as a route to migration and strengthen the position of nursing schools as the gatekeepers of migration opportunities. These entrepreneurial activities of nursing schools highlight the business interest that some school owners have in nurse migration, which ensures continued demand for their programs and profitability for the sector. On the other hand, some education leaders have criticized these developments for undermining professional standards and values by turning nursing education into a mechanism for making a profit.

**Licensure Review Centers and Overseas Recruitment Agencies.** As the nursing education sector has grown, nursing school programs have become increasingly intertwined with commercial interests. In addition to expanding and diversifying their own programs, some nursing schools have also taken action to control the “downstream” processes of licensure and recruitment by establishing commercial relationships with

licensure exam review centers and recruitment agencies. The alignment between nursing schools and review centers has become such a taken-for-granted practice that it has been estimated that 90% of all nursing schools are affiliated in some way with review centers (Masselink & Lee 2009). Besides creating explicit links between nursing education and licensure review and recruitment, these relationships also establish the review and recruitment industries as stakeholders in the process of nursing education and migration. Like some operators of for-profit nursing schools, review center and recruitment agency owners have a stake in nurse migration: the connection between the nursing profession and migration ensures continued demand for their services and profitability for their businesses.

**Summary.** This section has described the competing motives of several “migrant institutions” with respect to the migration of Filipino nurses. Government actors have an economic interest in maintaining and building markets for Filipino nurses overseas so that they can continue to generate remittance income for the Philippine economy. Representatives of the domestic health system are interested in nurses as providers of health care, as they attempt to recruit qualified nurses to staff health care facilities. The nursing education field includes actors with competing interests: while some nursing educators are interested in profiting from their involvement with nursing education, others want to protect the Philippines’ reputation for quality nursing education and reduce the influence of commercial interests in nursing education. The Philippine Nurses Association and other professional organizations are interested in protecting nurses’ welfare and giving them opportunities for professional development. Licensure exam



review centers and recruitment agencies are interested in cultivating markets for their services and profiting from nurse migration.

As they attempt to advance different priorities with respect to nurse migration (financial gain, provision of health care, quality of education and professional development, and nurses' welfare), migrant institutions put forward different ideas about what nurses are and should be in Philippine society. Specifically, different migrant institutions think about and represent nurses as export commodities or products (government), professionals or health care providers (health system representatives, educators, and professional organizations), citizens to be protected (professional organizations), and consumers (profit-oriented educators, licensure exam review centers and recruitment agencies). The two controversies examined in this study offer a unique opportunity to understand how nurses are viewed and represented by different stakeholders and how these priorities are held in tension in public discourse and decision-making.

### ***Background on Controversies in Nursing Education and Migration***

This study focuses on two recent controversies in nursing education and migration in the Philippines which offer the opportunity to examine public discussion of the country's policy of domestic production and overseas marketing of nurses by a variety of stakeholders: (1) a leakage of test answers on the June 2006 Philippine nursing licensure examination and (2) a provision in the newly signed Japan-Philippines Economic Partnership Agreement (JPEPA) which would allow for the entry of Filipino nurses into Japan. These cases offer the opportunity to examine and compare public discussion of the training of nurses for export in the Philippines in two different contexts: a situation

that threatens overseas marketing of Filipino nurses (the licensure exam leakage) and a situation that creates a potential new market for Filipino nurses (the JPEPA nursing provision). They also demonstrate Philippine policymaking priorities and power dynamics with respect to two different source countries: the United States (the oldest and largest receiving country for Filipino nurses, which played a critical role in addressing the licensure exam leakage) and Japan (a new receiving country for Filipino nurses under the JPEPA). Timelines of events related to each controversy are included in Appendix I.

**Nursing Licensure Examination Leakage.** Nursing licensure examinations in the Philippines are managed by the Professional Regulation Commission (PRC), which was founded by decree of President Ferdinand Marcos in 1973 (PRC website, [www.prc.gov.ph](http://www.prc.gov.ph)). It regulates licensing and registration of professionals in 43 fields, each of which is supervised by a professional regulatory board. The regulatory boards are responsible for preparing the content of licensure examinations, enforcing codes of ethics for their fields, and administering professional oath-taking and registration.

The Board of Nursing (BON), which regulates the licensing of registered nurses, was first created in 1919. In its current form, it is composed of 7 members—a chairperson and 6 members—representing the fields of nursing education, nursing service and community health nursing (Nursing Law 2002). In order to prevent conflicts of interest, the members of the BON are required to resign from appointments at schools, colleges, or exam review centers when they are appointed and are required “not to have any pecuniary interest in or administrative supervision over any institution offering basic nursing education programs, including review classes” (PRC 2002).

The nursing licensure examination is given twice a year (in June and December) in over a dozen cities nationwide. The content of the examination is determined by the members of the Board of Nursing; it consists of 5 tests covering community health nursing (Test I), maternal and child health nursing (Test II), medical-surgical nursing (Tests III and IV) and psychiatric nursing (Test V) (Famorca 2006). In order to pass the examination, examinees must obtain a general average of at least 75% on all tests with scores of no lower than 60% on any test (Nursing Law 2002). The number of students taking the licensure examination has grown exponentially in recent years—from 13,000 in 2004 to 26,000 in 2005 and 42,000 in 2006—while the percentage of examinees who pass the examination has declined (42% on the June 2006 exam—PRC 2006).

The June 2006 examination became embroiled in scandal when 91 examinees in Baguio City (in northern Luzon) made a formal complaint to the PRC regarding an alleged leak of exam questions involving a nursing licensure exam review center in Baguio. The Association of Deans of the Philippine Colleges of Nursing (ADPCN) called for a swift, independent investigation of the leak allegations. The complainants alleged that the Board of Nursing tried to block their complaint, while BON members publicly denied the leak allegations. The complainants asked that BON members be “suspended preventively” during the investigation. Nursing officials and students protested a “culture of cheating” in the nursing education and review center industries in the Philippines, saying that BON members have leaked material to review centers for a fee.

In August 2006, the president of the Philippine Nurses Association resigned his position amid allegations that he provided nursing licensure exam answers to students at

his review center; he also was accused of bribing PRC officials in order to obtain advance copies of the exam and of paying for a trip to Switzerland for BON officials. The National Bureau of Investigation (NBI) also filed charges against representatives of three review centers, as well as two members of the Board of Nursing alleged to have participated in the leak. All seven members of the Board of Nursing were later removed and replaced (Labog-Javellana & Aning 2006).

The nursing licensure exam leakage controversy was the subject of intense media coverage and debate for several months following the initial accusations. It caused concern among Filipino nursing educators that the leakage would damage the reputation of Filipino nurses worldwide, especially those who took the exam in June 2006. Students who took the June 2006 exam reported difficulty finding jobs, both overseas and in the Philippines (Conde 2006). After a prolonged debate involving cabinet-level officials in the administration of President Gloria Macapagal Arroyo and members of the Philippine Senate, as well as Philippine and US nursing officials, the decision was made to offer a retake of the examination. The primary reason that officials gave for offering the retake was to protect the employability of exam passers in the United States, which threatened to refuse entry to nurses who had taken the June 2006 examination. About 10,000 of the original 17,000 takers who passed the affected June 2006 licensure exam retook the test in June 2007 (Aning 2007a).

**Nurses in Japan-Philippines Economic Partnership Agreement.** The Japan-Philippines Economic Partnership Agreement (JPEPA) was signed by Japanese Prime Minister Junichiro Koizumi and Philippine President Gloria Macapagal Arroyo on 9

September 2006 in Helsinki, Finland. The signing was intended to take place at ceremonies in Manila marking the 50<sup>th</sup> anniversary of the normalization of relations between the Philippines and Japan (23 July 2006), but it was delayed due to difficulties in the negotiations over a variety of issues (Yu Jose 2008). The JPEPA includes provisions on agricultural products, electronics, and other products as well as the entry of Filipino nurses and caregivers into Japan. The JPEPA is Japan's first economic partnership agreement with any country to provide for the entry of foreign workers into Japan (Yu Jose 2008).

For the Philippines, the JPEPA represents the hope of reducing a longstanding trade deficit with Japan that reached US\$1.05 billion in 2006 (Amante 2007). Details of the agreement were not divulged to the Philippine public before it was signed. The JPEPA includes the following provisions:

- Lowering tariffs on agricultural trade
- Liberalizing investment conditions in the Philippines for Japanese corporations
- Easing restrictions in Japan's labor market to accommodate more Filipino health care professionals (Amante 2007)

The specific provisions for health workers include an agreement to allow a limited number of Filipino nurses to stay beyond the current four-year time limit if they acquire a Japanese license and an increase in the quota of Filipino health workers (nurses and trained caregivers) to 1000 per year, including 300 nurses. The Philippine government has advocated a labor market demand-driven rather than a quota-driven approach, but for now the agreement retains the quota-driven approach (Amante 2007).

Tyner (2009) suggests that the migration of Filipino entertainers to Japan has its origins in efforts by the Marcos regime to promote tourism in the Philippines in the 1970s, including a sex tourism element designed to appeal to men from Japan and other countries. Under pressure from local non-governmental organizations and international campaigns against sex tourism, the Philippine government (through the POEA) moved to change the venue of encounter between Filipina women and Japanese men, working in concert with private-sector recruiters, talent promoters and travel agencies to promote migration of Filipino “overseas performing artists” (OPAs) to Japan. By the early 2000s, Japan was the almost exclusive destination of Filipino entertainers (73,246 of 73,685 or 99.4% in 2002), the vast majority of whom (69,986 or 95.5%) were women (Yu Jose 2008).

After the Japanese government was criticized by the US State Department for failing to stop human trafficking, it instituted new visa requirements for entertainers hoping to work in Japan in 2005: entertainers were required to have at least 2 years of experience working outside of Japan or “training in foreign educational institutions”. This decision was protested by the Philippine government as well as stakeholders in the entertainment and recruitment industries, but it went into effect in March 2005. It had an immediate chilling effect on the deployment of Filipino entertainers to Japan: between January and July 2005, only 23,359 entertainers were deployed, nearly 15,000 fewer than the 37,958 deployed during the same period in 2004 (Yu Jose 2008).

Also contributing to the Philippines’ trade deficit with Japan was the decline of remittances from Filipino entertainers in Japan, which raised the educational and experiential requirements of entertainers in response to criticism from the United States

State Department, which alleged that the country was contributing to human trafficking (Amante 2007, Satake 2008). This trend has been particularly important in Japan, where Filipino entertainers have migrated in large numbers since the mid-1980s (Tullao 2004). Tyner (2009) has argued that the inclusion of nurses in JPEPA fits with a Philippine government strategy to diversify existing labor markets: since the market has tightened for entertainers in Japan, the government is working to open markets to other types of workers, including nurses and other health workers.

The inclusion of nurses in the JPEPA was the subject of widespread debate in the Philippines as it came up for Senate ratification in August 2007. Although government-sponsored newspaper advertisements have hailed the agreement as an “unparalleled opportunity for the Filipino people” and the inclusion of nurses as its “most immediate benefit” (JPEPA Advertisement 2007), it was strongly opposed by the “Junk JPEPA” coalition, including the Philippine Nurses Association and labor unions in the Philippines, which lobbied the Senate not to ratify the agreement. The PNA stated its opposition to the perceived “second class” status of Filipino nurses under the agreement provisions, which include the following:

- Japanese language learning (6 months of training before beginning work)\
- Non-recognition of licenses: nurses work as trainees until they pass the Japanese licensure examination (given in Japanese), which is regularly failed by 50% of Japanese nursing students
- Maximum stay of 3 years for Filipino nurses if they fail the Japanese licensure examination

Other concerns about the possibility of sending Filipino nurses to Japan included the high cost of living in Japan, concerns about the potential for forced movement into sex work, and concerns about transparency and monitoring of recruitment (PNA 2007, Vilog 2007).

The Japanese response to the inclusion of nurses in the JPEPA further highlights the ambiguities of the agreement. The Japanese Nursing Association (JNA) strongly opposed the JPEPA, saying that the entry of Filipino nurses into Japan would worsen working conditions for nurses in Japan (Vilog 2007, Arcibal 2006). The JNA indicated that it would support the entry of Filipino nurses only if Filipino nurses took the Japanese licensure examination (no mutual recognition of Philippine nursing licensure), acquired Japanese language skills, and were employed in the same or better conditions as Japanese nurses (not as a “second class” workforce—Vilog 2007). The Japanese Minister of Health also expressed opposition to the health worker provisions of the JPEPA, particularly because of concerns that Filipino workers would be pushed to the bottom of the labor market in Japan and forced to compete with part-time Japanese workers. Elderly Japanese surveyed about their views of the agreement also expressed concern, particularly uncertainties about language skills, Japanese cooking skills, “shame” at being cared for by foreigners, and fears of violence committed by or against foreign workers (Vilog 2007).

After an intense lobbying effort by the administration of President Gloria Macapagal Arroyo, the JPEPA was ratified by the Philippine Senate in October 2008 (Ager 2008).



### *Significance of the Study*

The controversies examined in this study offer the opportunity to examine how the Philippine government's de facto policy of training nurses for export is debated in situations of "policy controversy"—situations which arise from stakeholders' competing definitions of problems and their proposed solutions (Schön and Rein 1994). The policy of training nurses for export can be the subject of such controversy because its overall impact for the Philippines is unclear: while it is useful for generating remittance income and improving the country's short-term economic prospects, the practice of training nurses for export is not without negative consequences. The export and "commodification" of Philippine citizens places the government under the influence of global institutions, multinational corporations, and other states' immigration policies and weakens its credibility with its own citizens (Ball 1997, Tyner 2004). Ball (1997) describes this situation as a "crisis of legitimacy" in which the government of a nation-state is forced to balance its need for foreign exchange with the need for political legitimacy from workers, recruiters, and labor-importing countries.

In the Philippines, the government's attempts to justify its policies occur within a larger set of discourses put forward by a variety of "migrant institutions" that attempt to create and disseminate knowledge about the nursing migration policy and migrant nurses themselves. Tyner (2004) suggests that as these stakeholders attempt to further their own agendas by attaching meaning to terms such as "labor migrant", "overseas market" and so on, they "create" and perpetuate migration patterns. In other words, migrant institutions—government, educators, professional organizations, etc.—use discourses to influence and alter the structural conditions of nurse migration.

While Tyner has elaborated at some length the discourses of migration in general (mostly from government sources) and related to sex workers in particular (Tyner 1996a, Tyner 1997), the internal politics of nurse migration and training for export in sending countries like the Philippines remain under-examined. The discourses surrounding the practice have not been examined systematically, particularly since the recent explosive growth of the nursing education and migration sectors in the Philippines since 2000. Given the complicated situation of the Philippines, which produces a glut of nurses but has significant problems with mal-distribution of health workers, it is particularly interesting to look at how the overwhelming orientation of the nursing sector toward overseas markets is represented in public discussion and understood by representatives of various “migrant institutions”. Do these stakeholders think about training nurses for export as “brain drain” or attribute other negative consequences to it? Or do they support it or at least take it for granted?

Examining how various stakeholders frame controversies such as the licensure exam leakage and the JPEPA nursing provision—situations in which elements of the Philippines’ de facto policy of training nurses for export are called into question—can shed light on a more fundamental question: how are nurses viewed and represented in a society where their profession has become almost synonymous with overseas work? The state migration apparatus might view nurses as an export product to be marketed abroad, so it might seek policy responses to the controversies that would maximize the Philippines’ ability to maintain and grow overseas markets for nurses. Professional organizations and educators might emphasize their professional identity as nurses and health care providers, so they might promote policies that would promote professional

development and high standards for Filipino nurses. Alternatively, nurses' welfare organizations such as the PNA could perceive nurses as victims who need to be protected (as some other types of migrant workers, especially overseas performing artists, have been represented by migrant welfare organizations in the past—Tyner 1997), so they might seek policy responses that aim to protect nurses from perceived exploitation or unfair practices. How the controversies are debated and the decisions made in response to them reflect the relative power of each of these priorities—and of the image of nurses that inform them—with respect to the Philippines' policy of training nurses for export.

Tyner (1997) has argued that a “dialectic relationship” exists between the construction of images—in this case, the image of migrant nurses—and policy formulation. In other words, as images inform policy development, so policies serve to reconstitute and reinforce images. How these priorities are held in tension by different stakeholders influences how decisions about the future of the Philippines' policy of training nurses for export are made, which in turn influences how nurses are perceived in the future and alters the context in which future policy decisions are made. For example, responses to the licensure exam leakage and the JPEPA nursing provision that take a primarily economic view of the policy of training nurses for export, aiming to maintain and build overseas markets for Filipino nurses, reinforce and legitimize the image of nurses as an export product for the Philippines in the eyes of key stakeholders and the public (Tyner 1997), which could make it more likely that subsequent policy decisions would be informed by similar priorities. Alternatively, policy responses that prioritize nurses' professional development and standards reinforce the image of nurses as

professionals and health care providers. These responses would likely influence subsequent policymaking decisions in a different direction.

Each case study uses two types of data to examine how the controversies are framed: newspaper coverage and key informant interviews. Examining how the controversies in this study are framed in news coverage offers a window into how various stakeholders—including journalists and members of the public—think about nurses and nurse migration, and how these orientations influence how they work to shape policymaking decisions in the Philippines. Newspapers are a good forum for examining policymaking discussions because they reflect elite discussions and concerns and have significant “agenda-setting power”, although they are not widely read by the masses (Florentino-Hofileña 2004). The printed word also has permanence that other news sources such as radio, television and electronic media (blogs, etc.) lack (Florentino-Hofileña 2004). The predictability of newspaper publication schedules and the relative stability of newspaper archives make it easier to conduct clearly bounded studies of how issues are framed in public discussion during a particular time period, as was the goal in this study.

Since the end of the Marcos administration in 1986, the Philippine press has gained significant freedom, and newspapers with a variety of orientations vis-à-vis the government have gained prominence (Center for Media Freedom and Responsibility 2004). While some politicians cultivate print media allies to promote their interests, other newspapers (including the most broadly circulated newspaper, the *Philippine Daily Inquirer*) are known for their critical perspective with respect to the current government (Coronel 2000). This tension ensures that newspapers represent a wide variety of

perspectives on government migration policies. At the same time, many newspapers reflect the growing role of the commercial interests of their owners (Florentino-Hofileña 2004), so it is also likely that they give voice to entities that have business interests in nurse migration such as nursing schools and licensure review centers.

Newspaper coverage is interesting to study not only because it shows how the controversies are discussed, but by whom—or at least whose perspectives become the subject of public discussion. Tyner (1997) points out that stakeholders who have better access to lines of communication with the public are “most able to construct the reality of migrants’ experiences” (or in this case, the reality of the policy of training nurses for export) while other stakeholders with less access are in a comparatively weaker position in the “economy of discourses” (Foucault 1980) that informs policy development and public perception. Examining newspaper coverage of controversies involving the de facto training-for-export policy enables us to consider whose interests are being served, whose voices are being heard, and what these patterns say about who holds power in these situations.

In addition to evidence from the newspaper coverage of each controversy, each case study also includes interviews with representatives of several “migrant institutions” (government, health system, nursing educators, and professional organizations) that have a stake in the policy of training nurses for export. Members of each group also had an essential role in developing policy responses to the licensure exam leakage and JPEPA nursing provision controversies. The inclusion of interviews in the case studies strengthens the findings of this study in several ways: first, the interviews offer the opportunity to develop a deeper understanding of the logics and priorities that inform

these actors' responses to the controversies. Stakeholders who are cited in the newspaper coverage of the controversies can provide more detailed accounts of the internal discussions that informed the policy decisions described in the coverage. Other stakeholders whose positions receive less attention in the newspaper coverage are given an opportunity to have their interpretations heard and to assess the impact of the controversies—and the policy responses to them—for the “migrant institutions” that they represent.

Also, the combination of newspaper coverage and key informant interviews for each case study allows for comparison between how the controversies are framed in the newspaper coverage and how key stakeholders identify them as problems and propose to resolve them. How do the values that are invoked in public discussion of the licensure exam leakage and the JPEPA nursing provision compare to—and inform—policymakers' responses to the controversies? Finally, since the interviews were done after both controversies had been resolved, they also include discussion of the implications of each resolution—in other words, suggestions of how the actions of various “migrant institutions” to resolve the two controversies have changed the structure in which future decisions about the policy of training nurses for export are made.

This is the first study to examine solicit the views of such a broad variety of stakeholders in the Philippines' policy of training nurses for export. It provides valuable insight into who influences policymaking decisions about nursing education and migration, and how they do it. It also shows how policymakers justify and “make sense” of the policy—or criticize it—when it is called into question in situations of controversy. It also suggests which images of nurses inform and are reinforced by policy decisions,

and assesses the likely impact of the responses to each controversy on the future of the Philippines' de facto policy of training nurses for export.

## CHAPTER 3

### RESEARCH DESIGN AND METHODS

This chapter describes and provides a rationale for the multiple case study research design in this study. It also describes how data for each phase of the study (frame analysis and key informant interviews) were collected and analyzed and explains how these methods fulfill each of the study aims.

#### *Research Design*

This study used retrospective analyses of multiple case studies to examine how nurses and nursing education are represented in public discussion and policymaking in the Philippines. Yin (2009) defines case studies as “empirical inquiries that investigate contemporary phenomena in depth and within their real-life context, especially when the boundaries between phenomenon and context are not clearly evident” (p. 18). He offers three criteria that determine when case studies are the most appropriate research design: first, “how” or “why” questions are being posed; second, the investigator has little control over the events being studied (as opposed to experimental designs); and third, the focus is on contemporary rather than historical phenomena (Yin 2009). The focus on contemporary events enables investigators to combine direct observation or interviews of people involved in events with other types of evidence.

This design is appropriate for the research questions examined in this study according to all three criteria: first, the research questions focus on *how* nurses and nurse



migration are represented and *how* policymaking decisions are debated and made.

Second, the broader phenomenon of nurse migration from the Philippines is difficult even for local policymakers to control, so it is nearly impossible for researchers to investigate it in a controlled, experimental setting. Finally, the structural conditions of nurse migration from the Philippines—economic constraints, role of nursing schools and commercial interests, etc.—are always changing, so it is necessary to study contemporary events to gain a current understanding of how the phenomenon is understood in public discussion and policy decisions.

This study examines two cases or controversies in nursing education and migration in the Philippines: the nursing licensure exam leakage and the Japan-Philippines Economic Partnership Agreement (JPEPA) nursing provision. Yin (2009) suggests that multiple case study designs such as this one produce more compelling and robust conclusions than studies of single cases because they enable replication of findings between cases—“literal” replication with similar cases and “theoretical” replication with contrasting cases. “Theoretical replication” refers to a situation in which the expected results from each case study are different, but for predictable reasons.

The cases examined in this study fall into the latter category, as they demonstrate several contrasts: the licensure exam leakage was perceived as threat to practice of training nurses for export and involved Philippine authorities with policymakers in the United States, the oldest and largest receiving country for Filipino nurses and a former colonial power with a generally “benevolent” image (Choy 2003, Brands 1992). In contrast, the JPEPA nursing provision was perceived as an opportunity to extend overseas markets for Filipino nurses and involved interaction between Philippine

policymakers and negotiators in Japan, a new receiving country for Filipino nurses and a former colonial power with a reputation for cruelty in the Philippines (Piquero Ballescas 2003, Yu Jose 2008). While these differences suggest that the two cases are unlikely to be discussed in ways that appear similar on the surface, together they offer an opportunity to examine consistencies and inconsistencies between the underlying logics and priorities that inform both policymaking discussions and decisions, and to draw conclusions about how the Philippines' de facto policy of training nurses for export is perceived and debated with greater certainty than either case by itself.

In addition to examining multiple cases, Yin (2009) recommends that each case study should include multiple data sources, which can be combined by investigators seeking convergence and corroboration ("triangulation") between different types of evidence to address the research questions. Including contrasting cases and different data sources in the study offers a more complete representation of the frames and values employed in debates about the policy of training nurses for export and increases the certainty with which we can draw conclusions about the logics and thought processes that underlie the policy. As such, each case study involved the collection of two types of data: newspaper articles and key informant interviews.

The first phase of each case study—an analysis of the framing of each controversy in newspaper articles—fulfilled Study Aim #1:

**Aim #1:** To describe the frames in Philippine newspaper coverage of two recent controversies in nursing education and migration in the Philippines: (1) a leakage of test answers on the June 2006 Philippine nursing licensure examination and (2) a provision in a newly signed trade agreement opening Japanese markets to Filipino nurses. How do journalists and

other sources identify these controversies as problems, and what solutions do they recommend? What values do they invoke in these discussions?

The second phase of each case study—a series of key informant interviews with policymakers, educators and journalists with knowledge of each controversy in the Philippines—fulfilled Study Aim #2:

**Aim #2:** To identify views of policymakers, educators and journalists about the nursing licensure examination controversy and the Japan trade agreement. How do these stakeholders define the controversies as problems, and what solutions do they recommend? What values do they invoke, and how do these overlap with or differ from how the issues are framed in the newspaper coverage?

Data from the two phases of analysis—and from the two case studies—were integrated to fulfill Study Aim #3:

**Aim #3:** To describe how these controversies reflect policymaking priorities and power dynamics between stakeholders with respect to nurse migration in the Philippines. How do the decisions made to address each controversy reflect the values invoked in the newspaper coverage and key informant interviews? Which stakeholders' views influenced the decisions made, and which stakeholders' views were minimized or ignored?

The results of the framing analysis and key informant interviews for each case study are described in Chapter 4 (Results), and the integration of case study results is described in Chapter 5 (Discussion).

### ***Frame Analysis of Newspaper Articles***

The first phase of each case study was an analysis of the frames used in newspaper coverage of each controversy: the nursing licensure exam leakage and the JPEPA nursing provision. Frame analysis was introduced by

Goffman (1974) as the study of “schemata of interpretation” by which people organize and package information. Existing studies employing frame analysis have examined media coverage and public debates of a wide variety of policy issues, including nuclear power (Gamson & Modigliani 1989), climate change (Hoffman & Ventresca 1999), breast cancer (Andsager 1999), and abortion (Andsager 2000, Terkildsen 1998). Analyzing “frame conflicts”—conflicts that arise from different ways of interpreting facts—in media coverage is particularly useful for understanding the logics and power dynamics that influence policymaking and public opinion on controversial issues (Benford 1993, Gamson & Modigliani 1989, Schön & Rein 1994). Examining how various migrant institutions define problems and propose solutions in public discussion is also an appropriate first step in understanding the “economy of discourses”—the promotion of competing images of nurses and nurse migration by different stakeholders—that influences nursing education and migration policymaking in the Philippines (Simon & Xenos 2000, Foucault 1980).

**Data.** Newspaper articles were obtained by searching the online archives of three major Philippine newspapers: the *Manila Times*, the *Philippine Daily Inquirer*, and the *Philippine Star*. All of these newspapers are widely read in the Philippines (Ables 2003) and have covered the debates over the nursing licensure leakage controversy and the JPEPA extensively. They also represent a variety of political perspectives. The *Manila Times* (which is owned by family members of an Arroyo administration official) tends to be generally pro-administration, while the *Philippine Daily Inquirer* has a reputation of being more critical of government policies (personal interview with *PDI* editor, 2007).

The *Philippine Star* is perceived as a more neutral publication with a “sober” reporting style (Coronel 2000). The *Philippine Daily Inquirer* is the daily newspaper with the largest circulation in the country (257,000), while the *Philippine Star* has the second-largest circulation (251,000) and the *Manila Times* has the fourth-largest circulation (209,000—Dayag 2004). The daily newspaper with the third-largest circulation—the *Manila Bulletin*, (circulation 250,000)—was not included in this study due to the configuration of its online archives, which made efficient searches for articles related to the two controversies of interest impossible within the study timeframe.

I conducted searches of each newspaper’s online archives: the *Manila Times* at [www.manilatimes.net](http://www.manilatimes.net), the *Philippine Daily Inquirer* at [www.inquirer.net](http://www.inquirer.net), and the *Philippine Star* at [www.philstar.com](http://www.philstar.com). The time frame for article searches on both topics was from June 2006 to March 2008. Since the licensure exam leakage became public in July 2006 and the JPEPA was signed in September 2006, this time frame included coverage of each controversy from its origin.

Because of differences in the structure of each newspaper’s online archives, two different search methods were employed. For the licensure exam leakage controversy, searches of the *Manila Times* archives used the following terms: “nursing licensure leak”, “nursing licensure retake”, “nursing licensure scandal”, “nursing board leak”, “nursing board retake”, and “nursing board scandal”. These searches generated a total of 108 articles. Searches of the *Philippine Daily Inquirer* and *Philippine Star* archives used three main search terms (“leak”, “retake”, and “scandal”) and the search-within term “nurs\*”. These searches generated a total of 155 articles from the *Philippine Daily*

*Inquirer* and 101 articles from the *Philippine Star*. A total of 364 articles on the licensure examination leakage controversy were obtained from the online archive searches.

For the JPEPA controversy, searches of the *Manila Times* online archives used the search terms “JPEPA nurses” “Japan nurses”. These searches generated a total of 91 articles. Searches of the *Philippine Daily Inquirer* and *Philippine Star* used the same search terms: “JPEPA” and “Japan” with search-within term “nurs\*”. These searches generated 54 articles from the *Philippine Daily Inquirer* and 48 articles from the *Philippine Star*. A total of 193 articles on the JPEPA controversy were obtained from the online archive searches.

The online archive searches were supplemented by hand searches of each newspaper’s archives for the time period of interest. An additional 94 articles about the licensure exam leakage controversy (91 from the *Manila Times*, 3 from the *Philippine Daily Inquirer*) and 10 articles about the JPEPA controversy (all from the *Manila Times*) were obtained using this method. (The number of *Manila Times* articles added via hand search is particularly high because the online archives of the *Manila Times* for 2006 were unavailable when searches were conducted.) Fifty-five of the *Manila Times* articles on the licensure exam leakage controversy and 5 articles on the JPEPA controversy were added from hand searches of the *Manila Times* archives conducted as part of an earlier study. The remaining 36 articles on the licensure exam leakage controversy and 5 articles on the JPEPA controversy came from searches of the *Manila Times* articles archived by HighBeam Research ([www.highbeam.com](http://www.highbeam.com)).

After duplicate and irrelevant articles were deleted, a total of 385 articles on the nursing licensure exam leakage controversy remained in the study sample: 131 from the

*Manila Times*, 154 from the *Philippine Daily Inquirer*, and 100 from the *Philippine Star*. These included 32 *Philippine Star* articles that were written in Filipino, which were also deleted from the sample. The final licensure exam leakage sample included 353 articles. After duplicate and irrelevant articles were deleted, a total of 142 articles about the JPEPA controversy were included: 60 from the *Manila Times*, 38 from the *Philippine Daily Inquirer*, and 44 from the *Philippine Star*. (No articles about the JPEPA controversy in Filipino were obtained, so no additional deletion step was necessary.)

**Figure 3.1. Number of Articles by Controversy and Source**

	<i>Manila Times</i>	<i>Philippine Daily Inquirer</i>	<i>Philippine Star</i>	Total
Licensure Exam Leakage	131	154	68	353
JPEPA	60	38	44	142

**Analysis.** The newspaper articles were indexed in a Microsoft Excel spreadsheet. This database recorded the following descriptive variables for each article: story source (archive keyword search or hand search), newspaper name, publication date, story length, and story type (column/commentary, editorial, letter to the editor, or news article).

Frames used in the newspaper articles were identified using an inductive approach informed by previous studies of framing in the social movements and organizational studies literature (Creed 2002, Gamson & Modigliani 1989). In a process informed by Gamson and Modigliani's (1989) "signature matrix" method, idea elements were identified and sorted into provisional frame categories. The signature matrices used in

this study included three “accentuating” elements, which highlight a particular way of thinking about an issue and make it memorable and easily communicated: metaphors (analogies used to describe the situation), depictions (characterizations or representations of subjects in the situation) and catchphrases (slogans or key words). They also included three “argumentative” elements, which justify a perspective on what should be done about the issue: roots (attribution of a problem to a particular cause), consequences (effects of the issue or problem), and appeals to principle (links to a set of values or moral claims—Creed 2002, Gamson & Lasch 1983).

For each article, I copied the text into a Microsoft Word document and imported the document into the qualitative analysis program ATLAS.ti for analysis. Elements identified as fitting into each category (metaphors, catchphrases, etc.) were coded for the set of articles on each controversy and grouped by category using the “code families” function in ATLAS.ti. In a process analogous to the axial and selective coding methods used for qualitative data (Strauss & Corbin 1998), I used the “code forest” function in ATLAS.ti to group similar idea elements together within each category and then to connect elements in different categories into broader frames. (For example, depictions of examinees in the licensure exam controversy as “victims” and those who leaked exam questions as “criminals” or “perpetrators” were grouped together in a “justice” category; these were then linked with consequences such as the interruption of students’ future plans and demoralization/despair to generate a frame labeled “nurses’ rights”—a frame that focuses on the impact of the licensure exam leakage to the examinees themselves.) Since the naming and assignment of frame labels is necessarily an iterative process



(Creed 2002), the labels were refined as idea elements were identified and linked to frames. The final signature matrices for both case studies are included in Appendix II.

The analysis of the newspaper articles included both quantitative and qualitative components. Hertog and McLeod (2001) have argued that these methods should be used in tandem: quantitative analysis is useful for describing the frequency with which different frames are employed in coverage of each controversy, but it does not always accurately reflect the relative power of different frames and framing devices. Qualitative analysis of frames, while sometimes idiosyncratic and influenced by the investigator's perspective, is useful for more critical examinations of the meaning and relevance of frames in a particular context. Combining the methods strengthens the study's ability to draw meaningful conclusions from the newspaper data.

In the qualitative phase of analysis of the newspaper articles, I identified the "collective action" functions of the frames for each controversy, following the logic of Benford and Snow (2000), Creed et al. (2002), and Entman (2004). Benford and Snow (2000) describe 3 important functions of frames in social movements: "diagnostic framing" (problem identification and attribution), "prognostic framing" (identification of proposed solutions to the problem), and "motivational framing" (identification of a rationale for collective action). Creed and colleagues (2002) identify these functions as "punctuation" (definition of a problem and highlighting of its importance), "elaboration" (attribution of responsibility and development of potential solutions), and "motivation" (moving people to action around an issue). These schemata can be reduced to essentially the same set of questions (Entman 2004):

- What is the problem?

- Who is responsible?
- What are the implications of the problem?
- What action should be taken?

The final product of this phase of analysis was a side-by-side comparison of the diagnostic, prognostic and motivational functions of each frame (Creed 2002):

	Frame A	Frame B	Frame C
What is the problem?			
Who is responsible?			
What are the implications of the problem?			
What action should be taken?			

I developed these comparisons for each controversy, and used their results to inform final versions of the interview questionnaires and codebook.

In the quantitative phase of analysis, I examined the distributions of frames and the sources associated with each frame for each controversy. Once all of the frames represented in the articles were identified and described, each article was coded to indicate the frame(s) that were present in the article. Finally, I assessed the distribution of frames (both the number of articles and percentage of total articles in which each frame was present) in three-month time intervals for each controversy in order to understand how public discussion of the two controversies evolved over time.

### ***Key Informant Interviews***

To fulfill Study Aim #2, the second phase of each case study used qualitative interviews of key informants in the Philippines. Qualitative interviews are particularly useful for developing detailed descriptions of events and processes, integrating multiple perspectives, and learning how events are interpreted (Weiss 1994). Interviewing nursing policymakers, educators, and journalists about their views of the controversies depicted in the news coverage made it possible to describe and analyze the institutional actors and power dynamics that influenced each situation. Combining interview data with the framing analysis described above for each case helped to fill in a frequently cited gap in framing research: the neglect of the power dynamics and other contextual factors that influence how issues are framed by the media (Carragee & Roefs 2004).

**Subject Recruitment.** A total of 10 key informants were recruited, representing a broad variety of perspectives on the two controversies of interest. Interviewees included representatives of the Commission on Filipinos Overseas (CFO) and the Philippine Senate (on behalf of the Philippine government), two representatives of the Philippines Department of Health (DOH—on behalf of the health sector), two prominent nursing educators, a representative of the Philippine Nurses Association (PNA), and a member of the Professional Regulation Commission’s Board of Nursing (BON—on behalf of nursing professional organizations). Two newspaper journalists (an editor and a reporter from the *Philippine Daily Inquirer*) were also recruited. Initial contact with one of the DOH representatives and both nursing educators was made through a health professions education leader in the Philippines for a previous study (UNC IRB #06-0298), and with

the other informants for the existing study (UNC IRB #07-1080). (The current study was also approved by a research ethics review board in the Philippines.) After I was introduced to the informants through this intermediary, I recruited them to participate in the study directly via e-mail or telephone. The fact sheet and informed consent form provided to interviewees are included in Appendix III.

**Data Collection.** Key informant interview data were collected via in-person interviews during a research trip to the Philippines in October 2008. (One interview with a journalist conducted during an earlier research trip in August 2007 was also included in the analysis.) Policymakers and educators were asked to discuss their knowledge of Philippine nursing education and migration policies, and journalists were asked to discuss their knowledge of how news coverage decisions were made in relation to each case. For the licensure exam leakage case, interview topics included explanations for the volume of news coverage, the values and priorities associated with policy responses to the leakage, and the powerful players (individuals, agencies, etc.) who influenced the response. For the JPEPA case, interview topics included past history of Filipino nurse migration to Japan, influential players (individuals, agencies, etc.) in the pursuit of the JPEPA nursing provision, and policymaking priorities with respect to the provision.

Two versions of the full interview scripts for each controversy—one version for policymakers and educators, and one version for journalists—are included in Appendix IV. Interviews were tape recorded with participants' permission. Taped interviews were transcribed for coding and analysis.

**Analysis.** Interview data were imported into ATLAS.ti for coding and analysis. The interviews were coded first using a process called “open coding” (Strauss and Corbin 1998), which involves breaking down data into smaller text units in order to identify concepts, properties and dimensions, and categories of information that it contains. The process of applying codes to a line-by-line reading of each interview was iterative: it began with a codebook developed from the analysis of newspaper articles—both specific framing elements and broader frame labels—but emergent codes were added as they are found in the interview data.

Once open coding was complete, I used the “code forest” function in ATLAS.ti to collapse coded elements in the interview data to core categories (phenomena), and to relate these to subcategories (analogous to the frame labels used in the newspaper article analysis). I used sorting memos to make cross-interview comparisons, looking for instances of connection, consistency, and inconsistency between interviewees’ statements. The final product of this phase described how interviewees representing each group (government, health sector, education, and professional organizations) defined the problem, attributed responsibility, discussed the implications of the problem, and prescribed solutions for each controversy:

- What is the problem?
- Who is responsible?
- What are the implications of the problem?
- What action should be taken?

In order to develop a more holistic examination of the issues at stake in each controversy and the power dynamics and motives influencing public discussion in each

case (Jick 1979, Carragee & Roefs 2004), I integrated data from the newspaper article and key informant interview analyses. In this step, I examined differences between key informants' definitions and elaborations of the problems under debate in each controversy and how the problems were defined and elaborated in news coverage. I also searched for explanations of how representatives of the government and other stakeholders made decisions related to the controversies. This portion of each case study helped to explain why the some frames appeared more than others in the newspaper coverage, and why certain possible frames received little or no coverage. It also provided insight into how stakeholders attempted (successfully or unsuccessfully) to influence public discussion and decision-making about the controversies—and why certain stakeholders achieved their goals in the process, while others did not (Carragee & Roefs 2004).

## CHAPTER 4

### RESULTS

This chapter describes the results of the case studies of the nursing licensure exam leakage and the Japan-Philippines Economic Partnership Agreement (JPEPA) nursing provision cases. For each case, it includes descriptions of the final study sample of newspaper articles and qualitative description and quantitative distribution of frames in the newspaper coverage, and the themes drawn from the key informant interviews.

#### ***Licensure Exam Leakage: Frame Analysis Results***

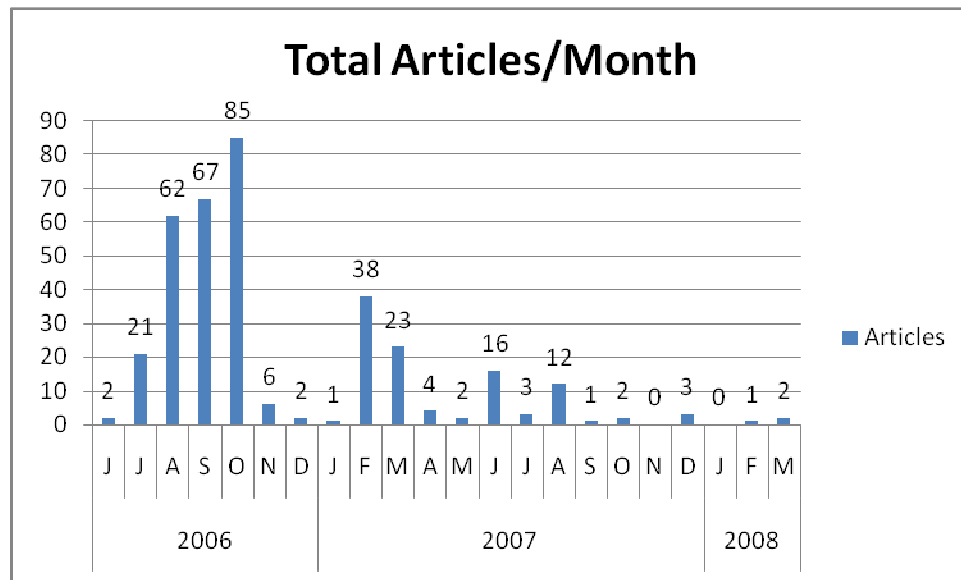
This section describes the final study sample of newspaper articles and qualitative description and quantitative distribution of frames in the newspaper coverage of the nursing licensure exam leakage.

**Study Sample.** The licensure exam leakage was the subject of 353 articles published in the *Manila Times*, the *Philippine Daily Inquirer* and the *Philippine Star* between June 2006 and March 2008. The number of articles per month is shown in Figure 4.1.

Coverage of the leakage was heaviest in late 2006, particularly the months of August (62 articles), September (67 articles) and October (85 articles) when it first came to light and discussion of possible resolutions to the controversy swirled. Articles from these 3 months alone represented over 60% of the total number of articles about the nursing licensure exam leakage. Coverage declined in late 2006 after the Court of Appeals ruled

that a partial retake of the licensure examination should be given, a decision that appeared to resolve the initial controversy.

**Figure 4.1. Number of Articles per Month (Licensure Exam Leakage—All Newspapers)**



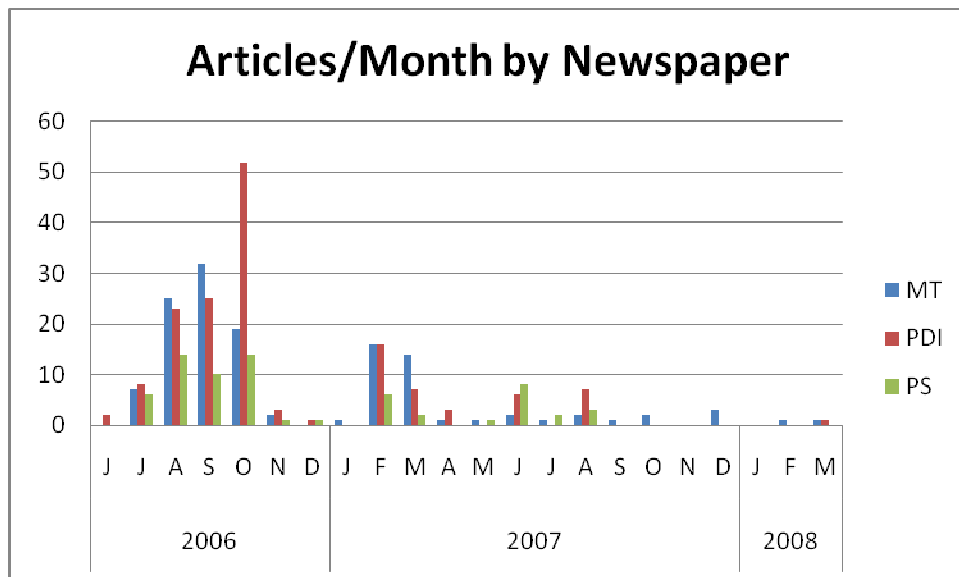
Another peak in coverage occurred in February (38 articles) and March 2007 (23 articles), when the US Council on Graduates of Foreign Nursing Schools (CGFNS) announced that it would deny visa screening to passers of the June 2006 licensure exam. Newspaper coverage followed Philippine authorities' attempts to negotiate and eventual acquiescence to the CGFNS' requirement of a retake of the affected tests by passers intending to work in the US. Discussion surrounding the licensure exam controversy declined after June 2007, when a retake of the affected tests was offered to all examinees. Only a few articles discussing various follow-up details (results of the exam retake, progress of legal cases against involved parties, etc.) appeared in late 2007, and the



licensure exam leakage was mentioned in only 3 articles between January and March 2008.

Figure 4.2 and Table 4.1 show the number of articles published each month by newspaper. The sample included 131 articles from the *Manila Times*, 154 articles from the *Philippine Daily Inquirer* and 68 articles from the *Philippine Star*. In general, all three newspapers followed similar patterns of greatest coverage between August and October 2006 and another, smaller peak in coverage in February and March 2007. The *Manila Times* had the largest number of articles in August 2006 (25 articles) and September 2006 (32 articles). The *Philippine Daily Inquirer* had the greatest number of articles in a single month in October 2006 (52 articles), a number that represented over 1/3 of the newspaper's total volume of coverage during the study period. The *Philippine Star*'s coverage peaked in August and October 2006 (14 articles each month).

**Figure 4.2. Number of Articles per Month by Newspaper (Licensure Exam Leakage)**



**Table 4.1. Number of Articles per Month by Newspaper (Licensure Exam Leakage)**

<i>Year</i>	<i>Month</i>	<i>Manila Times</i> (n = 131)	<i>Philippine Daily Inquirer</i> (n = 154)	<i>Philippine Star</i> (n = 68)
2006	June	0 (0.0%)	2 (1.3%)	0 (0.0%)
	July	7 (5.2%)	8 (5.2%)	6 (8.8%)
	August	25 (19.1%)	23 (14.9%)	14 (20.6%)
	September	32 (24.4%)	25 (16.2%)	10 (14.9%)
	October	19 (14.5%)	52 (33.8%)	14 (20.6%)
	November	2 (1.5%)	3 (1.9%)	1 (1.5%)
	December	0 (0.0%)	1 (0.5%)	1 (1.5%)
2007	January	1 (0.8%)	0 (0.0%)	0 (0.0%)
	February	16 (12.2%)	16 (10.4%)	6 (8.8%)
	March	14 (10.7%)	7 (4.5%)	2 (2.9%)
	April	1 (0.8%)	3 (1.9%)	0 (0.0%)
	May	1 (0.8%)	0 (0.0%)	1 (1.5%)
	June	2 (1.5%)	6 (3.9%)	8 (11.8%)
	July	1 (0.8%)	0 (0.0%)	2 (2.9%)
	August	2 (1.5%)	7 (4.5%)	3 (4.4%)
	September	1 (0.8%)	0 (0.0%)	0 (0.0%)
	October	2 (1.5%)	0 (0.0%)	0 (0.0%)
	November	0 (0.0%)	0 (0.0%)	0 (0.0%)
	December	3 (2.3%)	0 (0.0%)	0 (0.0%)
2008	January	0 (0.0%)	0 (0.0%)	0 (0.0%)
	February	1 (0.8%)	0 (0.0%)	0 (0.0%)
	March	1 (0.8%)	1 (0.5%)	0 (0.0%)

**Qualitative Description of Frames.** Frames used to discuss the licensure exam leakage fall into 5 main categories: a “culture” frame, two economic frames (a “general” frame, which is largely critical of the conditions that made the leakage possible, and an “image” frame, which aims to protect the image of Filipino nurses and their role in the Philippine economy), a “leadership” frame, a “nurses’ rights” frame, and two professionalism frames (a “health/safety” frame and a “values of nursing” frame). This section describes the functions of each frame (problem identification, attribution, implications, and

prescriptions) and the framing devices (metaphors, catchphrases, depictions, roots, consequences, and appeals to principle) employed in support of these functions.

### *Culture Frame*

**Culture Frame: What is the problem?** The culture frame represents the leakage as a problem because it reflects a “culture of cheating” in the Philippines, a propensity toward seeking personal gain by dishonest means that is demonstrated through the country’s electoral and sporting history as well as its professional licensure system.

**Culture Frame: Who is responsible?** This frame does not blame the leakage controversy on a particular person or group, but instead on the broader “culture of cheating”. Particular aspects of this culture include greed (the pursuit of wealth and personal gain at any cost) and apathy (the lack of will to oppose cheating when it occurs).

**Culture Frame: What are the implications of the problem?** This frame does not directly discuss implications of the leakage controversy, but instead suggests that it is an unsurprising development given the lax attitudes toward cheating and glorification of easy wealth prevalent in the Philippines:

This unfortunate event in our country once more highlights the many infirmities in the Filipino character, the many undesirable qualities of the Filipinos that somehow explain why our country is still poor up to now. Immediately noticeable is the sense of kanya-kanya [selfishness]. Those responsible for the leakage all of whom are obviously professionals have no compunction at all about the dire consequences of their criminal actions on the more than 17,000 students who took the nursing board exams. The lure of big bucks and the smug feeling that they can get away with it evidently drove them to resort to such deplorable actions. Greediness has somehow bred in some of us the ability to make palusot [creative excuses]. Unfortunately, these traits have been acquired by the examples from fellow Filipinos who are being lionized solely for their

wealth, regardless of the devious means employed to amass them. (Sison 2006)

**Culture Frame: What action should be taken?** This frame does not discuss specific action in response to the leakage controversy, but it uses the issue to call for a cultural change, a return to decency, honor and other positive values in public life.

### *Economic Frames*

**Economic Frame—General: What is the problem?** The “general” economic frame describes the leakage as a problem because it reflects the increasingly commercialized nursing education and migration industry in the Philippines. It is a problem because it reflects the influence of money and profit-making in the industry, which is subject to corruption because it is lucrative and because control of the institutions of nursing education (schools, exam review centers, and the Board of Nursing, which writes the nursing licensure exam) is held by small and overlapping groups of people.

**Economic Frame—General: Who is responsible?** This frame attributes the problem of the leakage to several related roots: first, a broader economic context in which Filipinos are desperate for overseas employment opportunities and overseas employment is a source of significant revenue for the government. The popularity of nursing profession as a pathway to migration has translated into huge demand for nursing education, which has promoted the growth of a highly commercialized, competitive and lucrative nursing education industry. In this context, review centers and school officials will use any tactic to get ahead, including leaking answers to the licensure exam to their students so that the

students will perform well on the licensure exam and improve their position in the industry.

In addition to these broad statements of economic motives, some speakers attribute the leakage to the personal economic interests of certain involved parties. Some of the accused review center operators invoke the term of competition, suggesting that the leakage accusations were made maliciously by owners of competing review centers in order to lure potential students/customers away from the review centers implicated in the leakage. Officials responding to reports of a leakage also identify it as the result of corruption in the nursing education and review industries; in particular, they suggest that the leakage occurred because members of the Board of Nursing (BON) that wrote the exam are also employed by nursing schools in whose success they have a vested interest. Also, they point out that a nursing school and review center owner (also the president of the Philippine Nurses Association) is alleged to have paid for two BON officials' travel to Switzerland, suggesting that he did so to "buy" their participation in the leakage:

Imagine this. The president of the Philippine Nursing Association (PNA), which nominates the members of the Board of Nursing (BON) tasked with preparing the questions for the final examinations, also owns a leading nursing review center called Inress. And it's during an Inress closed door review held the day before the finals...that questions for two key subjects were allegedly leaked...Could it get any worse? Yes, it can. The head of Inress is then claimed to have taken two of the BON members on an all expenses trip to Switzerland-and then supposedly bragged about it! (Martel 2006)

**Economic Frame—General: What are the implications of the problem?** Economic frame assessments of the implications of the leakage focus on the monetary costs of various responses and the financial effects of the leakage on various stakeholders

(physicians, hospitals and review centers). Some statements also point out a case in which opportunistic overseas recruiters (described by one speaker as “vultures”) could seek to profit from the leakage by telling examinees (untruthfully) that they would hire them in spite of it.

**Economic Frame—General: What action should be taken?** Some speakers using this frame call for closure of the offending review centers, or an overhaul of the entire industry, saying that it has become too corrupt to continue in its current form. A few speakers also use economic language to oppose calls for a retake of the licensure exam, stating that the cost of offering the new exam (to the government and to examinees) make it an impossible course of action.

**Economic Frame—Image: What is the problem?** This frame posits that the leakage is an economic problem because it threatens the image and competitiveness of the Philippines and its nurses abroad. The leakage is depicted as an “anomaly” or “scandal” or “illegal” act. The problem is also described as an “unsavory” or “sordid” situation. Speakers using this frame use “clean/dirty” metaphors to describe the impact of the leakage: the affected exam is “tainted” or “marred” or “tarnished” by leakage, and the results of the exam are “under a cloud” or “under a shadow” or “smeared” or affected by a “stench”.

The “image” frame defines the problem of the leakage on the assumption that nursing education and migration are critical parts of the Philippine economy: both the domestic industries (schools, exam review centers, and recruitment agencies) and remittances sent back by Filipino nurses working overseas are perceived as critical parts

of the country's economy. The leakage is a problem because it could threaten the future of the nursing education and migration industries by raising suspicion about the qualifications of Filipino nurses overseas.

**Economic Frame—Image: Who is responsible?** This frame addresses the roots of the problem less specifically than the “general” economic frame, but it tends to blame the leakage on exam review center officials (“cheaters”), who leaked information to inflate the performances of their students and improve their position in a competitive market.

**Economic Frame—Image: What are the implications of the problem?** This frame describes the leakage as a source of shame and embarrassment for the Philippines and its nurses. Some speakers express concerns that the leakage has caused the Philippine nursing profession to lose its prestige and reputation for producing “world-class” nurses and instead become stigmatized by its association with a scandal:

“If we pass everyone, we fail everyone,” said [Senator Richard] Gordon, who expressed fears that if the examinees who took the tests are passed, the image of Filipino nurses would suffer. “There would be less demand for Filipino nurses among hospitals and medical centers, especially in foreign countries. Even the innocent would suffer,” Gordon said in a press statement. By nullifying the results of the exams, Gordon said, the government would show the world “how serious we are in establishing the integrity and credibility of our nurses. This is the best way for our country.” (“Gordon urges new exams for nurses” 2006)

This includes several related impacts: first, a concern about the international image of the Philippines itself, in which speakers ask what other countries will think of the Philippines and Filipinos after learning of the leakage: will other countries think that it is a nation of cheaters? Another suggested effect is that the leakage will ruin the image of Filipino workers in general—a significant concern in a country where overseas employment is a

critical part of the economy. Speakers wonder if the leakage will cause employers abroad to avoid hiring Filipino workers if they are viewed as “tainted”—not trustworthy or qualified—because they have come from the same educational and licensing systems as those now “tainted” by the nursing licensure exam leakage.

Speakers using the “economic-image” frame also express concern that the leakage will affect the image of Philippine systems of professional licensure: what will other countries think of the nursing licensure system in the Philippines? This concern is particularly related to the Philippines’ negotiations with the US National Council of State Boards of Nursing (NCSBN) to offer the US licensing exam (National Council Licensure Exam or NCLEX) in Manila in order to reduce the financial and time investment of US-bound Filipino nurses. Speakers express concern about showing that the country can conduct exams securely and with trustworthy results so that NCSBN will decide to allow the NCLEX to be given in Manila:

Gordon said that an immediate prosecution of the individuals responsible for the leakage will show that the Philippine does not tolerate such a wrongdoing that taints the credibility and integrity of the country’s nursing profession. “We need to show to the NCSB, as well as the general public and the rest of the world, that we are a responsible nation. We will hold the guilty parties behind this fiasco accountable for their actions, because we value the honesty and credibility of our licensure examinations, and the integrity of our Filipino nurses,” Gordon said. (Calumpita 2006)

Also, they wonder about the effect on other Filipino workers who have been licensed under the same system: will their image also be “tainted” so that they become less employable abroad?

Speakers using the “economic-image” frame proponents also express concern about the effect of the licensure exam leakage on the image of Filipino nurses abroad.



They worry that the leakage will cause overseas employers to lose trust in Filipino nurses or to question their qualifications because of their association because of the leakage.

Within this, they express particular concern about the image of the 2006 examinees: will they be “tainted” by their association with the leaked exam and thus unemployable domestically and internationally? This concern is highlighted when the CGFNS refuses to offer visa screening to any applicants from the group that took the affected exam unless the examinees retake the affected sections.

**Economic Frame—Image: What action should be taken?** The “economic-image” frame promotes two measures aimed at redeeming the image of the Philippines and its nurses abroad: first, a retake of the licensure exam. This is represented as a matter of “national interest” or “common good”, a way to “redeem” or “cleanse” the reputation of the examinees and the examination process, and to address questions about the qualifications of the examinees who took the original exam and of Filipino nurses in general. An exam retake is first suggested soon after the leakage becomes public, but it becomes a practical concern after the CGFNS declares that it will not offer visa screening to nurses who took the June 2006 licensure exam retake the affected tests. The retake is needed as a necessary step to preserve the employability of examinees seeking to work in the United States.

Speakers using the “economic-image” frame also encourage the prosecution of parties involved in the leakage—Board of Nursing members and review center operators—in order to show the world that Philippines takes cheating seriously and will work to preserve the “sanctity” of its examination process.

Sen. Richard Gordon is on the right track. Everybody involved in the leakage of the Nursing Board Examinations last June should be prosecuted. If you ask me, they should be put behind bars and the key thrown away...It's a very painful process for the examinees—particularly those who passed without benefit of “insider information”—but bite the bullet, they must now, and take the exams all over again. Painful? Definitely. Not only in terms of time and money. But it's the only way to remove the stigma and show the world that we are not a nation of cheaters, of mediocrity, but of honest people out to redeem their reputation for excellence. (Roxas 2006)

### *Leadership Frame*

**Leadership Frame: What is the problem?** This frame represents the leakage and resulting controversy as the results of poor leadership by various bodies—the Professional Regulation Commission (PRC), Board of Nursing (BON), and others:

The blame for this shocking episode lies fairly and squarely at the grimy feet of the PNA, BON and the Professional Regulation Commission whose members...found themselves, like the three Confucian monkeys, not seeing, thinking or speaking on the evil that this issue so blatantly portrayed. (Martel 2006)

The situation is also problematic because politicians and nursing leaders have mishandled the response, intervening too much or not enough, responding too rashly or too slowly, “flip-flopping” or “doubletalking” on what solutions they prescribe. The situation is characterized as a “fiasco” or “debacle” or “crisis”.

**Leadership Frame: Who is responsible?** The “leadership” frame attributes the controversy to several factors: first, one columnist suggests that the whole licensure system is broken, as evidenced by excerpts from a licensure exam which she characterizes as “stupid and crazy”. If the exam does not reflect what the students are supposed to have learned, how can the system identify proficient nurses accurately?

Others suggest that the licensure examination process and response to the leakage have become political. One person suggests that the leakage was staged by people who hoped that the current BON officials would be implicated and fired, giving them the opportunity to serve on the Board. Others suggest that the process of responding to the leakage has been unduly influenced by politicians and political concerns of the actors involved, rather than a concern for the best interests of the examinees and the country.

**Leadership Frame: What are the implications of the problem?** This frame emphasizes the loss of confidence in several groups of leaders, particularly the Board of Nursing, whose members write the licensure exam questions and are alleged to have leaked them, and the PRC, which it characterizes as mismanaging the investigation and decisions about how to minimize the effects of the controversy:

Those responsible for the scandal clammed up, impervious to the criticism raining down on them. The Board of Nursing and the Philippine Nursing Association stonewalled the issue for as long as they could. Here, too, the reaction from the Office of the President was late in coming. There seemed to be a momentary shock at the seat of power. And when the President gathered her wits about her, she waffled and passed the buck on to the Philippine Regulation Commission, which predictably rejected suggestions that it order a retake, a course of action that would truly put closure to the whole mess. It was understandable. After all, it had authorized those who passed the flawed licensure examination to take their oath of office, in a futile attempt to write finis to the whole sordid affair. (Eclevia 2006)

**Leadership Frame: What action should be taken?** This frame calls for the reorganization of the Board of Nursing and the Professional Regulation Commission in response to the leakage. It calls on officials of various governing bodies—the BON, the PRC and the Philippine Nurses Association (PNA)—to resign for their role in

mishandling the leakage. (In particular, it calls on the PNA president, who is implicated in the leakage and charged with corruption, to resign for his role.) It also makes more general appeals for greater accountability, transparency, and respect for the rule of law among leaders charged with handling the controversy.

### *Nurses' Rights Frame*

**Nurses' Rights Frame: What is the problem?** This frame represents the leakage as a problem because it affects the work prospects of the examinees who took the June 2006 licensure exam. This is unfair to the examinees, who have worked hard to pursue their education and have taken the test in order to begin independent careers and support their families as nurses. The proposal to compel examinees to retake the licensure examination is also unfairly burdensome to them because of its monetary cost and the stress and uncertainty involved.

**Nurses' Rights Frame: Who is responsible?** This frame represents the members of the Board of Nursing who leaked the exam questions as “criminals” or “crooks”, referring to them as the “guilty” party or “perpetrators”. It represents examinees as “victims”:

"We have suffered enough emotional anguish when in fact, we are merely victims of the wrong doings of a few," said Chulou Penales, board of passers committee chairman... (Sesante-Leopoldo 2006)

It tends to blame the problem on those who leaked information rather than students who benefited from the leakage.

**Nurses' Rights Frame: What are the implications of the problem?** This frame emphasizes several related implications of the leakage and response: first, students' plans are in jeopardy or “limbo” until a clear response plan is developed. Will they be forced

to retake the examination? Will they be able to find jobs or not? Will they be discriminated against on the domestic or international markets? Examinees are also affected psychologically by their perilous situation: they are demoralized, “suffering” and traumatized. One student uses the metaphor of “Damocles’ sword” over the examinees’ heads—they are uncertain of what will happen to them and feel constantly under threat.

**Nurses’ Rights Frame: What action should be taken?** Some sources using the “nurses’ rights” frame say that making nurses take a retake is unfair because of the additional cost and effort required of students:

It is unfair that we will all be punished for the mistakes of a few. It is the greatest injustice for all of us who worked so hard to qualify for and pass the exams! We call on our fellow board passers, nurses, nursing faculty, and all nursing students to uphold justice and enjoin the PRC to uphold its decision. No retake of the Nursing Board Exams! Justice to the majority nursing board passers who passed the exams fair and square and their families! (Grageda 2006)

The students should be presumed innocent and spared the cost and stress of retaking the exam, but the “guilty” (those who leaked the examination questions) to be punished. However, others suggest that a retake of the licensure exam is the only fair step on behalf of the examinees, as it gives clears up doubts about their qualifications and gives them the opportunity that they deserve.

### *Professionalism Frames*

**Professionalism Frame—Health & Safety: What is the problem?** This frame posits that the leakage is a problem because it opens up the possibility that nurses who passed because of the leakage are unqualified to be working in health care and could endanger patients. It cites the capability, competence, and knowledge of examinees as particular

concerns, suggesting that the leakage may have allowed some nurses with poor skills to enter the workforce.

**Professionalism Frame—Health & Safety: Who is responsible?** This frame does not attribute responsibility for the leakage to a particular person or group, but it suggests that poor-quality nursing education is a possible root of the problem. With the proliferation of nursing schools, including many of questionable quality, nurses are resorting to taking review center courses and other strategies in order to pass the licensure exam. As a result, regulators cannot be sure where they are getting the information they need to pass the test, and cannot know what they have learned. The huge demand for their services also gives review centers significant power in the licensure examination process and could embolden them to provide illicit information to examinees.

**Professionalism Frame—Health & Safety: What are the implications of the problem?**

The primary concerns about the licensure exam leakage in this frame are the health and safety of patients—the idea that poorly qualified nurses who have cleared the licensure process because of the leakage could endanger patients:

...The senator stressed that “since nurses are charged with the health, medical needs and life of their patients, here and abroad, it is essential that the PRC ensures that licensed nurses are competent and fully equipped to perform the responsibilities of the nursing profession.” (“Nurses trapped in limbo” 2006)

These concerns are expressed occasionally soon after the leakage by leaders in the Philippines, but they become a central part of public discussion when the CGFNS threatens to block nurses who took the affected examination from working in the United States because of the danger they could pose to patients there.

**Professionalism Frame—Health & Safety: What action should be taken?** Local

officials initially invoke the “professionalism-health and safety frame” to call for investigation of the leakage. The frame is invoked later by the CGFNS in order to push for a retake of the affected tests:

The CGFNS insisted that passers retake Tests 3 and 5, where the answers were leaked: "The integrity of foreign licensing systems ultimately affects the health and safety of patients in the United States, a primary consideration of CGFNS in its role in evaluating candidates under US immigration law." (Romero 2007)

After learning that licensure exam passers will not be allowed visa screening without retaking the exam, Filipino leaders repeat the CGFNS’ argument in promoting a retake as the final resolution to the licensure exam leakage controversy.

**Professionalism Frame—Values of Nursing: What is the problem?** This frame

represents the leakage as a problem because it denotes a breakdown of professional values of nurses—caring, honesty, professionalism, and service. The leakage demonstrates that some nurses and leaders are no longer motivated by these values—they do not see the nursing profession as a calling, but rather as an opportunity for personal gain.

**Professionalism Frame—Values of Nursing: Who is responsible?** This frame usually

does not attribute responsibility for the leakage controversy to a particular person or group of people, but to a broader trend of lost values within the nursing profession. One columnist offers an alternative view: that the professions write difficult examinations in

order to maintain their professional status or to be perceived as competitive rather than to assure qualification of examinees.

**Professionalism Frame—Values of Nursing: What are the implications of the problem?** This frame represents the primary implication of the leakage controversy as a loss of respect for the nursing profession, whose reputation has been damaged by the actions of those who have not acted with the integrity and sense of humility and service expected of nurses in participating in the leakage.

**Professionalism Frame—Values of Nursing: What action should be taken?** This frame rejects arguments that the leakage can be resolved without a retake of the licensure exam, arguing that the retake must be undertaken as a matter of “excellence, integrity, and honor”:

We begin by making a collective stand right here, right now. We must tell the PRC and the BON that the nurses and the people are deeply committed to upholding our eternal values: excellence, integrity and honor.

We must make it clear to the commission and the board in no uncertain terms that integrity, excellence and honor are nonnegotiable issues and that we are rejecting their “no-retake” position... Again, what separates the good nurse from the rest? The answer, my dear students, is character. And despite the difficulties, those who advocate a retake of Tests 3 and 5 have demonstrated character. The courage to correct a mistake, the courage to help make our institutions stronger, the courage to go through another examination despite your innocence because it is the necessary thing to do—that is character. (Ang 2006)

**Quantitative Distribution of Frames.** The number of articles about the licensure exam leakage controversy in which each frame was present is shown in Table 4.2. The most frequently appearing frame was the “economic-image” frame, which appeared in 309 of



353 articles (87.5%). The second most frequently observed frame was the “nurses’ rights” frame, which appeared in 182 of 353 articles (51.6%).

**Table 4.2. Quantitative Distribution of Frames (Licensure Exam Leakage)**

<b>Frame</b>	<b>Number of Articles</b>	<b>Most Frequent Sources</b>
Economic-Image	309 (87.5%)	CFO chairman GMA nursing educators Sec of Labor & Employment
Nurses’ Rights	182 (51.6%)	nursing students GMA nursing educators
Leadership	138 (39.1%)	nursing educators nursing students <i>PDI</i> letters
Professionalism-Health & Safety	109 (30.9%)	nursing educators CGFNS nursing students
Economic-General	78 (22.1%)	<i>PDI</i> letters nursing educators review center operators
Professionalism-Values of Nursing	65 (18.4%)	nursing students CFO chairman <i>PDI</i> letters
Culture	19 (5.4%)	<i>PDI</i> letters <i>MT</i> columnists

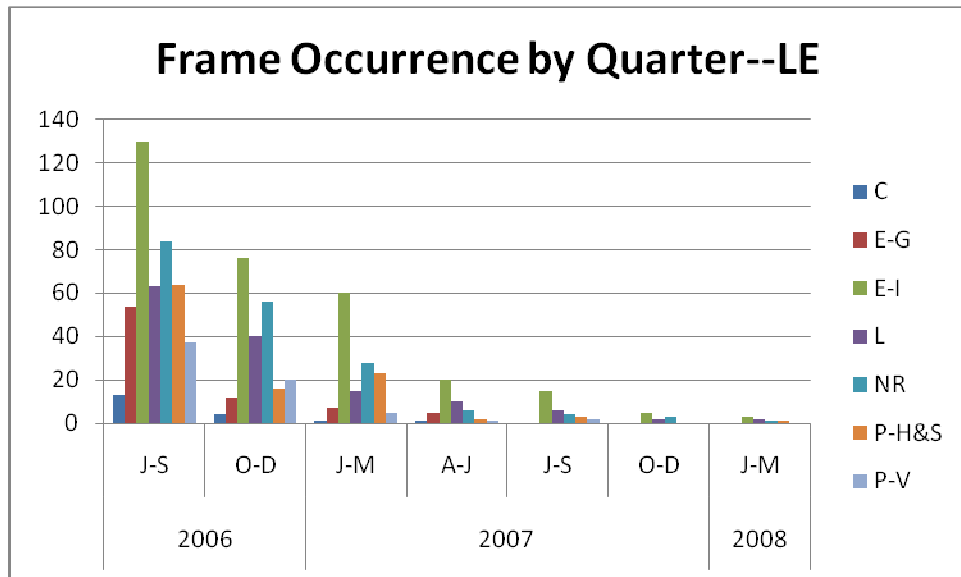
Each of the remaining frames appeared in fewer than 50% of the articles discussing the licensure exam leakage controversy: the “leadership” frame in 138 articles (39.1%), the “professionalism-health & safety” frame in 109 articles (30.9%), the “economic-general”

frame in 78 articles (22.1%), the “professionalism-values of nursing” frame in 65 articles (18.4%) and the “culture” frame in 19 articles (5.4% of total).

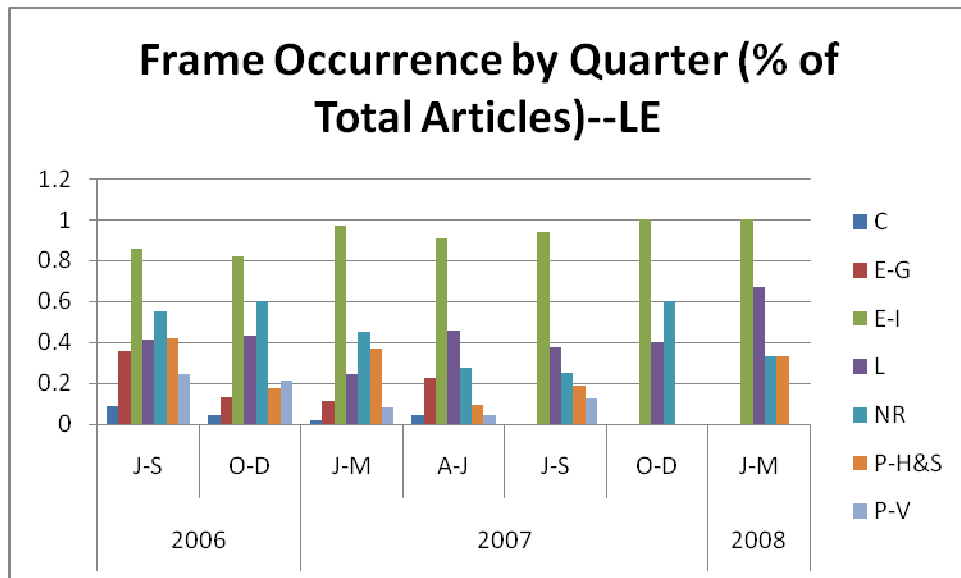
The most frequent sources or “sponsors” of each frame are also noted in Table 4.2. The “economic-image” frame was most frequently attributed to the chairman of the Commission on Filipinos Overseas (CFO—45 articles), President Gloria Macapagal Arroyo (44 articles), nursing educators (40 articles) and the Secretary of Labor and Employment (37 articles). The “nurses’ rights” frame was most frequently attributed to nursing students (49 articles), President Arroyo (24 articles), and nursing educators (24 articles). The “leadership” frame as most frequently attributed to nursing educators (21 articles), nursing students (16 articles) and letters to the editor of the *Philippine Daily Inquirer*. The “professionalism-health and safety” frame was most frequently attributed to nursing educators (20 articles), the CGFNS (16 articles), and nursing students (13 articles). The “economic-general” frame was most frequently invoked in letters to the editor of the *Philippine Daily Inquirer* (10 articles), nursing educators (9 articles), and review center operators (7 articles). The “professionalism-values of nursing” frame was most frequently attributed to nursing students (14 articles), the CFO chairman (8 articles), and letters to the editor of the *Philippine Daily Inquirer*. The “culture” frame was most frequently invoked in letters to the editor of the *Philippine Daily Inquirer* (7 articles) and columns in the *Manila Times* (3 articles).

**Distribution of Frames over Time.** The distribution of frames by quarter (June-September 2006, etc.) in the coverage of the licensure exam leakage is shown by number of articles in Figure 4.3 and by percentage of total articles in Figure 4.4.

**Figure 4.3. Distribution of Frames by Quarter (Licensure Exam Leakage—Number of Articles)**



**Figure 4.4. Distribution of Frames by Quarter (Licensure Exam Leakage—Percentage of Articles)**

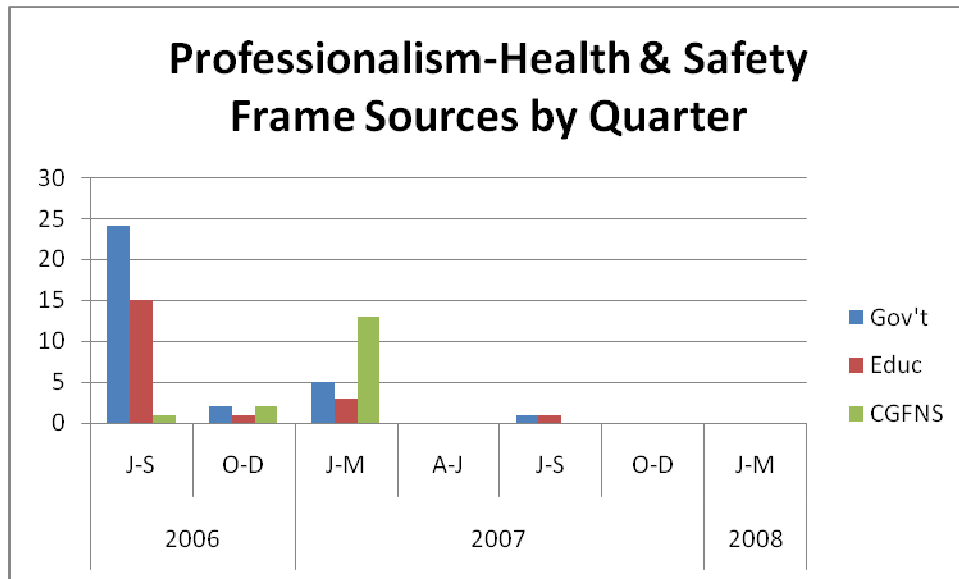


The “economic-image” frame appeared in more articles than any of the other frames in all quarters during the study period. Of the 7 frames found in the coverage of the licensure exam leakage, only the “economic-image”, “leadership” and “nurses’ rights” frames appeared in every quarter of the study period.

The first two quarters (June-September 2006 and October-December 2006) showed the greatest variety of frames as various ideas about what the problem was and what to do about it were discussed in the immediate aftermath of the leakage. The “economic-image” frame was the most prominent frame throughout the study period—it appeared in at least 80% of articles each quarter, and its appearances approached 100% of articles in the latter half of the study period. The “nurses’ rights” frame emerged as the leading alternative perspective to the “economic-image” frame for the first 3 quarters of the study period. In the latter half of the study period, the “nurses’ rights” frame received less extensive coverage, and the “leadership” frame reemerged as the second-most prominently invoked frame in 3 of the latter 4 quarters.

Appearances of the “professionalism-health & safety” frame had 2 peaks, during the June-September 2006 quarter (invoked mostly by government officials and educators in the immediate aftermath of the leakage) and in the January-March 2007 quarter (invoked mostly by the CGFNS after its decision to deny visa screening to affected examinees was announced). Figure 4.5 shows the distribution of references to the professionalism-health and safety frame between government representatives, educators and the CGFNS over time.

**Figure 4.5. Professionalism-Health & Safety Frame Sources by Quarter**



As the figure shows, the professionalism-health & safety frame received its highest volume of coverage during the first quarter of the study period. At that time its most prominent sources were government officials and educators, many of whom called for examinees to retake the licensure exam in order to reassure the public of their knowledge and ability to provide quality patient care. It received relatively little attention during the October-December 2006 quarter once a preliminary resolution (a recomputation of exam scores) was reached, but peaked again in the January-March 2007 quarter after the CGFNS announced that it would refuse visas to affected examinees because of concerns about their ability to provide quality care to patients in the United States.

#### ***Licensure Exam Leakage: Interview Results***

This section discusses findings from interviews of key informants representing four key groups with an interest in the licensure exam leakage: the Philippine government,

the Department of Health (on behalf of the health sector), nursing educators, and nursing professional organizations (the Philippine Nurses Association and the Board of Nursing). It describes how members of each group identified the problem, attributed responsibility, described the implications of the problem, and prescribed solutions.

**Government: What is the problem?** The government officials described the leakage primarily as an economic problem because of its impact on the image and reputation of Filipino nurses and the public integrity of the licensure exam process (an assessment that aligned with the “economic-image” frame in the newspaper coverage). One official stated that the leakage was a problem because it threatened the future of Filipino nurse migration by causing the credentials of everyone licensed under the Professional Regulation Commission (PRC) system to be questioned, and it made the Philippines look like a country of cheaters to the outside world.

**Government: Who is responsible?** The government officials held PRC leaders responsible for failures related to the leakage. One official cited in particular the PRC’s failure to react strongly and quickly when the leakage became public, which she called “disgusting”. She also blamed the review center operators implicated in the leakage for their “blatantly arrogant and shameless” actions.

**Government: What are the implications of the problem?** Government officials’ assessments of the implications of the leakage also aligned closely those of the “economic-image” frame from the newspaper coverage. One government official stated that besides its negative effect on the image of examinees who took the affected nursing licensure examination, the leakage caused the credentials of all professionals licensed

under the PRC system to be questioned—the examination system was “tarnished” by the leakage, and authorities in other countries questioned its value for assessing the qualifications of Filipino nurses.

He expressed particular concern that the damaged image of the Philippine licensure system could cause the Philippines to lose its bid to hold the US National Council Licensure Exam (NCLEX) in Manila—an effort for which he was primarily responsible. Philippine government leaders had worked hard to convince US authorities that the country could give the NCLEX securely, but the leakage caused National Council of State Boards of Nursing (NCSBN) leaders to question whether the exam could be protected adequately. Philippine government leaders were deeply concerned that the Philippines would lose its bid to hold the NCLEX after a long effort, and it was important to them to do whatever necessary to demonstrate to NCSBN leaders that they were committed to protecting the integrity of the examination process in the Philippines. The other official noted that public “outrage” over the leakage created an opportunity for reform in the nursing sector and licensure system, and the Philippine government was determined to make the most of it.

At the same time, the official stated that he did not believe that the leakage would have a long-term effect on nurse migration from the Philippines. He invoked the microeconomic language of “push” and “pull” factors to explain why nursing would remain strongly connected to migration in the country: “the push of poverty and the pull of the good life will always remain a force to reckon with on migration issues”. He stated that Philippine nurse migration was more likely to be limited by visa quotas in receiving countries than by declining demand due to the leakage.

**Government: What action should be taken?** Government officials' chief objective in recommending solutions for the licensure exam leakage was to prevent similar episodes in the future and secure the country's image abroad. In order to do this, they called for reforms in the PRC licensure system, a retake of the affected nursing licensure exam, and prosecution of future violators, stating that protecting the integrity of Filipino nurses "starts with a competent and credible examination process". They hoped that these steps would protect the employability of the affected students overseas and convince NCSBN authorities that they had "cleaned up" the process and were capable of monitoring the NCLEX in the Philippines without any problems. One official described the formation of a task force to manage exam security that included law enforcement officials as an essential part of this effort.

This official also invoked language similar to that of the nurses' rights frame to state that the licensure exam retake was an important way to protect the future employability of Filipino nurses, despite criticism of the retake from some nurses' welfare advocates. He criticized people arguing that nurses should not have to retake the licensure exam on the basis of nurses' rights for approaching the issue on the basis of emotions and not thinking it through. Instead, he asserted that a retake was the only way to help the nurses in the long run by protecting their reputation and employability:

So it's got to be addressed the way it should be addressed: you talk about the system, you fix the system. So it's not a question of emotions or not having taken pity on the students, it's a question of protecting their future, protecting their integrity... And that being so, I have an obligation to see to it that the reputation of the professionals we're sending to the US retain their credentials, I help protect their integrity. That being so, if I'm able to help protect the integrity of the nurses, especially those going to the US, naturally it would be good in the short and long run, not only for the nurses but also for the Filipino as a whole.



This official saw protecting students' integrity and reputations as a matter of "obligation" to the nurses and to the Filipino people. He noted also that the cleanup effort (including the retake and new regulations on future licensure exams) also received support from other professions for similar reasons, as it would affect the management and reputation of all professional examinations managed by the PRC.

**Department of Health: What is the problem?** The Department of Health (DOH) officials identified the licensure exam leakage primarily as an economic problem because of its impact on the global reputation of Filipino nurses and their likely future as an export commodity from the Philippines. They also identified it as an image and leadership problem for several nursing sector agencies that were implicated or exercised poor management in various aspects of the leakage, including the Professional Regulation Commission (PRC), the Board of Nursing (BON) and the Philippine Nurses Association (PNA).

**Department of Health: Who is responsible?** The DOH officials suggested two key conditions that led to the licensure exam leakage: poor quality nursing education (particularly in preparation for the licensure exam) and corruption ("systemic...cheating") within the PRC licensure system.

**Department of Health: What are the implications of the problem?** One DOH official stated that the leakage controversy would likely influence the affected students' job prospects abroad, but the other official expressed confidence that the leakage would not affect the global reputation or marketability of Filipino nurses in the long term. He stated

that the “superior bedside manner”, along with excellent English language skills, to the economic importance of nurses, describing them as the key to maintaining the “competitive advantage” of Filipino nurses.

The other DOH official stated that the chief implication of the licensure exam leakage was its exposure of corruption among nursing sector leaders, particularly the criminal actions of a nursing school and review center owner who was criminally charged in the leakage. Since this person was also president of the Philippine Nurses Association at the time, his actions also reflected negatively on the PNA and caused divisions in the nursing sector. This official saw the leakage more as a problem of personal corruption than a systemic problem—a few bad elements rather than an indictment of the whole system.

Both Department of Health representatives stated that one positive outcome of the leakage controversy was the improved degree to which leaders on the PRC and Board of Nursing were held accountable for their actions. Both stated that PRC leaders had previously been notoriously corrupt, “openly, brazenly selling questionnaires”, as the Board of Nursing representatives were accused of doing in the case of the leakage. The leakage controversy forced the PRC to address these internal problems by improving exam security and holding its members accountable for selling exams. Officials stated that these changes also helped to improve the image of the Board of Nursing and the licensure exam process, “cleaning up” and making the Board of Nursing more “respectable” and restoring credibility to the nursing licensure exam process.

**Department of Health: What action should be taken?** DOH officials supported the retake of the licensure exam to improve the image and employability of Filipino nurses,

although one of them criticized the decision to require it only of nurses who wanted to work in the United States. He called for the retake order to include all of the affected nurses, complaining that the decision to require a retake of the licensure exam only for US-bound nurses represented a double standard—in other words, the leakage was a health and safety issue for anyone being treated by the nurses who took the affected licensure exam. He stated a desire for all nurses to be held to high testing standards and a concern about the ability of nurses to demonstrate adequate knowledge and skills by retaking the licensure exam, no matter where they intended to work.

**Educators: What is the problem?** Both of the educators acknowledged the leakage as a potential economic problem because of its impact on the image of the Philippines’ nursing sector. However, they also stated that the leakage happened because of the growing economic importance of the sector, particularly commercialization, poor quality of education and growing desperation for overseas employment opportunities. One of the educators described the leakage as an “ethical” and “moral” problem for the nursing sector, which experienced a decline in professionalism and professional values as it became increasingly lucrative as a pathway to migration opportunities.

**Educators: Who is responsible?** Both of the nursing education leaders attributed the leakage (at least in part) to the declining quality of nursing education in the Philippines, the failure to close poorly performing nursing schools and the growing role of licensure exam review centers in nursing education. One of the educators noted that while review centers originally offered review classes only for the US licensure exams, they have now taken such a prominent role in preparing students for the Philippine licensure exam that

the onus is no longer on nursing schools to produce quality graduates. Since many schools do not have the capacity to train students for safe practice, so they contract with review centers in an attempt to make up for shortcomings in their programs. In this context, review centers can “cash in” or capitalize on the demand for nursing education and licensure training. She stated that review centers gained power in the process by saturating media, “hard sells” with schools, and promising monetary donations to nursing schools in exchange for business.

Both of the educators also held the Professional Regulation Commission responsible for failures related to the licensure exam leakage. One described the leakage controversy as an “eye opener” about the PRC’s inability to prevent and address problems with its licensure examinations. She stated that the PRC could have prevented the issue from “boiling over” to the degree that it did by addressing it as soon as its leaders heard about it, withholding licensure until an investigation could be completed, etc. Instead, they did not take decisive action, denied that cheating had occurred, allowed licensure, and delayed addressing the leakage until it could not be denied (a failure of leadership).

The other educator echoed this perspective, stating that the PRC missed many opportunities to address the leakage before it became a public issue. Instead, the PRC acted like it was trying to cover up something—whether or not that was actually the case, it created the impression that decisions were not being made honestly or with pure motives. Other nursing sector leaders urged PRC leaders to wait to give the oath-taking to affected examinees until after the matter had been investigated, but the PRC instead

failed to act appropriately and “rushed” the oath-taking. These actions seemed very surreptitious and created the impression that the PRC had something to hide.

One of the educators stated that the degree to which the response to the leakage became “political” (involving members of Congress) was inevitable because politicians had personal stakes in a variety of elements of nursing education—nursing schools, review centers, etc. In this context, the response to the leakage was fragmented and politically fraught—lower-level officials made decisions claiming support from higher-level officials (PRC leaders claiming support of the President) even if they knew that their perspectives were wrong. The nursing sector itself was not unified, and government leaders “flip-flopped” for a long time before making a firm decision about what to do about the leakage. Eventually they “coughed up” money to fund the retake, but only after a long discussion—the President initially supported the retake, but was pressured to change her mind by various officials before the Council on Graduates of Foreign Nursing Schools (CGFNS) declared that it would refuse entry to the US to examinees forced them to make a final decision to offer a retake. Both educators characterized this series of events as “embarrassing” and noted that attempts to negotiate with the CGFNS even after the decision also brought shame on the government, which nevertheless allowed the negotiations to continue.

**Educators: What are the implications of the problem?** The nursing educators agreed that the licensure exam leakage could have severe consequences for the Philippine nursing sector in general and for the affected examinees in particular. One of the nursing education leaders stated that examinees who took the affected test would always have the “2006 brand” unless the controversy was addressed directly, which limited their

employability both domestically and abroad—even if employers did not make it obvious, they tried to avoid hiring examinees from this batch if possible. The other said that without intervention, the controversy could “mar or damage the reputation of Philippine nursing abroad fatally”. She also stated that the Philippine Nurses Association’s leadership position in the sector was also threatened by the activities of its president, whose constant news exposure after his indictment in connection to the leakage was deeply embarrassing.

Despite her general sense of optimism about the global reputation of Filipino nurses after a retake was offered, one educator noted that the situation was still fragile:

There is an impact still, because for example we feel the pressure to show we have integrity, that you can rely on our degrees. That is—you know, it’s going to stay for a bit, and the way we are acting today and the next few years will have to redeem us if we can redeem it. It’s very hard to redeem in the face of this ongoing new problem of the unemployment—everybody’s trying to go abroad, and I’m sure that they’ll find illegal means to do that.

Her hope for the future of Filipino nurses was tempered by a realization that growing domestic unemployment could cause nurses to seek overseas employment by any means necessary, which could lead to further incidents and cause the improvement or “redemption” of the reputation of Filipino nurses to be short-lived.

**Educators: What action should be taken?** While the nursing educators criticized the fact that some people only pursue nursing education as a route out of the country, they also acknowledged the economic importance of the profession in their expressions of support for the licensure exam retake, which they viewed as necessary to protect the global image and competitiveness of Philippine nursing. Both educators cited the activity of the CGFNS as particularly important to the retake effort, despite the fact that both

characterized the CGFNS intervention in the situation as “embarrassing”. One described the decision to require a retake only of US-bound nurses as a “win-win” because it did not “put into question the Philippine license”, but enforced the CGFNS requirement for US employment. The other praised the CGFNS’s decision as critical in helping Philippine nursing leaders to bring about the exam retake, as it forced the government to act in the way that educators and other sector leaders already wanted. She also praised the government decision to fund the retake as essential for quieting critics who argued against the retake because of its cost to examinees.

**Professional Organizations: What is the problem?** The Board of Nursing (BON) representative described the licensure exam leakage as a problem of leadership and professional integrity for the nursing profession and its regulatory agencies (the Professional Regulation Commission (PRC) and the Board of Nursing). She also acknowledged that the leakage was likely to affect the image of Filipino nurses domestically and abroad since it reflected negatively on the credibility of the nursing licensure examination process.

The PNA representative, while acknowledging the effect of the leakage on the credibility of Filipino nurses, focused most of her attention in the interview on the proposed retake. She defined the retake as a potential nurses’ welfare issue in response to concerns expressed by PNA members—the idea that the retake was unfair to nurses who had not participated in the leakage.

**Professional Organizations: Who is responsible?** The Board of Nursing representative held the former members of the BON who were implicated in the leakage responsible for

their role in creating the problem. She stated that BON members are expected to do their job diligently, honestly, and fairly—to do their best on behalf of the profession—so the involvement of members in the leakage was a violation of this mandate and must be taken seriously.

The PNA representative did not directly attribute responsibility for the leakage; instead, she focused on advocacy efforts against the proposed retake in its wake.

**Professional Organizations: What are the implications of the problem?** The Board of Nursing representative suggested that the proud tradition of Filipino nursing could be threatened unless definitive action was taken to address the leakage. She described her idea of the “Philippine brand” of nursing as follows:

In general foreigners love our nurses, even all things equal in terms of tech competence, when you talk about there’s something in the Filipino, there’s that distinction of warmth and touch which when a patient experiences a state of illness or a state of chronic illness, they very much appreciate that. Because there’s a personal caring, warm touch which I should say is very much in the culture. And I’m not just saying we are a caring people, we are warm people, and if that impression in the context of therapeutic use of self—that is a distinction of the Filipino nurse.

She stated that the nursing profession as well as the PRC and the Board of Nursing initially lost credibility in the leakage incident, but they were able to take advantage of the “crisis point” as an opportunity to improve and “uplift the profession”. In a statement that evoked the “culture” frame in the newspaper coverage, she also suggested that the leakage had a broader negative effect for Filipinos, as it created the impression that people could “have the easy way out”—and that nursing could be an easy pathway to migration opportunities.

The PNA representative agreed with the assessment that the effects of the



licensure exam leakage on the image of Filipino nurses—while initially negative—would not linger. She expressed confidence that Board of Nursing had taken steps to resolve the issue, and nurses’ integrity and image was “slowly getting up” around the world.

**Professional Organizations: What action should be taken?** The Board of Nursing representative called for strong action to address the direct effects of the leakage on the image and reputation of Filipino nurses around the world. First, she stated that a retake of “tainted” questions was essential in establishing credibility of examination process and examinees, to show that Philippine officials are committed to correcting problems with their examination system. She also noted that the licenses of two former Board of Nursing members implicated in the leakage were revoked in order to demonstrate government’s seriousness about addressing the controversy. She believed that these steps were critical in order to safeguard the credibility of the examination process and protect the integrity and credibility of the Board of Nursing and the PRC.

The Board of Nursing representative also called for broader changes in the professional development orientation in the Philippine nursing sector in response to the leakage. She criticized the fact that some people only pursue nursing education as a route out of the country, stating that she wished that potential students could be screened for their commitment to the profession. She described a “road map” that has been developed since the leakage and is currently being implemented to improve professional development and training within the nursing sector. She also discussed her hope that the development of unique and positive Filipino values would become a part of nursing education and professional development in the future:

I see that as really integrating the cultural aspect as value for the development of the professional nurse. We have a word for that, you know. It's "maawa sa akin"—it's close to compassion, warmth and compassion. It's close to touch—it can also be physical touch, but it is touch really that expresses so much of caring.

This statement can be linked to her discussion of the "Philippine brand" of nursing—the desire for a uniquely Filipino style of nursing that makes Filipino nurses particularly marketable and well-suited for the profession.

The PNA leader disagreed with most of the other informants' positions on the licensure exam retake. She described her organization's anti-retake position as motivated by the PNA's mandate as a welfare organization for nurses. She stated that as a matter of responsibility to this mandate and to its constituents (the nurses), the PNA advocated for no retake of the nursing licensure exam. She appealed to the presumption of innocence as the guiding principle for making a decision about the exam retake, suggesting that because "not everybody was in the leakage" a decision to require the retake of all examinees would be unfair.

### ***Licensure Exam Leakage: Summary of Results***

The licensure exam leakage controversy was discussed in a total of 353 articles in the *Manila Times*, *Philippine Daily Inquirer*, and *Philippine Star* between June 2006 and March 2008. The most frequently appearing frames in the newspaper coverage of the licensure exam leakage were (in descending order) the "economic-image", "nurses' rights", "leadership" and "professionalism-health & safety" frames. The "economic-image" frame—which defined the leakage as a problem because of its potential to damage the image of Filipino nurses abroad—appeared most prominently in every

quarter throughout the study period, followed by the “nurses’ rights” frame in the first half and the “leadership” frame in the second half of the study period. The “professionalism-health & safety” frame was invoked soon after the leakage by government officials and nursing educators and later in the study period by the Council on Graduates of Foreign Schools (CGFNS), whose decision to refuse visas to the June 2006 examinees compelled the Philippine government to offer a retake of the affected tests.

Nearly all of the key informants interviewed (with the exception of the Philippine Nurses Association (PNA) representative) defined the leakage as an “economic-image” problem and supported the decision to offer a retake of the affected tests in order to protect the image and employability of Filipino nurses abroad. Government officials also described the retake as an important way to protect the Philippines’ bid to hold the US National Council Licensure Exam (NCLEX) domestically. In addition to expressing support for the retake, health sector leaders also described the leakage as a leadership problem and called for accountability for the implicated leaders. Nursing educators assessed the leakage to be a professional values problem and supported the retake to protect the integrity of the nursing sector locally, as well as its global competitiveness. Professional organization representatives had split opinions on the impact of the leakage: the Board of Nursing representative described it as a leadership and credibility problem for the nursing sector and supported the retake and other improvements in professional development, while the PNA representative opposed the retake as a matter of protecting nurses’ welfare.

### ***JPEPA: Frame Analysis Results***

This section describes the final study sample of newspaper articles and qualitative description and quantitative distribution of frames in the newspaper coverage of the Japan-Philippines Economic Partnership Agreement (JPEPA) nursing provision.

**Study Sample.** The nursing provision in the JPEPA was the subject of 142 articles published in the *Manila Times*, the *Philippine Daily Inquirer* and the *Philippine Star* between June 2006 and March 2008. The number of articles per month is shown in Figure 4.6. The JPEPA nursing provision first received substantial coverage in September 2006 (11 articles), when President Gloria Macapagal Arroyo and Japanese Prime Minister Junichiro Koizumi first signed the agreement. It also received significant coverage in November 2006 (10 articles), when the Philippine Senate began hearings examining the provisions of the agreement, including those governing the entry of Filipino nurses into Japan and toxic waste from Japan into the Philippines, and the President officially submitted it for ratification. Another small peak in coverage occurred in January 2007 (10 articles), as debate continued with the input of academics and other interested parties and Filipino nurses “missed” their first opportunity to take the Japanese licensure exams.

In response to several developments (the signing of a free trade agreement between Indonesia and Japan that included a similar provision allowing Indonesian nurses to work in Japan, the beginning of Senate Committee on Foreign Relations hearings on the JPEPA, and advocacy groups’ demands that the agreement be renegotiated), the JPEPA provision governing Filipino nurses’ entry into Japan was covered in 24, 10 and 31 articles published in August, September and October 2007

respectively. The total of 65 articles over this 3-month period represented over 45% of the total 142 articles published. Another small peak in coverage occurred in January 2008 (10 articles) as lawmakers reconvened to debate the ratification of the JPEPA, but coverage dropped off again in February and March 2008 as the agreement remained unapproved at the end of the newspaper article sampling period.

**Figure 4.6. Number of Articles per Month (JPEPA—All Newspapers)**

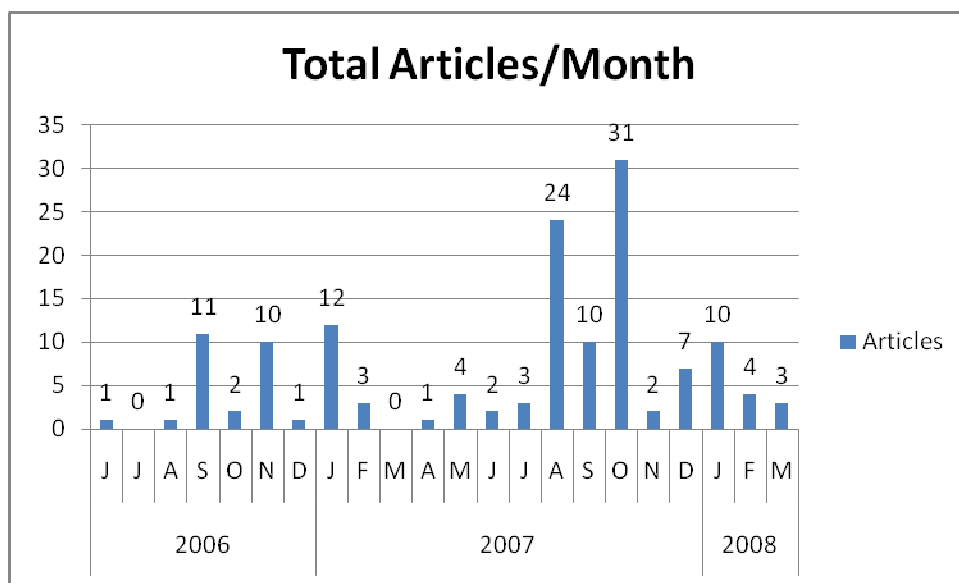


Table 4.3 shows the number of articles published each month by newspaper. The sample included 60 articles from the *Manila Times*, 38 articles from the *Philippine Daily Inquirer* and 44 articles from the *Philippine Star*.

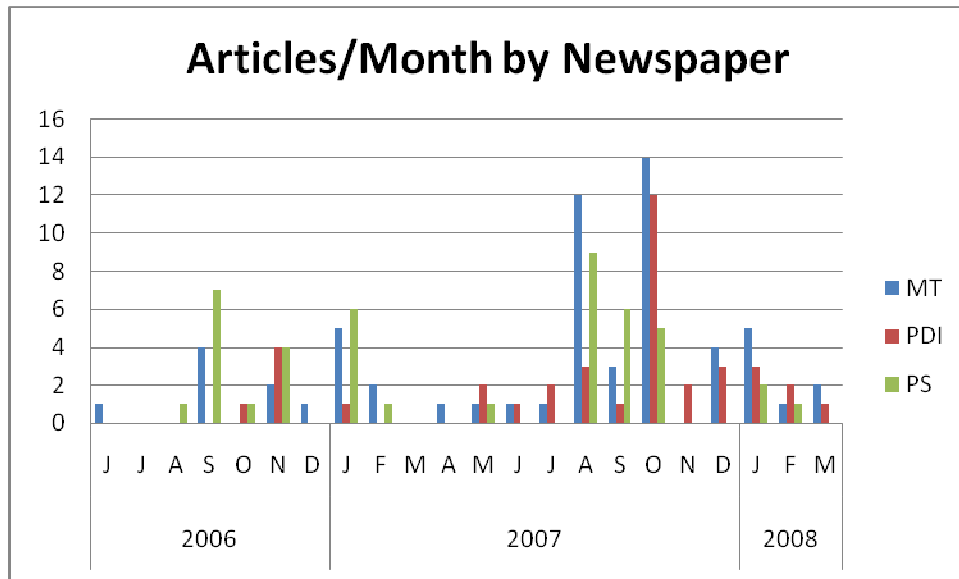
Coverage by all three newspapers was initially sporadic after the JPEPA was signed in September 2006. The nursing provision was not covered by all newspapers in the same month until November 2006. The *Philippine Star*'s 7 articles published in September 2006 were the largest number published by any newspaper in 2006. All three

newspapers reached their overall peaks in coverage in late 2007: the *Philippine Star* in August (9 articles) and the *Manila Times* (14 articles) and the *Philippine Daily Inquirer* (12 articles) in October. For all three newspapers, the number of articles published in the year 2008 peaked in January and declined in February and March. The number of articles per month by newspaper is also shown graphically in Figure 4.7.

**Table 4.3. Number of Articles per Month by Newspaper (JPEPA)**

<i>Year</i>	<i>Month</i>	<i>Manila Times</i> (n = 60)	<i>Philippine Daily Inquirer</i> (n = 38)	<i>Philippine Star</i> (n = 44)
2006	June	1 (1.7%)	0 (0.0%)	0 (0.0%)
	July	0 (0.0%)	0 (0.0%)	0 (0.0%)
	August	0 (0.0%)	0 (0.0%)	1 (2.3%)
	September	4 (6.7%)	0 (0.0%)	7 (15.9%)
	October	0 (0.0%)	1 (2.6%)	1 (2.3%)
	November	2 (3.3%)	4 (10.5%)	4 (9.1%)
	December	1 (1.7%)	0 (0.0%)	0 (0.0%)
2007	January	5 (8.3%)	1 (2.6%)	6 (13.6%)
	February	2 (3.3%)	0 (0.0%)	1 (2.3%)
	March	0 (0.0%)	0 (0.0%)	0 (0.0%)
	April	1 (1.7%)	0 (0.0%)	0 (0.0%)
	May	1 (1.7%)	2 (5.3%)	1 (2.3%)
	June	1 (1.7%)	1 (2.6%)	0 (0.0%)
	July	1 (1.7%)	2 (5.3%)	0 (0.0%)
	August	12 (20.0%)	3 (7.9%)	9 (20.5%)
	September	3 (5.0%)	1 (2.6%)	6 (13.6%)
	October	14 (23.3%)	12 (31.6%)	5 (11.4%)
	November	0 (0.0%)	2 (5.3%)	0 (0.0%)
	December	4 (6.7%)	3 (7.9%)	0 (0.0%)
2008	January	5 (8.3%)	3 (7.9%)	2 (4.5%)
	February	1 (1.7%)	2 (5.3%)	1 (2.3%)
	March	2 (3.3%)	1 (2.6%)	0 (0.0%)

**Figure 4.7. Number of Articles per Month by Newspaper (JPEPA)**



It is worth noting that the overall volume of coverage for each newspaper is different for the nurses in JPEPA controversy than for the licensure exam leakage controversy: the *Philippine Daily Inquirer* published the largest number of articles (154—43.6% of total) about the licensure exam leakage controversy, but the fewest articles of any newspaper about either controversy (38—26.8% of total) about the inclusion of nurses in JPEPA. The *Manila Times* published the most articles (60—42.2% of total) about the inclusion of nurses in JPEPA, and the second most (131—37.1%) about the licensure exam controversy. The *Philippine Star* published the fewest articles (68—19.3% of total) in its coverage of the licensure exam controversy, but it published the second most articles (44—31.0% of total) about the inclusion of nurses in the JPEPA.

**Qualitative Description of Frames.** Frames used to discuss the JPEPA nursing provision controversy fall into 3 main categories: two economic frames (an “opportunity”

frame, which focuses on the economic possibilities of including nurses in the JPEPA, and a “critical” frame, which critiques the provisions of the agreement), a “nurses’ rights” frame, and two “professionals” frames (a positive frame and a critical frame). This section describes the functions of each frame (problem identification, attribution, implications, and prescriptions) and the framing devices (metaphors, catchphrases, depictions, roots, consequences, and appeals to principle) employed in support of these functions.

### *Economic Frames*

**Economic Frame—Opportunity: What is the problem?** This frame suggests that the inclusion of nurses in the JPEPA is not a problem, but an opportunity. Speakers use the image of Japan “opening its doors” or “opening its labor market” to Filipino nurses to describe the agreement. They suggest that this is a good development for a variety of reasons to be described below. This is the first time that Japan has allowed Filipino nurses to enter its labor market. Speakers use catchphrases such as a “historic” development, a “landmark” agreement, a “milestone” in Philippines-Japan relations:

"It's probably the most important bilateral economic agreement between the Philippines and Japan in the last 50 years!" exclaimed Press Secretary Ignacio Bunye. The pact features not only trade of goods and services but unprecedented steps to open the door for Philippine nurses to work in Japan. (Lopez 2006)

**Economic Frame—Opportunity: Who is responsible?** The government (particularly President Gloria Macapagal Arroyo’s administration) takes credit for securing the provision allowing nurses to work in Japan under the JPEPA. Government negotiators tout the longstanding “close relationship” between the Philippines and Japan as an



important factor in making the agreement possible. The agreement partially compensates for jobs and revenue lost when Japan reduced the number of visas available to “entertainers” (sex workers) from the Philippines under pressure from the United States for human trafficking.

**Economic Frame—Opportunity: What are the implications of the problem?** This frame suggests that the inclusion of nurses in the JPEPA is a great opportunity for the Philippines and will lead to increased participation of Filipino workers in the Japanese workforce in the future. Japan has an aging workforce, high turnover, and growing imbalances between the supply and demand for health care workers, while the Philippines has a surplus of nurses. Japan’s service sector is a huge part of its economy, so beginning to send nurses now will make it easier to send other Filipino service workers to Japan later. Also, if the Philippines fails to act quickly, there are other countries (particularly Indonesia) that are already ratifying similar treaties with Japan:

If it plays its cards right, the Philippines can very well fill the need. Of course, that means the Senate should ratify the treaty first. Failure to do so will drive Japan into the arms of other countries for its manpower requirements, specifically Indonesia, Thailand, Singapore and Malaysia, which by the way have already concluded a bilateral trade agreement with that country. (Eclevia 2007)

The Philippines runs the risk of losing its position in the Japanese market if it does not also ratify the JPEPA as soon as possible.

**Economic Frame—Opportunity: What action should be taken?** This frame calls for the JPEPA to be ratified so that nurses can start going to Japan as soon as possible, and so that it does not lose this special position in the Japanese labor market to competing countries such as Indonesia (which ratifies an agreement to send its nurses to Japan

during the study period). For these reasons, speakers appeal to principles such as duty and the national interest to call for the quick approval of the JPEPA.

**Economic Frame—Critical: What is the problem?** This frame posits that including nurses in the JPEPA is a problem because the provision was only included so that the Philippines would agree to accept toxic waste from Japan. Rather than being a real concession on the part of the Japanese government, it treats nurses as a “bargaining chip” added to the agreement in order that Philippine government would accept the otherwise unpopular toxic waste provision.

**Economic Frame—Critical: Who is responsible?** This frame suggests that the Philippine government is responsible for the problem: it did not stand up for its people in agreeing to allow toxic waste into the country in exchange for having Filipino nurses allowed into Japan, and it was not transparent with the Filipino people in accepting this part of the agreement.

**Economic Frame—Critical: What are the implications of the problem?** The primary implication expressed within this frame is the concern that the JPEPA provision reducing tariffs on Japan’s toxic waste entering the Philippines will send the Philippines’ “clean nurses” to Japan in exchange for “dirty garbage” sent from Japan to the Philippines. This is an exploitative and unconstitutional agreement, and it will put the environment and the health of the Filipino people at risk:

“We’re sending them healthy bodies, [caregivers] and nurses who will take care of their health, and what do we get? Poison,” said Mimi Sison, Green Initiative Inc. chief executive officer. (Yap 2006)

**Economic Frame—Critical: What action should be taken?** This frame posits that the perceived tradeoff of allowing Filipino nurses to work in Japan in exchange for allowing Japan to dump toxic waste in the Philippines is unconstitutional, so the JPEPA should be rejected or renegotiated before the Philippines agrees to participate:

An assault on the Constitution. That is how three prominent lawyers have described the Japan-Philippines Economic Partnership Agreement...I listened to the three Monday morning make their presentation before the two Senate committees conducting hearings on the proposed treaty...I see no compelling or cogent reason why the Senate should ratify JPEPA, now and in the future. JPEPA is simply a bad deal. It will enable the Japanese to dump waste in the Philippines and yet treat Filipino nurses as temporary workers even after they have learned to speak-and write-in Japanese, fluently. It runs roughshod over the Constitution. Every Filipino who loves himself, loves his people and loves his country should raise his fist against this treaty. (Lopez 2007)

#### *Nurses' Rights Frame*

**Nurses' Rights Frame: What is the problem?** This frame highlights the fact that the provisions of the JPEPA actually make it very difficult for Filipino nurses to enter the workforce: they are accepted into the Japanese workforce as trainees rather than fully licensed nurses and are required to take the nursing licensure exam in Japanese. While it appears on the surface to be a groundbreaking development, the treaty actually will not benefit Filipino nurses and does not adequately protect them. The provisions have been misrepresented to nurses, and in reality the agreement will lead to a neocolonial “slave trade” of nurses:

“This requirement alone is extremely difficult...but even after our workers pass the gauntlet of these stringent requirements, what will they get? Only a temporary, three-year working permit. Such a temporary status severely undermines their rights and welfare...In essence, the professional advancement and future as immigrants of Filipino nurses and caregivers in

Japan are already compromised by JPEPA even before they begin their employment there...With JPEPA, the Philippine government is institutionalizing the practice of selling off Filipinos as cheap labor. It has made Filipino migrant workers even more vulnerable to discrimination and abuse.” (Mendez 2007)

**Nurses’ Rights Frame: Who is responsible?** The nurses’ rights frame holds Philippine and Japanese government negotiators responsible for the problem. They failed to consult with nursing groups such as the Philippine Nurses Association (PNA) to ensure their endorsement before signing the agreement.

**Nurses’ Rights Frame: What are the implications of the problem?** This frame suggests that nurses who work in Japan under the JPEPA provision will not actually receive the stated benefits from their work in Japan. They will be forced to work as trainees with few protections, and they will be required to take the Japanese licensure exam in Japanese in order to gain full employment status. While some language training is provided for nurses, the language is very difficult to learn, and they will be unlikely to pass the licensure exam in Japanese. If that happens, they will be forced to return home after their 3-year training term is up. Also, nurses run the risk of being exploited (sexually or otherwise) by their employers, or of being forced into “entertainment” (sex) work if they cannot complete the training and licensure requirements:

Carmelita Nuqui, who heads...a nongovernment organization assisting Filipino women migrants in Japan..., believes that given the terms of the JPEPA, the prospect of Filipino nurses and caregivers facing a lot of discrimination or treated as second-class professionals is not remote. “They may be given jobs lower than they expect or, worse, may even end up working in entertainment joints for lack of better opportunities,” she says. (Panao 2007)

**Nurses' Rights Frame: What action should be taken?** This frame suggests that because it does not achieve the benefits that are attributed to it, the JPEPA should be rejected or renegotiated. Alternatively, one speaker suggests that some of the problems of the agreement would be resolved if the licensure examination should be given to Filipino nurses in English instead of Japanese.

### *Professionals Frames*

**Professionals Frame—Positive: What is the problem?** This frame does not define the provisions for Filipino nurses in the JPEPA as problematic: instead, they are an opportunity for professional development for Filipino nurses. This frame also does not represent the language learning provisions of the JPEPA for Filipino nurses as a problem, suggesting that nurses need to learn the Japanese language in order to practice in the Japanese health care setting. It is a matter of life and death/health and safety, so the requirement is not unreasonable:

The Japanese government officially acknowledges an acute shortage of nurses in their country and is feverishly taking up measures to handle its rapidly graying population. And the only recourse open for them is to hire Filipino nurses who are known throughout the world as competent and compassionate workers... "Why should our nurses be required to learn Nihongo?" the anti-JPEPA groups ask. Common sense dictates that foreign nurses like Filipinos will be working with Japanese doctors and surgeons, who will of course talk with them in their Japanese tongue and this would certainly be crucial in life-and-death situations at the hospital. (Villanueva 2007)

**Professionals Frame—Positive: Who is responsible?** Since it does not define the JPEPA provisions as problematic, this frame does not seek to attribute responsibility for

them to any particular person or group. It notes, however, that Filipino nurses are included in the agreement because of their excellent international reputation.

**Professionals Frame—Positive: What are the implications of the problem?** This frame represents the implications of the provisions for Filipino nurses in the JPEPA as positive, an opportunity for their professional development in a new setting. It is also a positive development because nurses, as professionals, are less likely to be exploited overseas than unskilled workers (which have historically been sent to Japan):

"Our sense is, if we must advance the export of services. We might as well consciously encourage the deployment of highly skilled surplus professionals, such as nurses, who are generally immune from employer mistreatment," [trade union spokesman] Aguilar said. (Gamolo 2008)

**Professionals Frame—Positive: What action should be taken?** This frame does not suggest changes to the JPEPA provisions, as it deems the language learning and other requirements to be necessary and appropriate to ensure that Filipino nurses can care for Japanese patients effectively and efficiently.

**Professionals Frame—Critical: What is the problem?** This frame points out two possible problems with the inclusion of Filipino nurses in the JPEPA: first, its role in accelerating out-migration of Filipino nurses and loss of professionals in the country, and second, the possibility that the Japanese government could fail to provide competitive benefits to Filipino nurses entering the country under the JPEPA.

**Professionals Frame—Critical: Who is responsible?** This frame does not address responsibility for the loss of professionals in the Philippines directly, but it holds the Japanese government responsible for ensuring that Filipino nurses are adequately

compensated under the JPEPA. Filipino nurses are sought after around the world (they are high-value professionals with important and well-regarded skills), so they can easily go elsewhere if the salary, benefits and training offered in Japan are not desirable.

**Professionals Frame—Critical: What are the implications of the problem?** The implications of including Filipino nurses in the JPEPA suggested by this frame are the loss of professionals in the Philippines and the rise of Japan as a possible competitor for Filipino nurses with other markets. Several speakers point out, however, that Filipino nurses may not be interested in working in Japan—they prefer the US and Europe.

**Professionals Frame—Critical: What action should be taken?** Speakers using this frame state that the Japanese government must provide a competitive salary and benefits package for Filipino nurses if it expects them to work in Japan:

The JPEPA, rather than promoting the interests of Filipino nurses, undermines the dignity of our profession...Nowhere else in the world are our Filipino nurses given such a second-class status-not in the United States, the Middle East or Europe...Our nurses are wanted everywhere in the world. It is not as though we are wanting in employment opportunities abroad that we must insist on going to Japan under even a grossly less attractive offer. If Japan wants our nurses, it must grant us the same treatment other countries accord to us. (Samaco-Paquiz 2007)

**Quantitative Distribution of Frames.** The number of articles about the JPEPA nursing provision controversy in which each frame was present is shown in Table 4.4. As was the case for the licensure leakage controversy, “economic” and “nurses’ rights” frames appeared most prominently: the most frequently appearing frame was the “economic-opportunity” frame, which appeared in 109 of 142 total articles (76.7%). The “nurses’

rights” frame was the second most frequently observed frame, appearing in 92 of 142 articles (64.8%).

**Table 4.4. Quantitative Distribution of Frames (JPEPA)**

Frame	Number of Articles	Most Frequent Sources
Economic-Opportunity	109 (76.7%)	<i>MT</i> and <i>PS</i> columnists senators ambassador
Nurses’ Rights	92 (64.8%)	PNA senators <i>MT</i> columnists labor officials
Economic-Critical	28 (19.7%)	advocacy groups environmentalists <i>MT</i> columnists
Professionals-Positive	13 (9.2%)	<i>MT</i> and <i>PS</i> columnists senators
Professionals-Critical	8 (5.6%)	advocacy groups <i>MT</i> letters

The remaining frames appeared much less prominently: the “economic-critical” frame in 28 articles (19.7%), the “professionals-critical” frame in 13 articles (9.2%) and the “professionals-positive” frame in 8 articles (5.6% of total).

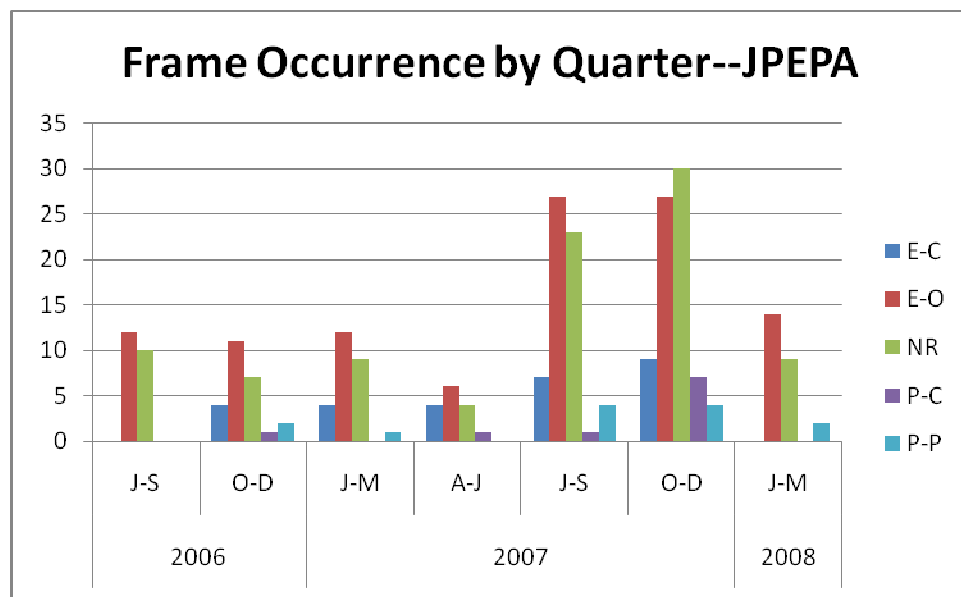
The most frequent sources or “sponsors” of each frame are also noted in Table 4.4. The “economic-opportunity” frame was most frequently attributed to the columnists for the *Manila Times* (15 articles) and the *Philippine Star* (13 articles), senators (13 articles), and the Philippine Ambassador to Japan (10 articles). The “nurses’ rights” frame was most frequently attributed to representatives of the PNA (19 articles), senators (14 articles), *Manila Times* columnists (12 articles) and labor officials (10 articles). The



“economic-critical” frame was most frequently attributed to advocacy groups (6 articles), environmentalists (4 articles), and Manila Times columnists (3 articles). The “professionals-positive” frame was most frequently attributed to *Manila Times* (3 articles) and *Philippine Star* columnists (2 articles) and senators (2 articles). The “professionals-critical” frame was most frequently attributed to advocacy groups (4 articles) and letters to the editor of the *Philippine Daily Inquirer* (2 articles).

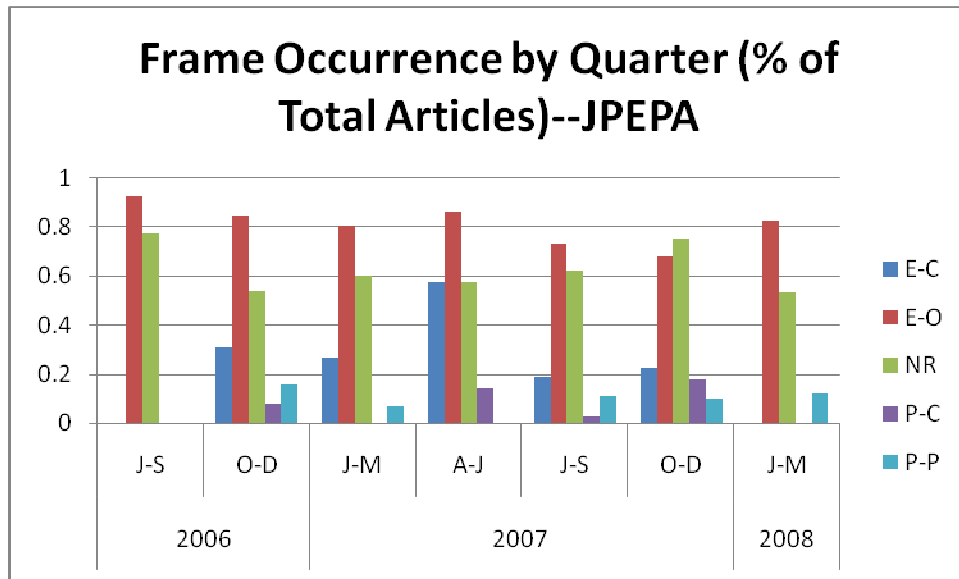
**Distribution of Frames over Time.** The distribution of frames (number of articles) by quarter in the newspaper coverage of the JPEPA controversy is shown in Figure 4.8.

**Figure 4.8. Distribution of Frames by Quarter (JPEPA—Number of Articles)**



The distribution of frames (percentage of articles) by quarter in the newspaper coverage of the JPEPA controversy is shown in Figure 4.9.

**Figure 4.9. Distribution of Frames by Quarter (JPEPA—Percentage of Articles)**



The “economic-opportunity” and “nurses’ rights” frames appeared most frequently in every quarter of the study period, and they were the only frames that appeared consistently in each quarter. The “economic-opportunity” frame appeared more often than the “nurses’ rights” frame in all quarters except October-December 2007, when the “nurses’ rights” frame appeared more frequently as the overall volume of coverage of the JPEPA peaked. The “economic-critical” frame emerged as an alternative perspective to the “economic-opportunity”/“nurses’ rights” discussion between October 2006 and June 2007, but even at its height (April-June 2007) it only received the same volume of coverage as the “nurses’ rights” frame during a quarter with a small overall number of articles. The appearance of the “economic-critical” frame declined after June 2007, and it eventually disappeared by the end of the study period. Both “professionals” frames appeared intermittently and with relatively low frequency (less than 20% of articles in each quarter) throughout the study period.

### ***JPEPA: Interview Results***

This section discusses findings from interviews of key informants representing four key groups with an interest in the JPEPA: the Philippine government, the Department of Health (DOH—on behalf of the health sector), nursing educators, and nursing professional organizations (the Philippine Nurses Association (PNA) and the Board of Nursing (BON)). It describes how members of each group identified the problem, attributed responsibility, described the implications of the problem, and prescribed solutions.

**Government: What is the problem?** Informants in government echoed the language of the “economic-opportunity” frame when they stated beliefs that the JPEPA was not a problem, but an opportunity for the Philippines. One of the government officials noted that the agreement represented an opening in the historically closed Japanese economy:

Japan until today is a relatively closed country. They say that they welcome imports, but look—it’s difficult to penetrate the Japanese market. The nuances in Japan are very hard to understand, and you have to be very, very patient. But once you crack it, you will be able to do business with Japan.

He acknowledged the concerns expressed in the “economic-critical” frame when he noted that the Philippines’ willingness to accept toxic waste from Japan was one of the key issues that delayed passage of the JPEPA, but he stated that this was not an explicit tradeoff for human resources and expressed confidence that the Philippines would not “become the dumping ground for the Japanese” because of the Japanese government’s commitment not to ship toxic wastes to the Philippines. (The only potential problem he

saw was that customs workers might be tempted to accept payment in exchange for entry of toxic wastes.)

**Government: Who is responsible?** Both government officials explicitly rejected the “nurses’ rights” argument that requiring Filipino nurses to learn Japanese to work in Japan was unfair. Instead, they held nurses responsible for learning the Japanese language—if they chose to work in Japan, they must accept the requirements placed on them and do what is necessary to perform their jobs well. As one official stated, “The problem is it’s very difficult to ask people to learn if they simply refuse to study. First they should study, they should try and learn. Because like I said, when you go to the US you are required to speak English, so what’s the difference?” Learning Japanese is a professional responsibility for nurses who choose to work in Japan, just as learning the local language would be for nurses working in any country. The other official also maintained that complaints about the Japanese language requirement were unrealistic:

First of all, we were complaining about speaking Japanese—for me, that’s a given. If you go to a foreign country and you want to work there, don’t complain if they expect you...for me, that was a little too much when I heard the PNA say “They expect us to learn Japanese, it’s so hard to learn Japanese...” Well, how are you going to work there if you don’t speak Japanese? So that’s where I was like “come on, let’s be realistic here”.

This official also held Filipino nurses responsible for the implications of their choice to work in Japan, describing language learning as a basic expectation rather than an unfair burden.

**Government: What are the implications of the problem?** A government official described the JPEPA as an important opportunity to do business with Japan and a way to for Filipino nurses and other professionals to penetrate the Japanese market. Unlike

informants in the education sector, he did not see a serious problem with the requirement that Filipino nurses work for several years while studying Japanese before taking the licensure examination. He noted that Filipinos were very “adaptable” and capable of learning new languages and suggested that even Filipino nurses who failed the exam could benefit the Philippines’ health system and economy by returning with skills learned in Japan or money to start a business in the Philippines.

The same official also responded critically to the suggestion that the JPEPA exacerbated “brain drain” of professional nurses in the Philippines:

Well, always the old refrain—the brain drain, you know, is one constant refrain you hear, but in a country where there is a surplus of supply, what do you do? You have to send them somewhere. If the Philippine market cannot accommodate them and the schools continue churning out professionals, what do you do? So you know, employment is a function of education. We have a good educational system, we have good training programs. The only problem is our companies with the jobs available...Our growth can’t simply come up with the demand, so what do you do? So as a government we have to look for other sources where they can be employed... So I’m not at all worried about the so-called “brain drain”. We have so much “brain” in this country; we can certainly afford to lose some of them—not to lose them, to share some of them. Maybe the right word is to share.

This official maintained that rather than being a problem, finding new markets for nurses was in fact a government responsibility since the existing system could not absorb all of the nursing graduates who were trained.

**Government: What action should be taken?** Both government officials demonstrated a sense of inevitability and economic necessity about the JPEPA, stating that the agreement was necessary to the Philippines’ participation in the global economy. As one official stated, “You cannot be an island. Countries trade among countries, between countries.

You can't afford not to trade with Japan—one, it's a very rich country, and two, there's a lot of opportunities in Japan...Workers, trade, business...there's a lot of potential in Japan.” The other official agreed, stating that while the agreement “could have been done better”, “at the end of the day, we need this arrangement.”

One of the journalists noted that another government official originally called for the JPEPA to include even more Filipino nurses than the number finally included in the agreement: the previous Secretary of Labor stalled negotiations over the nursing provision in the JPEPA because she did not want a quota on the number of nurses allowed to enter Japan. She refused to meet with Japanese negotiators unless they would agree to remove the quota provision, stating that “the Philippines should not allow itself to be bullied” by Japan on the issue, but instead should allow the “free market” to dictate how many nurses would go. He quoted her as saying that “the Japanese population is aging—if they want to impose a quota, let them grow old themselves, let them take care of themselves and their elderly!” This created an impasse until the Secretary was replaced. The new Secretary of Labor was willing to negotiate on the quota, and the agreement was signed under his watch.

Despite protests from PNA officials and other nurses' rights advocates, government representatives were supportive of the agreement's language requirement. One official countered arguments that the language requirement was unfair to nurses by pointing out that the Japanese government would pay nurses as the equivalent of assistant nurses and would cover all expenses while they are doing language study, so the burden on nurses was not as great as it was portrayed to be. Also, he invoked a nurses' rights

argument to defend the language requirement, saying that it was a way of protecting nurses working in Japan from legal problems because of language difficulties.

**Department of Health: What is the problem?** Department of Health officials' reactions to the JPEPA were very similar to those of the government officials interviewed: they did not describe the JPEPA as a problem, but as an opportunity for the Philippines and Filipino nurses. They also acknowledged that the Philippines' willingness to accept toxic waste from Japan was one of the key issues that delayed the ratification of the agreement, but did not view the provision as a direct tradeoff for the entry of Filipino nurses to Japan. One DOH official expressed confidence that the Senate would not "sell out" the country and had its best interests in mind when it ratified the agreement.

**Department of Health: Who is responsible?** One of the DOH officials stated that he believed that Japanese government pursued inclusion of Filipino nurses under the JPEPA, using economic terms of supply and demand to explain the provision: Japan requested Filipino nurses due to shortage of nurses, particularly in light of the growing demand for nurses of Japan's rapidly aging population. He noted that the ratification of the JPEPA by the Philippine Senate was received with enthusiasm by his colleagues in Japan, who stated that they were "looking forward to welcoming Filipino nurses".

**Department of Health: What are the implications of the problem?** Department of Health officials sought to balance economic concerns and protection for nurses in their assessments of the implications of the JPEPA: they described the agreement as an important opportunity to do business with Japan and a way to for Filipino nurses and

other professionals to penetrate the Japanese market, but also called for more protection for nurses in terms of salaries, social security protection, and benefits.

One DOH official mentioned two particular concerns about how Filipino nurses would be received in Japan: first, the fact that the JPEPA did not treat Filipino nurses working in Japan under the agreement with equal professional status with Japanese nurses. As he put it, “I don’t know how Japan calls it, but the Philippines perceives it as much, much lower than a legitimate Japanese nurse. But of course the ego of a Filipino nurse is ‘I am a licensed nurse, I have my competencies, and I can equal with a Japanese nurse.’” Also, he suggested that Filipino nurses might not be well-received by the public in Japan, noting that Indonesian nurses already working in Japan had experienced such a “culture shock” because Japanese people were not used to having foreigners taking care of them, especially those who looked different from them.

**Department of Health: What action should be taken?** The Department of Health officials expressed support for the nursing provision of the JPEPA as it was ratified, but suggested that agreement could be altered to call for Japanese language training to be offered in the Philippines so that Filipino nurses were prepared to work before they entered Japan (to address the status gap with Japanese nurses described above). They did not reject the language requirement altogether, however. A DOH official mentioned that he believed that the public was poorly informed about the provisions of the agreement and that the lack of information precipitated the protests that delayed its ratification. He suggested that the JPEPA could be adjusted in the future if it did not work, particularly if the public was better informed about how the process worked and the intentions of the agreement.



**Educators: What is the problem?** Educators described two main problems with the JPEPA nursing provision: first, it set up “onerous” requirements for Filipino nurses (particularly the language and licensure exam requirements) which suggested that Japan was trying to create disincentives for them to enter its workforce. The second issue was the “deskilling” of Filipino nurses seeking work in Japan: the JPEPA’s requirements of caregivers (which typically require less training than professional nurses) were so strict that the educators feared that many professional Filipino nurses would enter Japan as caregivers, working below their professional training and capacity.

**Educators: Who is responsible?** Both of the educators disagreed with the DOH official’s assessment that the inclusion of nurses in the JPEPA had been initiated by the Japanese government. Instead, one suggested that the provision was added more for the sake of appearances than in response to any particular request of the Japanese government—creating the appearance that the country was opening its markets without making any serious concessions.

The other educator suggested that in fact, the Philippine government pushed for the inclusion of nursing provisions in the JPEPA. She stated that Japanese negotiators were unlikely to request Filipino nurses because Japan was a very “closed” society and the public was resistant to the idea of having foreigners providing health care. Instead, she suggested that Philippine negotiators added the provision to make up for a trade imbalance between the two countries—“so instead of bananas and mangoes being shipped out to them, of less value compared to cars and computers and electronics being exported to us, here the serious imbalance of trade had to be corrected.” Since human

resources were very valuable, this would correct the imbalance and provide remittance income for the Philippines. She described the Philippine government's media campaign in favor of the nursing provision as a "hard sell" or "social marketing" campaign to gain public support for the JPEPA and suggested that the Japanese government was also "doing a hard sell" of plans to bring Filipino nurses to Japan to its citizens.

One of the educators held the Philippine negotiators of the JPEPA responsible for the fact that nurses do not enter Japan as licensed professional nurses under the agreement. She expressed particular dismay that they had not pressed Japanese negotiators on their strict requirements of caregivers, because officials would be unable to stop Filipino nurses from entering Japan as caregivers once the JPEPA went into effect.

**Educators: What are the implications of the problem?** Both educators, although not satisfied with the agreement's protections for Filipino nurses, acknowledged that it created a possible economic opportunity and a new market in which some Filipino nurses would participate. One noted that Filipino workers were accustomed to working below their qualifications in order to find jobs overseas, so some nurses would likely find work in Japan as caregivers—particularly in light of oversupply and high unemployment of nurses in the Philippines. The other educator suggested that the JPEPA also might create opportunities for other Filipino professionals since Japan is a rapidly aging society with very low replacement—if Japanese leaders did not do something, the country could lose its status as a major economic power in the region. Both noted that although they would likely prefer to work in the United States or other western countries, Filipinos were "resilient" and highly capable of adjusting to life in Japan under the agreement.

On the other hand, both educators expressed concerns that Filipino nurses would not be protected adequately under the JPEPA—a more important issue than concerns about “brain drain”, according to one educator who pointed out that the number of nurses going to Japan was relatively small. Both suggested that the “socialization” period required of nurses entering Japan (during which Filipino nurses work without licenses and study the Japanese language) was a way for Japan to get cheap labor, and they stated that they feared that nurses would be exploited in Japan. One said that she suspected that Filipinos would be placed in rural areas (“the worst places”), where they would stand out because of their looks and language skills, and she worried that they would be mistreated there.

Both educators expressed particular concern for the welfare of female Filipino nurses working in Japan. They stated that the Philippine public was particularly wary of sending female nurses to Japan because of perceptions of the Japanese as “cruel invaders” (particularly by the generation that had survived the Japanese occupation in World War II) and a history of “mail-order brides” from the Philippines in Japan. One educator also expressed concern that female nurses working in Japan would be expected to be “quiet and docile”, in contrast with Filipino nurses’ professional training to be “assertive and caring”.

**Educators: What action should be taken?** One of the educators acknowledged the economic importance of the JPEPA to the Philippines, stating that the failure to ratify the JPEPA would be a major “diplomatic embarrassment” or “faux pas” and would hurt the Philippines’ efforts to compete with other countries such as Indonesia that were passing trade agreements with Japan in the meantime.

At the same time, she stated that negotiators should have pushed for greater protection of Filipino nurses in the JPEPA, as the current agreement did not offer them the protections given licensed nurses until after the 3-year training period ended and they passed the licensure exam. She disputed terminology used by other informants suggesting that Filipino nurses would be treated as “trainees” in Japan, saying instead that Filipino nurses would be treated as “assistant nurses” and supervised by Japanese nurses. She suggested that negotiators should have noted to the Japanese that Filipino nurses are better qualified (Bachelor of Science in Nursing or BSN trained) than the Indonesian nurses working in Japan under a similar agreement and should be treated accordingly. She said that she hoped that the JPEPA could be renegotiated after it passed to create better working conditions for Filipino nurses entering Japan.

Both educators also employed arguments from the nurses’ rights frame to describe how they hoped the situation played out once the JPEPA went into effect. One educator stated explicitly that she would discourage nursing students from seeking work in Japan under the JPEPA, saying that she would instead encourage nurses to look for work in places that are “more friendly” and “will not exploit you”. The other educator called for research and follow-up to understand what happened to Filipino nurses entering Japan under the JPEPA. She hoped that Philippine and Japanese academics would be able to collaborate in this effort to alleviate concerns about exploitation and discrimination against Filipino nurses (particularly in rural areas).

**Professional Organizations: What is the problem?** The Board of Nursing (BON) official and the Philippine Nurses Association (PNA) official identified slightly different

problems with the JPEPA provisions for Filipino nurses. The Board of Nursing representative noted that Filipino nursing leaders believed that “there is much we can offer in terms of professional nurses”, so they were somewhat surprised that nurses were not given the same professional status as Japanese nurses under the JPEPA. The PNA official protested the agreement’s lack of protection for Filipino nurses’ welfare as well as its “unfair” language and licensure requirements. She also pointed out that working conditions for Filipino nurses in Japan would likely be poor, noting that the Japanese Nurses Association had called for improved wages and working conditions for all Japanese nurses before Japan accepted Filipino nurses into its workforce.

**Professional Organizations: Who is responsible?** The representatives of professional nursing organizations attributed responsibility for the outcome of the JPEPA to different groups. The PNA official criticized the Philippine government and treaty negotiators for accepting terms that she perceived as unfair to Filipino nurses and failing to protect their rights. She extended this criticism to a broader indictment of the government for treating nurses as a commodity:

...We are not commodities. We should have never been included there. Because it’s a trade agreement. We are not commodities, and we are not for sale...But the sad thing is that they just want our nurses to go there in order for the dollars to come into our country.

She accused the Philippine government of “selling” nurses to Japan for the remittance income that they would bring to the Philippines.

The Board of Nursing representative was less critical of the JPEPA negotiators. Instead, she held nurses responsible for their own participation in the agreement, stating

that it was fair as long as nurses were vigilant and informed about the requirements and protections of the agreement.

**Professional Organizations: What are the implications of the problem?** The Board of nursing representative described the potential implications of the JPEPA nursing provision as positive: she suggested that the agreement offered opportunities for cultural exchanges that could help to improve Philippines-Japan relations. She anticipated that thawed relations and the presence of Filipino nurses in Japan would help the Philippines economically: it would bring Japanese tourists and retirees to the Philippines since “they will have firsthand experience of how it is to relate to Filipinos” after interacting with Filipino nurses.

The PNA official described the potential effects of the provision more negatively for several reasons. First, she complained that Filipino nurses would be treated as “trainees” and would not be protected by labor laws if they made mistakes unless they were given local licenses. She described the arrangement for Filipino nurses to study Japanese while working in Japan as unfair, particularly because the conditions under which Filipino nurses would study Japanese (in addition to their nursing workload) would make it very difficult for them to learn it well enough to pass the licensure exam: “They’ll be exhausted—how can you still study? It’s so hard—we are not used to those decipherers [Japanese characters]”. Finally, she expressed concern that Filipino nurses would be exploited in Japan—that the Japanese would expect them to accept the proposed conditions out of poverty and desperation “like the Japayukis” (female Filipino entertainers working in Japan). She also suggested that this history left nurses who failed

the licensure exam vulnerable—that instead of returning to the Philippines, nurses who failed the licensure exam would remain in Japan and be exploited by Japanese men.

**Professional Organizations: What action should be taken?** The PNA representative indicated that she was not surprised by the lack of protection for nurses under the JPEPA, as the Philippine government paid little attention to nurses’ welfare issues domestically as well as abroad. She described protesting the provisions of the agreement as part of the PNA’s larger mission to ensure fair treatment and protect the welfare of Filipino nurses. In particular, she suggested that the negative effects of the agreement could be mitigated by offering Japanese language training in the Philippines so that nurses were prepared to work before they entered Japan—or that the licensure exam could be given in English to give Filipino nurses a better chance of passing and gaining the status and protections given to fully licensed nurses.

The Board of Nursing representative encouraged nurses participating in the JPEPA to be “proactive” and “assertive” about what they could offer as professional nurses and suggested that nurses should not go into the agreement fearful of being exploited, but should seek to benefit professionally from participating in the agreement. She suggested that nurses should take advantage of Department of Labor and Employment-organized orientations and other mechanisms to learn about the provisions of the JPEPA—whatever limitations of the agreement could be overcome if nurses were well-informed. If they discovered problems, these could be given as feedback. The nursing sector could also become more engaged and empowered by participating in discussions of health trade agreements.

### ***JPEPA: Summary of Results***

The JPEPA controversy was discussed in a total of 142 articles in the *Manila Times*, *Philippine Daily Inquirer*, and *Philippine Star* between June 2006 and March 2008. The most frequently appearing frames in the newspaper coverage of the JPEPA nursing provision were the “economic-opportunity” and “nurses’ rights” frames, as the discussion of the provision centered on the tradeoff between its economic opportunities for the Philippines and Filipino nurses and suggestions that its language and licensure requirements were unfair of Filipino nurses. Government and health sector key informants supported the JPEPA nursing provision as an opportunity to open a new market for Filipino nurses. Both supported the agreement’s Japanese language requirement for Filipino nurses, although health sector informants suggested that in-country training would help Filipino nurses to take their licensure exams in Japanese and enter Japan with full professional status. Nursing educators lamented the “onerous” language requirements and “deskilling” of Filipino nurses under the JPEPA, but suggested that these did not outweigh the overall economic benefit of the agreement and could be renegotiated in the future. The Philippine Nurses Association (PNA) representative similarly protested the JPEPA’s language and licensure requirements, while the Board of Nursing (BON) informant described it more positively as a professional development opportunity for Filipino nurses.



## CHAPTER 5

### DISCUSSION

This chapter highlights key findings from the case studies of the licensure exam leakage and the JPEPA nursing provision cases described in Chapter 4 and discusses how they answer the research questions articulated in Study Aims #1 and #2:

**Aim #1:** To describe the frames in Philippine newspaper coverage of two recent controversies in nursing education and migration in the Philippines: (1) a leakage of test answers on the June 2006 Philippine nursing licensure examination and (2) a provision in a newly signed trade agreement opening Japanese markets to Filipino nurses. How do journalists and other sources identify these controversies as problems, and what solutions do they recommend? What values do they invoke in these discussions?

**Aim #2:** To identify views of policymakers, educators and journalists about the nursing licensure examination controversy and the Japan trade agreement. How do these stakeholders define the controversies as problems, and what solutions do they recommend? What values do they invoke, and how do these overlap with or differ from how the issues are framed in the newspaper coverage?

It also discusses how each controversy was resolved in the context of the findings of the frame analyses and key informant interview analyses to fulfill Study Aim #3:

**Aim #3:** To describe how these controversies reflect policymaking priorities and power dynamics between stakeholders with respect to nurse migration in the Philippines. How do the decisions made to address each controversy reflect the values invoked in the newspaper coverage and key informant interviews? Which stakeholders' views influenced the decisions made, and which stakeholders' views were minimized or ignored?

Finally, it discusses the study's practical and theoretical implications and limitations and suggests directions for future research based on this study.

### ***Framing of Controversies in Newspaper Coverage (Study Aim #1)***

The frames used in newspaper articles covering both the licensure exam leakage and the JPEPA reveal a similar tension about how stakeholders in the Philippines think about nurses and nurse migration: for both controversies, the most frequently appearing frames could be grouped into three analogous categories: “economic”, “nurses’ rights” and “professionalism” or “professionals”. In other words, public discussion of both controversies centered around similar tensions between images of nurses as export products to be marketed abroad, potential victims who need to be protected, and professionals who are valued primarily as providers of health care. This section describes how the “economic”, “nurses’ rights” and “professionalism”/“professionals” frames and their associated images of nurses were debated in the newspaper coverage of the licensure exam leakage and the JPEPA nursing provision.

While both the licensure exam leakage and the JPEPA nursing provision generated significant attention from a variety of stakeholders in the Philippines, the licensure exam leakage received much more attention than the JPEPA nursing provision. This is evident in the volume of newspaper coverage that each issue received during the study period (353 articles on the licensure exam leakage vs. 142 articles on the JPEPA nursing provision). It was also acknowledged by several of the key informants, who stated that the JPEPA nursing provision was “less of a concern” than the licensure exam leakage. They also noted that the nursing provision was perhaps the third most contested issue in the JPEPA itself, behind the provisions allowing toxic waste from Japan into the

Philippines and allowing Japanese fishermen to operate in Philippine waters (Depasupil 2008).

**Nurses' Rights as Counterframe to Economic Frames.** The key tension exposed in the newspaper coverage of both controversies was between economic and “nurses’ rights” frames. In both cases, “nurses’ rights” frames emerged as counterframes (alternative explanation of the relevant events and their implications—Entman 2003, Entman 2004) to the dominant economic frames. Specifically, the discussion of the licensure exam leakage was dominated by the “economic-image” frame—which represented the leakage as an economic problem because it threatened the global image of Filipino nurses—which appeared most frequently overall and in every quarter of the study period. Some sources also invoked other frames in support of the “economic-image” frame, particularly the “professionalism-health & safety” and “professionalism-values of nursing” frames as will be described in more detail below. Students and their associated interest groups invoked the “nurses’ rights” frame to justify their opposition to the proposed retake of the licensure exam, which they defined as the chief problem because of its “unfairness” and cost to the involved nurses. It was particularly prominent in the discussion during the initial period of uncertainty after the leakage was exposed, and declined in subsequent time periods as economic concerns gained prominence.

In the coverage of the licensure exam leakage, the tension between “economic-image” and “nurses’ rights” frames centered on proposals that the affected nurses should be required to retake the licensure exam. On one side were members of Congress and the Commission on Filipinos Overseas (CFO) chairman, who called for a retake based on

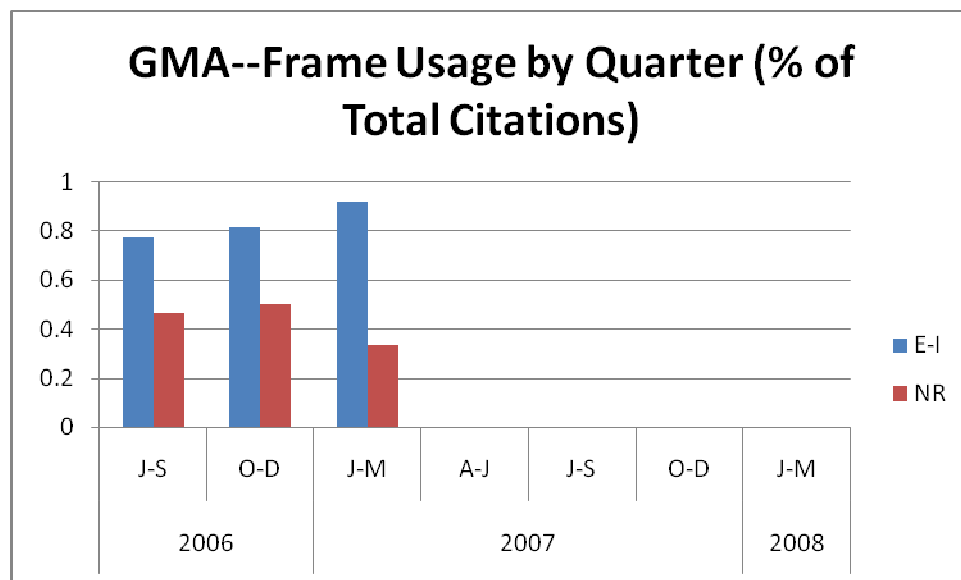
“economic-image” concerns, stating that the retake was necessary in order to “safeguard the credibility and integrity” of Filipino nurses (Crisostomo 2006, Cueto 2006). The “nurses’ rights” frame emerged as the main counterargument as nursing students, their parents and advocacy groups suggested that the retake was unfair because of the cost and effort that it would require for the examinees to study and sit for the exam a second time. These interpretations of the leakage reflect two competing images of nurses: politicians and government officials promoting the “economic-image” frame represent nurses as an export product whose image must be protected overseas through the retake, while nursing students and their allies depict them as potential victims in the leakage scenario due to the financial costs and anxiety they would incur if required to participate in the retake.

Entman’s (2003, 2004) “cascading activation” model of news framing suggests that frames “activate and spread” from actors at the top of stratified systems to other elite groups, the media and the public, so the utilization of economic and nurses’ rights frames by President Gloria Macapagal Arroyo’s administration in response to both cases is particularly interesting. During the first months after the licensure exam leakage was revealed, proponents of the “economic-image” and “nurses’ rights” frames promoted their viewpoints in public discussion in efforts to influence the response of the Philippine government and President Arroyo to the leakage. The president—the key decision-maker in the leakage response—initially appeared caught between economic and nurses’ rights concerns, as demonstrated by her emergence as one of the most prominent sources of both the “economic-image” and “nurses’ rights” frames in the leakage coverage. At different times she was quoted as saying that a retake would be “unnecessary and unfair”, particularly for nurses who came from poor families (Mediavilla 2006b)—suggesting an

image of nurses as potential victims if they were forced to retake the licensure exam—and calling for a retake of the licensure exam in order to “preserve the good reputation of our Filipino professionals” (Dalangin-Fernandez 2006)—suggesting an image of nurses as export products whose image must be preserved on the global market. Rather than using her position and authority to set the terms of the debate (as suggested by Entman’s (2003) “cascading activation” model), the President took rhetorical cues from government officials and interest groups on both sides.

Figure 5.1 shows how President Arroyo held the “economic-image” and “nurses’ rights” frames in tension during the first three quarters of the study period.

**Figure 5.1. GMA—Frame Usage by Quarter (Licensure Exam)**



In the first two quarters, she invoked “economic-image” concerns in about 80% of the articles and “nurses’ rights” concerns in over 40% of the articles in which she was quoted. (These ratios reflect her attempts to balance both priorities during the period before the

final resolution for the leakage was reached.) In the January-March 2007 quarter (during which she decided to offer a retake of the licensure exam in response to the CGFNS decision to refuse visa screening to affected examinees) the ratio of “economic-image” references to “nurses’ rights” references by President Arroyo increased from 2:1 to almost 3:1.

This increase suggests that President Arroyo became more convinced of the “economic-image” interpretation of the leakage events over time, particularly once the CGFNS decision was announced. Once the possibility of losing the US market for the nurses became clear, the President invoked concerns about protecting their rights less frequently and made protecting their economic value and opportunities her primary concern. The relative weakness of President Arroyo’s administration in framing the leakage clearly after it was initially exposed suggests that in the licensure exam leakage case, concerns moving up the cascade rather than down. The administration did not have control over its message, takes cues from other elites and interest groups...as a result, the President made decisions based on the desires of other actors (particularly the CGFNS) rather than setting the terms of resolution to the problem.

The newspaper coverage of the JPEPA nursing provision demonstrated a similar tension between economic and “nurses’ rights” interpretations of the agreement. Competing claims that nurses should be included in the JPEPA because it represented a new market for Filipino professionals and an economic opportunity for the Philippines (the “economic-opportunity” frame) and that its provisions (particularly the language and licensure requirements) represented a threat to the rights of Filipino nurses (the “nurses’

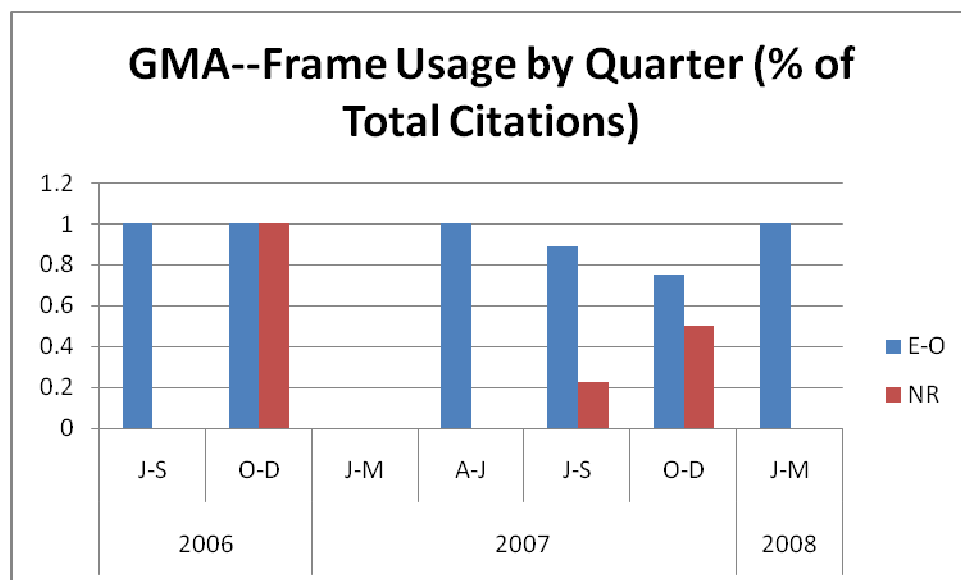
rights frame) appeared immediately when the provision was announced and dominated the discussion throughout the study period.

The battle lines between the “economic-opportunity” and “nurses’ rights” factions were more neatly drawn in the case of the JPEPA nursing provision than they had been in the licensure exam case: the Arroyo administration and other government officials including members of the Philippine Senate and the Philippines’ Ambassador to Japan had more consistent control over their message from the beginning of the debate, calling for the agreement to be ratified as a matter of “national interest” because of its perceived benefits to the Philippine economy. (This conception suggests an image of Filipino nurses as export products to be included in a broader trade agreement sought for its economic benefits.) On the other side, representatives of the Philippine Nurses Association were the most prominent supporters of the “nurses’ rights” position, which called for the nursing provision to be rejected or renegotiated because its requirements were unfair to Filipino nurses and would put them in danger of being exploited in Japan (suggesting an image of migrant nurses who participated in the agreement as potential victims). Both sides also connected their arguments to the “professionals” frames and images of nurses as professional health care providers in ways that will be described in the next section.

In the case of the JPEPA, the Arroyo administration was more consistent (both over time and between different representatives) in its support of the “economic-opportunity” frame, which withstood an escalation of “nurses’ rights” frame-based opposition from interest groups late in the study period. Figure 5.2 shows how the administration balanced the two frames throughout the study period. As the figure notes,

the administration invoked the “economic-opportunity” frame in 100% of articles in which it was quoted in 4 of the 7 quarters of the study period, and 90% of articles (18 of 20 articles) overall. In the remaining two quarters in which the Arroyo administration was quoted discussing the JPEPA, it invoked the “economic-opportunity” frame in 89% (8 of 9 articles in June-September 2007) and 75% (3 of 4 articles in October-December 2007) of articles. (The administration was not quoted in articles on the JPEPA nursing provision in the January-March 2007 quarter.) Meanwhile, it invoked the “nurses’ rights” frame in only 30% of articles (6 of 20 articles) in which it was quoted discussing the JPEPA nursing provision—100% (2 of 2 articles) in October-December 2006, 22% (2 of 9 articles) in June-September 2007 and 50% (2 of 4 articles) in October-December 2007.

**Figure 5.2. GMA—Frame Usage by Quarter (JPEPA)**





Economic rather than nurses' rights concerns defined the eventual policy responses to both controversies, but how this happened was different in each case. In the licensure exam case the Arroyo administration initially took its rhetorical cues from other government officials and interest groups rather than setting the terms of the discussion itself. The administration appeared caught between economic and nurses' rights concerns until its hand was forced by the CGFNS, which created a real and immediate economic concern by threatening to refuse entry to June 2006 licensure exam passers. In the JPEPA case the Arroyo administration maintained more control of its message throughout the study period. It consistently framed the agreement as a matter of national economic interest from the time it was signed until it successfully influenced the Senate to ratify the agreement, even in the face of interest group protests based on nurses' rights concerns.

**Professionalism as an Economic Issue.** The “professionalism” and “professionals” frames—both predicated on images of nurses as health care providers and professionals—were used in the newspaper coverage in support of economic solutions to the licensure exam leakage and JPEPA controversies in several ways. It is interesting to note that where Filipino nurses were acknowledged as professionals in public discussion of both cases, their role was assumed to be global rather than local. In both cases the discussions of nurses' provision of health care as professionals centered on the health and safety of patients in other countries—the United States and Japan—not in the Philippines. The ability of Filipino nurses to provide safe and effective care to patients in these countries was linked to their role as export products in the Philippine economy.

The most powerful example of how images of nurses as professional health care providers were linked to their economic value occurred in the newspaper coverage of the licensure exam leakage. The “professionalism-health & safety” frame appeared in newspaper articles beginning almost immediately after the leakage became public, invoked mostly by nursing educators who described it as a reflection of the poor quality and growing commercialization of nursing education in the Philippines. Beginning in July 2006, politicians also invoked concerns about health and safety in calling for a retake of the licensure exam, which they said was the only way to ensure that nurses would be able to provide quality health care. Despite the fact that these officials’ calls for a retake based on health and safety concerns received substantial coverage in the newspaper, they were not acted upon.

However, when the CGFNS entered the discussion in February 2007, it invoked similar concerns that the licenses of nurses who took the June 2006 exam were not “comparable” to US licenses and that the health and safety of US patients would be compromised if they were allowed to practice there. When the CGFNS decided to deny visa screening to June 2006 examinees, its concerns about health and safety raised the possibility of dire economic consequences if Philippine policymakers did not take decisive action—in this case, a government-funded retake of the two affected tests. Because of the economic importance of US employment for Filipino nurses, the CGFNS’ was able to compel action by the Philippine government based on concerns about health and safety while similar arguments rang hollow when they were presented by domestic authorities months earlier.

The “professionalism-values of nursing” frame was also linked with economic concerns in the newspaper coverage, particularly by the CFO chairman, who was one of most frequent sources of both the “economic-image” and “professionalism-values of nursing” frames. He was quoted frequently and forcefully expressing support for a retake of the licensure exam as a matter of “integrity” in two different senses: first, in the sense of exam security and accuracy (“economic-image” concerns). The CFO chairman described the retake as a way to demonstrate that Philippine authorities were committed to ensuring the security and “integrity” of the country’s professional exams. This was an important economic issue in light of the fact that the leakage occurred while Philippine authorities were working to bring the US nursing licensure exam (NCLEX) to Manila. The CFO chairman (as head of the NCLEX task force) knew that US authorities would be more likely to allow the NCLEX to be given in the Philippines if they knew that local authorities could ensure an uncorrupted domestic licensure process.

The CFO chairman also made several speeches to nursing students that were published in the newspapers, in which he referred to the licensure exam retake as a matter of “integrity” in both the “economic-image” and “professionalism-values of nursing” senses:

We begin by making a collective stand right here, right now. We must tell the PRC and the BON that the nurses and the people are deeply committed to upholding our eternal values: excellence, *integrity* and honor. We must make it clear to the commission and the board in no uncertain terms that *integrity*, excellence and honor are nonnegotiable issues and that we are rejecting their “no-retake” position...we are willing to take the bitter pill, a form of penance if you will, if only to uphold the *integrity* of the nursing board exam and the *integrity* of the nursing profession and, in the process, cleanse the examinees of the virus that has infected the innocent and the system. (Ang 2006—emphasis added)

This statement is an example of the conflation of images of nurses as professionals (with values of “excellence, integrity, and honor”) with allusions to their public image as export products (retaking the exam to preserve “the integrity of the nursing profession”). It implies that the integrity of nurses as professionals (in the sense of an internal professional value) is linked to the integrity of the profession (in the sense of public image), which in turn is linked to their role as contributors to the Philippine economy.

Newspaper article sources linked images of nurses as professional health care providers to their participation in the economic “opportunities” afforded by the JPEPA in two different ways. First, some sources tried to rally support for the agreement by appealing to the idea that nurses entering Japan would be empowered professionals who would be less vulnerable to exploitation than the types of migrant workers (mostly overseas performing artists) that the Philippines previously sent to Japan. In other words, they minimized “nurses’ rights” concerns about the JPEPA by saying that nurses, as educated professional workers, would be able to protect themselves from situations of exploitation.

Newspaper article sources also linked images of nurses as professional health care providers to their economic role—and discounted “nurses’ rights” concerns about the JPEPA—to support their contention that policymakers must agree to the requirement that Filipino nurses learn Japanese before being licensed to work as professional nurses in Japan. They represented the language requirement as a basic aspect of working as a professional in another country and challenged Filipino nurses to see it as a “professional development” opportunity

rather than a burden. These arguments were also linked to “economic-opportunity” representations of the larger agreement: since the larger JPEPA was an economic opportunity for the country, negotiators should not hold up the passage of the agreement on account of the language requirement, which was a basic standard to which Filipino nurses should expect to be held.

Some sources also appealed to images of Filipino nurses as globally marketable and autonomous professionals to indirectly criticize the JPEPA nursing provision. They suggested that since Filipino nurses had a global reputation for professionalism and excellence and were sought after in a wide range of countries, they would not be interested in working in Japan even if the Philippines ratified the agreement. Since the nurses’ training and reputation gave them options in other countries with more favorable conditions, Filipino nurses would take advantage of their global marketability and seek options for overseas work in more desirable markets.

### ***Themes in Key Informant Interviews (Study Aim #2)***

Key informants representing all sectors—government, health sector, education and professional organizations—acknowledged the economic importance of nurses in the Philippines when asked about the licensure exam leakage and JPEPA controversies, and they held economic priorities in tension with other priorities differently for each controversy. Informants discussing the licensure exam leakage described it as chiefly a matter of protecting Filipino nurses’ “integrity” and image overseas—similar concerns to those expressed in the “economic-image” frame in the newspaper coverage—and most

(except the Philippine Nurses Association representative) minimized protests against the proposed retake of the licensure exam based on “nurses’ rights” concerns.

Both government informants viewed the JPEPA nursing provision positively—as an opportunity for Filipino nurses to enter a new market and for the Philippines to “penetrate the Japanese market” for other types of professionals and export products. (Their assessment reflects the orientation of the state migration apparatus towards overseas marketing of Filipino workers.) Interestingly, Department of Health officials also discussed the JPEPA as a tension between economic opportunities for the Philippines and Filipino nurses and concerns about protecting the nurses who participated in the agreement, rather than in terms of its effect on supplies of nurses for the Philippine health system (ostensibly the primary interest of the DOH).

Both educators gave credit to representatives of the PNA for “carrying the ball” on behalf of the nursing sector in response to the JPEPA nursing provision, as they themselves were unsure of how to react—they knew that the agreement would affect them since it created a new market for Filipino nurses, but wanted to see how it would play out first before taking a public position. The educators gave credit to the PNA president for “giving nurses a voice” in the discussions over the JPEPA, but one stated that she had decided to “keep quiet” about the agreement because she believed that it was an overall benefit to the Philippines and wanted the nursing sector to focus its advocacy efforts on provisions specific to nurses rather than on broader issues being protested by some advocacy groups.

**Reactions to Nurses' Rights Concerns.** Nurses' rights frames—predicated on representations of nurses as citizens or potential victims to be protected—received significant attention (second to economic frames) in the newspaper coverage of both controversies, but key informants' reactions to the “nurses' rights” concerns raised in both cases were more muted. The idea that nurses were potential victims in the leakage and JPEPA nursing provision scenarios and policy responses to the controversies should have the goal of protecting them resonated strongly in public discussion, but it was apparently less compelling in shaping policymakers' reactions.

In the licensure exam leakage case, the virtual unanimity of policymakers' opinions about the exam retake reflects the degree to which the leakage controversy evolved into a primarily “economic-image” story over time. By the time of the study interviews (October 2008), the only key informant who took an anti-retake position was the PNA representative, who attributed her position to her organization's mandate as a nurses' welfare organization. All of the other informants agreed that the retake was necessary in order to ensure the employability of the affected group of examinees and protect the profession's reputation (both “economic-image” concerns), and they dismissed suggestions that the controversy could be resolved in any other way.

The government representative turned the “nurses' rights” discourse on its head when he said that the retake was in fact a way of protecting nurses' rights because it protected their public integrity and future employability. One of the educators used similar language when she stated that she had promoted the retake to nursing students as a way for them to protect their future employment options. These statements position government officials and nursing educators as protectors of individual nurses' ability to

participate in the migrant labor force—not necessarily explicit promoters of migration (similar to language in the Migrant Workers and Overseas Filipinos Act as described earlier—Tyner 2000). Even if they did not explicitly endorse mass migration of nurses, these officials acted to preserve the macro-level role of nurses as an export commodity by promoting the retake as a way of enabling individual nurses to participate in the US market.

Key informants’ reactions to nurses’ rights concerns about the JPEPA nursing provision were similarly subdued relative to the volume of coverage that the nurses’ rights frame received in the newspaper coverage. The PNA representative, who was credited with “giving nurses a voice” by informants representing other sectors, provided the most pointed critique of the agreement of all of the key informants. She used “nurses’ rights” language to criticize the JPEPA’s language and licensure provisions for Filipino nurses as “unfair” and expressed concern that nurses would be exploited in Japan “like the Japayukis” (sex workers).

One of the educators also expressed worries that Filipino nurses would be victimized in Japan (subject to racial discrimination or exploitation by Japanese men), but most of the other informants were more concerned with professional exploitation (low wages, hard work, language studies, lack of licensure, professional liability, etc.) rather than the risk of physical or sexual abuse. The nursing educators agreed that their main objection to the JPEPA nursing provision was that it did not treat Filipino nurses as full professionals or give them a realistic pathway to full professional status in Japan. They were also concerned about “deskilling” of Filipino nurses—the idea that they would work below their credentials, either as caregivers or trainees, in Japan.



Despite these concerns, all of the key informants agreed that the JPEPA was too economically important to the Philippines to merit its outright rejection because of perceptions that it was unfair to Filipino nurses. An educator and the Board of Nursing representative suggested that the agreement could be renegotiated later if the provisions were found to be problematic for nurses, and even the PNA representative acknowledged that Filipino nurses would likely seek jobs in Japan. The measures that she proposed in response to the agreement aligned more or less with those suggested by others: finding ways for nurses to learn Japanese in the Philippines so that they could enter Japan with full licensure and professional status.

**Professionalism as an Economic Issue.** Several key informants made explicit connections between images of Filipino nurses as professionals and the Philippines' competitive advantage (and economic interest) in deploying nurses overseas. One of the Department of Health informants and the Board of Nursing representative both noted that the international "brand" or reputation of Filipino nurses was the key to maintaining the country's competitive advantage in the global marketplace for nurses. They described particular characteristics and values of the "Philippine brand" that made Filipino nurses particularly valued overseas (e.g. compassion, touch, bedside manner). The BON representative also described plans to emphasize these elements more explicitly in nursing education—particularly in the wake of the licensure exam leakage—in order to maintain the special cache of the "Philippine brand" on the global market. She described these as important aspects of professional development for Filipino nurses (promoting

values of compassion, altruism, etc.), but referred to them as the basis on which Filipino nurses would be judged on the global market.

These informants' use of Filipino nurses' compassion and selflessness as a selling point (an opportunity for marketing nurses overseas) suggests a paradox in their expectations of nurses: while they suggest that nurses should enter the profession for altruistic reasons and not simply as a pathway to migration, they present the same characteristics as the basis for marketing Filipino nurses overseas in aggregate. In other words, individual nurses should not use their profession as an opportunity to migrate, but nurses in general should be marketed abroad because of the importance of their overseas work to the Philippine economy.

The Board of Nursing representative expressed surprise that the JPEPA language and licensure requirements did not acknowledge the professional reputation of Filipino nurses by allowing them to enter the country as fully licensed professionals, but she did not call for the agreement to be rejected. Instead, she suggested (using language similar to the Migrant Workers and Overseas Filipinos Act) that nurses going to Japan under JPEPA should be “proactive” and “assertive” in order to avoid exploitative arrangements and maximize their benefit from migration to Japan. This statement suggests that as professionals, migrant nurses are responsible for their own welfare—the government and other members of the nursing sector do not necessarily take responsibility for protecting them from exploitation if they choose to work overseas. Rather, the government creates opportunities (such as the JPEPA) for Filipinos workers overseas, but individual migrants (particularly “assertive” professionals) define their own participation in these opportunities.

### ***Resolution of the Licensure Exam Leakage Controversy***

After a sustained debate, Philippine policymakers (the Professional Regulation Commission, the Department of Labor and Employment and President Arroyo) made the final decision to address the licensure exam leakage by offering a retake of the affected tests for nurses who wanted to work in the United States in June 2007. They made this decision following the declaration of the CGFNS that it would not give visa screening for US employment to applicants who had taken the June 2006 Philippine nursing licensure exam. Nurses who did not intend to work in the United States were not required to retake the exam, although several key informants suggested that those who did not retake would have difficulty finding work in the Philippines because domestic employers were hesitant to hire them. About 11,000 of the original 17,000 passers retook the test, which included only Tests III (medical surgery) and V (psychiatry), the tests allegedly affected by the leakage (Aning 2007a, Aning 2007b).

The leakage also led to two changes in the Professional Regulation Commission and the Board of Nursing. The Professional Regulation Commission, which previously reported directly to the President, was placed under the governance of the Department of Labor and Employment. Additionally, after members of the Board of Nursing were implicated in the leakage, the entire Board was sacked and replaced. One interviewee also noted that the two directly implicated Board members also lost their nursing licenses.

### ***Resolution of the JPEPA Controversy***

The JPEPA was ratified by the Philippine Senate in its originally proposed form in October 2008, nearly two years after it was submitted for ratification by President Arroyo. It included provisions for the entry of 200 Filipino nurses and 300 Filipino

caregivers into Japan in the first years of implementation. As of January 2009, deployment was scheduled to begin in April 2009 (*Manila Sun-Star* 2009). (The original language and licensure requirements for Filipino nurses were kept in the JPEPA, meaning that Filipino nurses were required to take the licensure exam in Japanese after a 3-year training period in order to work as fully licensed nurses—Vilog 2006.)

### ***Practical Implications***

The policy responses to the licensure exam leakage and the JPEPA nursing provisions have brought practical changes to the structural conditions of nursing education and migration in the Philippines in several ways.

First, the movement to ensure the security of the nursing licensure exam in the wake of the leakage was particularly important for the Philippines' efforts to offer the National Council Licensure Exam (NCLEX) within its borders. The Philippine government had placed the request to hold the NCLEX with the National Council of State Boards of Nursing (NCSBN) before the leakage, but it was delayed approval until the leakage was resolved. The efforts of the CFO chairman and others to demonstrate the Philippines' commitment to secure examinations had immediate benefits when the NCSBN agreed to allow the NCLEX to be given in the Philippines in 2007, the year after the leakage (Danao 2007). Despite having such a recent and well-publicized problem, Philippine authorities were able to convince the NCSBN that they were able to prevent similar problems in the future, and NCSBN representatives obviously were satisfied with the measures that were put in place and allowed the exam to go forward. The move makes the US licensure examination process easier and cheaper and reinforces the continuing importance of the US market as a destination for Filipino nurses.

Another practical impact of the licensure exam leakage response was an executive order from President Arroyo that brought licensure exam review centers under the management of the Commission on Higher Education (CHED—Cabreza 2007). The executive order was given in response to the implication of two prominent review centers in the licensure exam leakage. It requires all review centers to affiliate with accredited nursing schools or a review center consortium or face closure (Cariño 2007, Esplanada 2008), a change which may constrain some review centers, but also offers them the opportunity for legal legitimacy through their association with nursing schools.

The ratification of the JPEPA has also created new opportunities for private sector enterprises to insert themselves as stakeholders in the education and migration process. The opening of Japan as a new destination for Filipino nurses has created a new market for Japan-oriented educational programs—and allowed new “migrant institutions” to emerge to take advantage of a new niche in the nursing education market. These programs—run by Philippine nursing schools and Japanese businesses—began to appear even before the agreement was finalized (Vilog 2006, *Cebu Sun-Star* 2008), typically including Japanese language and culture training in addition to courses in anatomy, first aid and other caregiving skills. They are likely to grow now that pathways to work in Japan for Filipino nurses have been codified under the JPEPA.

While the JPEPA provides for government-to-government deployment of Filipino nurses and caregivers (meaning that nurses and caregivers are processed through the POEA rather than private agencies), it has also given some businesses the opportunity to capitalize on the interest of Filipino nurses and caregivers in working in Japan in response to the agreement by facilitating private recruitment for the Japanese market.

One Japanese company is already collaborating with a nursing school in Cebu City, Philippines to educate and recruit nurses and caregivers to work in Japan (*Cebu Sun-Star* 2008). Representatives of the program profiled in a newspaper article stated that they aimed to recruit students for the program by suggesting that its graduates would be given priority in recruitment for jobs in Japan—appealing to nurses’ personal economic motives in order to solidify their role as a “niche” educator and recruiter for the Japanese market.

The ratification of the JPEPA sets a precedent for the Philippine government to include nurses and other human resources as export “products” in trade agreements. They are included in trade agreements along with agricultural and manufacturing products because they are one of the most valuable “products” that the Philippines has to export (particularly to offset trade imbalances with countries like Japan, whose export products—electronics, autos, etc.—are much more valuable than many Philippine export products such as agricultural products and furniture). While the Philippines has previously sought agreements with other governments that focus specifically on health workers (such as government-to-government deployment of nurses to Saudi Arabia (Tyner 1996b, Lorenzo 2007) and bilateral agreements with Canadian provinces (Jimenez-David 2008), it has never included them as part of a larger trade agreement before. Now that the precedent has been set, it is possible that Philippine government trade negotiators could seek to include them in future trade agreements.

### ***Policy Implications***

The policy decisions made by the Arroyo administration (in the licensure exam leakage case) and the Philippine Senate (in the JPEPA case) reinforced the existing de

facto policy of training nurses for export: a retake of the licensure exam helped to restore the public image of Filipino nurses and preserved overseas job opportunities after the leakage, and the ratification of the JPEPA nursing provision opened Japanese markets to Filipino nurses. These decisions are not surprising in the context of the frame analysis findings—which showed that economic concerns dominated public discussion in both cases—and the key informant interview findings, in which representatives of a variety of stakeholders embraced the idea of nurses as an export product. The prioritization of economic concerns in response to both controversies has several implications: first, it demonstrates efforts by a variety of sectors to protect and promote a “Philippine brand” of nurses on the global market; second, it involves Filipino nurses in nation building in a unique way; third, it complicates conceptions of health professional migration as “brain drain”; and finally, it highlights the “necessity” of overseas marketing of nurses due to current domestic supply and demand imbalances.

**Protecting the Philippine Brand.** Anholt (2005) and Jaffe and Nebenzahl (2006) describe efforts to manage the image of export products such as the licensure exam retake as examples of “place branding” or “nation branding”—attempts to control the context in which messages about a country’s products (in this case, Filipino nurses) are received in the global marketplace. Anholt (2005) acknowledges that countries are more complex than their “brands” imply, but states that such “shorthands” are inevitable in a complex and globalized world. In this context, government leaders must actively manage the national “brand” in order to ensure a positive context of their products abroad. Managing or altering a country’s “brand” or international image is often politically difficult, even

for heads of state who have direct authority over policy decisions, as leaders in democratic societies often have difficulty “imposing a shared purpose on the stakeholders of the national brand” with a variety of commercial and political interests (Anholt 2005). The difficulty of managing the Philippine “brand” of nursing was particularly evident in the early newspaper coverage of the licensure exam leakage, in which many ways of interpreting the controversy (and its solution) were proposed. In particular, President Arroyo (the key decision-maker in the case) was influenced by several constituencies that proposed different ways of protecting the Philippine “brand” of nurses in the wake of the leakage: lawmakers who wanted a retake in order to protect the image of Filipino nurses abroad, PRC leaders who suggested that a recomputation of exam scores would satisfy concerns about the accuracy of the results while avoiding the expense and effort of organizing a retake, and nursing students and advocacy groups who said that the most important priority was protecting students from the retake. The effort to balance these interests—or at least appear to be balancing them—put the president in a politically difficult position, as her contradictory statements in the immediate aftermath of the leakage suggest.

The way forward only became clear once the various sectors (compelled by the CGFNS decision) arrived at a consensus that a retake of the licensure exam was the only way to protect the Philippine “brand”. The retake, along with efforts to root out corruption and other improvements in leadership, were described as essential parts of the effort to protect the positive image of the Philippines and Filipino nurses and to assure the continued economic importance of nurses in the future. These changes demonstrated that Philippine leaders were serious about rooting out corruption in the professional



licensure exam process and the nursing sector, meaning that the credentials of professionals who had passed through the system could be trusted—thereby protecting the reputation of nurses as a Philippine “product” on the global market.

**Nursing Education and Nation Building in the Philippines.** The findings from these case studies suggest that the Philippines’ de facto policy of training nurses for export links professional education to nation building in a unique way. The role of higher education in nation building has been examined before by Meyer (1977) and Marginson (2002). Meyer (1977) conceptualizes nation building in a broad sense—as the expansion of citizenship rights and responsibilities to members of a nation’s population—and suggests that higher education sectors can contribute to nation building by promoting the rights and responsibilities of citizenship to the population. Marginson (2002) considers the relationship between higher education and nation building with a more specific definition of nation building—as the buildup of human resources (particularly professionals) to improve the nation’s positioning in the global economy:

The university was seen as a principal tool of modern nation-building. The central rationality of government was grounded in the notion of “investment in human capital”, whereby the population was understood as a national resource to be harbored and developed. It was believed that more spending on education and research would generate a corresponding rise in GDP...More tangibly, the universities were expected to provide the growing number of professionals and business persons needed for production, mass consumption and public programs. (411)

In the case of Filipino nurses, health professions education has a slightly different relationship with nation building: rather than using nursing and other types of professional education to build up stocks of professionals in the Philippines (who then

drive economic growth by producing and consuming goods and services domestically), the Philippines' de facto policy of training nurses for export assigns economic value to nurses not for their potential contributions to the country's GDP by domestic consumption, but through the remittances that they send back from abroad. In this way they are more like an export product than anything—nurses out, money in—not so much interest in creating a professional class that fuels economic growth through domestic consumption. In both cases policymakers appear to think about nursing education as a way to generate outside investment—either remittance income or trade—to fuel the growth of the Philippine economy.

Newspaper coverage and key informants invoked matters of nation-building and economic development in discussions of both controversies in nursing education and migration, although the nature of the connection was different for each controversy. In the licensure exam leakage, nurse migration was discussed as a matter of major economic importance (concern about the economic impact of a blow to the international image of Filipino nurses). In the JPEPA, they were treated as one of many commodities in a large trade agreement with Japan—collateral parts of a larger agreement with important economic consequences. The migration of 300 nurses was not necessarily economically important to the Philippines, but the larger treaty was a matter of “national interest”. Most key informants stated that the agreement was important enough to the Philippines' broader economic interests that it should be ratified, even if the provisions affecting Filipino nurses would need to be renegotiated later.

The role of nurses as contributors to nation building was made particularly explicit in a document produced as part of a “good government” movement promoted by

the Board of Nursing in response to the licensure exam leakage. The BON developed a “Road Map of the Nursing Profession toward Good Governance” to determine a way forward for the sector in its wake. The Road Map covered six “perspectives” toward which the sector would pursue specific improvements by the year 2030:

- Values—inclusion of “citizenship and ethics” training in nursing curriculum and professional standards in order to ensure quality care for patients in the Philippines and abroad.
- Institutions—compliance of nursing schools, regulatory agencies and health agencies with regulatory laws and standards (including higher licensure exam passage rates for nursing schools).
- Internal capacity—described as “100% compliance with global ethical and professional standards” and “100% institutionalized social responsibility programs” (e.g. health education programs) in all nursing organizations.
- Infrastructure—100% compliance with safety standards in nurses’ workplaces around the country, commitment to environmental stewardship.
- The economy—involvement of nursing organizations in upgrading of employment and work standards to support increased contributions to the Philippine economy.
- “The Filipino”—alignment of nursing professional standards and practices with global standards and practices, so that Filipino nurses are accepted and sought after around the world, and so that the Philippines can pursue bilateral and multilateral agreements with other countries. (Road Map 2007)

The Road Map was also approved by representatives of the Association of Deans of Philippine Colleges of Nursing (ADPCN) on behalf of the education sector, the Association of Nursing Service Administrators of the Philippines (ANSAP) on behalf of the service sector, and the Philippine Nurses Association (PNA) on behalf of the nurses’ welfare sector.

The “perspectives” described in the Road Map—particularly the idea that commitment to professional values, compliance with regulatory and professional standards, and professional development leads to economic growth and opportunity for

the Philippines—reflect an elision of professional development and economic priorities by the nursing sector itself (not simply by the state migration apparatus or other government representatives). The Road Map describes a progression from strictly “professional” concerns (values, institutions, education, etc.)—an image of nurses as professionals—to the ability of Filipino nurses to contribute to the country’s gross domestic product (GDP)—an image of nurses as contributors to economic growth. The Road Map frames nurses’ professional development as an economic issue: the ultimate goal of the reinforcement of professional values and building of institutions is the employability of Filipino nurses overseas, which ensures that they can contribute to the Philippine economy and nation building.

The connection of nurse migration to nation building is similar to the discourses used by the Marcos administration when it established the state migration apparatus: the idea that labor migration is valuable for its contribution to remittance income and national development. The language used in the Road Map suggests that the nursing sector itself has adopted language which originated with the state migration apparatus under the Marcos administration, connecting its professional development efforts with national development. In this document nursing sector leaders (on behalf of education, service and welfare organizations) describe the economic contribution and extension of marketing of Filipino nurses overseas (through new bilateral agreements) as the ultimate goals of professional development improvements in the sector. By making these changes, they position themselves as improved export products that will make a more significant contribution to the country’s GDP and enable it to negotiate with receiving markets from a stronger position on behalf of “the Filipino”.

At present it is unclear how the Road Map will alter professional development efforts in the Philippine nursing sector in the long term, or what its overall economic effects will be (in terms of remittance income, new bilateral agreements, etc.). But in any case, it is relevant because it demonstrates a broad consensus between a variety of stakeholders in the nursing sector—including the Philippine Nurses Association, the primary nurses' welfare organization—willingly positioning nurses as an export product and framing the sector's professional development efforts in terms of their potential to increase nurses' contribution to the Philippine economy. Ball (1996) has argued that the Philippines' de facto policy of training nurses for export is actually a “mechanism for national dissolution” because it limits the ability of the state to fight for migrants' rights and provide adequate workforce for the domestic health care system. The Road Map raises an important new question: what happens when the nursing sector itself embraces economic priorities—sees its professional development efforts as the basis for increased economic contribution through overseas marketing—rather than prioritizing nurses' welfare or its ability to serve in the domestic health system? The impact of this new policy remains to be determined.

**Challenge to “Brain Drain” Discourse.** Both the licensure exam leakage and JPEPA cases highlight the fact that Philippine authorities were able to exercise power vis-à-vis representatives of the US and Japan—that the Philippines is not simply a powerless and exploited source country, as the “brain drain” discourse of health professional migration suggests. Proponents of the “brain drain” discourse represent health professional source countries such as the Philippines as powerless and exploited by receiving countries,

which “poach” health professionals by offering better compensation and opportunities than sending countries could ever hope to provide and “drain” them from countries where they are desperately needed (Martineau 2004, Galvez Tan 2005). The results of this study suggest that countries like the Philippines, where the production of health professionals for overseas markets is economically and politically important, can have more complicated power relations with receiving countries than the “brain drain” discourse implies. Just as receiving countries have power to draw Filipino nurses because of the economic incentives that they can offer, the Philippine government and policymakers also exercise power through policy decisions that they make that influence the production and flow of nurses to receiving countries.

In the licensure exam leakage case, Philippine nursing sector leaders were able to use the intervention of the United States CGFNS to achieve their goal of compelling nurses to retake the licensure exam (which they wanted for the sake of domestic professional development and integrity of nurses besides their image overseas). Both nursing educators noted that the appearance that Philippine authorities ordered a retake of the licensure exam only in response to the CGFNS’ refusal to grant visa screening to examinees belied a more complex power dynamic between nursing education leaders in the Philippines and the CGFNS. While events suggested that Philippine authorities were told what to do by an outside body, the educators revealed that in fact Philippine authorities worked closely with CGFNS officials to resolve the controversy. In fact, they were the ones who asked the CGFNS to “hold the line” on its visa screening decision in order to compel the PRC to offer a retake of the nursing licensure exam:

...We were working with the CGFNS people here, and they were concerned when this was happening because they said “how do we know now that the ones who were given licensure are really passed?”...So they were asking us, “We’d like to help—what do you want us to do?” So...I said “Stand your ground—if you are not honoring the results of the 2006 exams because of that, we think that will contribute to this debate that’s raging on right now”...I said, “Well, we want them all to retake”. They said, “Is it possible to do that?” We said, “Yes, the government is being convinced right now to undertake this”. And government responded very positively...

The other educator also gave credit to the CGFNS for helping Philippine nursing leaders to bring about the retake. She thought it was “embarrassing” that the government did not respond to calls for a retake until it was compelled to by the CGFNS, but in any case was glad to have the cooperation of the CGFNS in bringing about these changes:

...Normally, we would not welcome such intervention...this is the Philippines, this is the US. They couched it very well—it didn’t look like an intervention, but they said they’re not going to accept the June passers...A very soft but strong recommendation, because they can’t impose on another government. So there was a strong suggestion that if there was a retake and another [test], we would be willing to take a look at that...So I say normally we wouldn’t welcome such, but for me that is an opportunity—it had to take this external body. And I mean everybody wanted to go to the US, and if you say “you cannot come in” this is an opportunity for us to address what we have to address in the Philippines.

In other words, the episode was not a simple case of Philippine leaders being told what to do by a US body—instead, Philippine nursing leaders used the CGFNS decision to compel action by domestic bodies and to achieve objectives that they thought were important to the future of the nursing profession domestically.

An episode from the JPEPA controversy also complicates the “brain drain” discourse about nurse migration from the Philippines. As one of the journalists interviewed pointed out, a Philippine government representative’s demands changed the

content and timing of the JPEPA's initial signing in 2006. He stated that the Philippine Secretary of Labor and Employment originally stonewalled the agreement because she objected to its quota on the number of nurses and caregivers allowed into Japan—instead, she wanted (in neoliberal economic terms) “the market to determine” how many Filipino nurses were allowed into Japan. The signing was delayed partially due to this disagreement (Yu Jose 2008), and it was not resolved until the relevant Secretary of Labor and Employment was replaced by a new secretary who agreed to the quota.

This episode shows that the Philippine government exercised power in negotiations with US and Japanese authorities in the responses to the licensure exam leakage and the JPEPA. Instead of being exploited by a country that took its professionals against its will, the Philippine government actually pushed for the Japanese market to open, and even protested when limits were placed on how many Filipino nurses will be accepted in Japan. The Philippines acted not simply as an exploited producer of nurses, but as a marketer of nurses to Japan—a completely different orientation from that suggested by the “brain drain” discourse.

It should be noted that not all key informants acknowledged the role of the Philippine government in marketing nurses in Japan through the JPEPA: while one of the nursing educators stated that Philippine trade negotiators added nurses to the JPEPA to correct a trade imbalance between the Philippines and Japan and to open a new market for Filipino nurses, a Department of Health representative suggested that nurses were included in the JPEPA because Japan requested them (due to its aging population and demand for health care workers). These two assessments place different degrees of responsibility for the marketing of Filipino nurses on the Philippine government: the



DOH official's suggestion that Japan sought Filipino nurses casts the Philippine government in more of a passive role—simply managing larger forces of supply and demand of nurses with respect to Japan—while the educator's assessment places responsibility squarely with the Philippine government's trade negotiators.

**Overseas Marketing and Domestic Employment of Nurses.** The efforts of Philippine policymakers to protect and extend overseas markets for Filipino nurses in response to the leakage and the JPEPA must be understood in the context of the domestic employment situation for Filipino nurses, which has similarities with the original situation that precipitated the establishment of state migration apparatus by the Marcos administration. The administration created the state migration apparatus in the 1970s in part to reduce domestic unemployment and underemployment—to address the fact that that the Philippines' domestic economy could not create enough jobs to employ Filipino workers (a limited supply of jobs in a weak economy relative to the demand for jobs from the Philippines' fast-growing population).

The explosive growth of the nursing education sector since the early 2000s (Lorenzo 2007, Masselink & Lee 2009) has created a similar problem, as the growth of the health sector has not kept pace with the number of nursing graduates being produced. The oversupply of nurses relative to the number of nursing jobs available in the Philippines has become so extreme that some Philippine hospitals have begun volunteer nursing programs—in which nurses work for free or sometimes are charged fees to work—as an alternative way for new graduates to gain the necessary work experience to qualify for jobs overseas (Salaverria 2009). New nursing graduates have been forced to

seek jobs in call centers and other industries because of the inability of the Philippine health system to provide enough jobs to employ them (PIA 2009).

The fact that many Filipino nurses cannot find work in their field if they remain in the Philippines places government leaders in a position of “responsibility” (as one government informant described it) to provide opportunities overseas and open new markets for them. In this context, the reactions to the licensure exam leakage and the JPEPA are less surprising: in addition to the potential long-term consequences of the licensure exam leakage—the possibility that the Philippine nursing profession could lose its prestige and desirability around the world and the country could lose its position as a key producer of nurses for the global market—policymakers also would have faced a more immediate crisis if they did not address the leakage: the possibility of a domestic market flooded with unemployed and unemployable nurses, particularly if the United States (the largest market for Filipino nurses) refused to accept them. Similarly, the JPEPA nursing provision could be considered to be part of a solution to domestic unemployment of nurses, an additional outlet for nurses who might not be able to find jobs in the field if they stayed in the Philippines and an opportunity to diversify the markets for nurses in the future. These measures were particularly important in light of the fact that schools founded during the period of rapid expansion in the early 2000s were just beginning to graduate their first classes, adding thousands of new graduates to the existing oversupply of nurses in the Philippines.

Likely because of this constant oversupply of workers in the Philippines, the Philippine government has worked in the past to maintain and extend overseas markets for Filipino workers even in the face of threats to migrants’ rights and welfare in

receiving countries. A prominent example of this was a 2002 incident in which the Japanese government imposed new restrictions on the number and provisions of performing artist visas (the vast majority of which were held by Filipinos) after the US government cited Japan for suspected human trafficking because of its loose enforcement of protections for visa holders. In response, the Philippine Secretary of Foreign Affairs traveled to Tokyo to protest the restrictions, and Filipino entertainers and their supporters demonstrated against the policy change at the Japanese Embassy in Manila (Yu Jose 2008). Despite documented evidence that Filipino entertainers frequently end up working illegally as “hostesses” or prostitutes in Japan (Piper & Ball 2001, Uy 2005, Panao 2007), the Philippine government protested when this route to work in Japan was partially closed off.

By resisting efforts to curtail migration of performing artists whose risk of exploitation was widely acknowledged, Philippine policymakers demonstrated that the role of performing artists as an export product and the Japanese market as a place to absorb some of the Philippines’ surplus of workers was more important to them than protecting migrants’ rights. In this context, the privileging of similar economic concerns—policy responses that aimed to preserve the US market and develop the Japanese market for Filipino nurses—over the “nurses’ rights” concerns raised in both cases is not surprising.

### ***Theoretical and Methodological Implications***

This study demonstrates several ways that the institutional/structuration approach to research on migration of skilled professionals improves on other approaches. First, it exposes the fact that particularly in societies which rely heavily on migrant workers for

their economic and social well-being, migration is not simply an economic phenomenon, but also has a political dimension. These cases highlight the fact that Filipino nurses do not make migration decisions in a vacuum, but instead act in a context influenced by the actions and words of a variety of “migrant institutions” that have different stakes in their education and migration. As these institutions present sometimes competing interpretations of nursing education and migration into public discussion, they structure the opportunities and constraints for potential migrant nurses. In this context, nurses’ decisions to seek nursing education and migration opportunities are influenced by the rhetorical and practical activities of the state migration apparatus, nursing schools, nurses’ welfare organizations and professional organizations.

The licensure exam leakage powerfully demonstrates the importance of migrant institutions in structuring migration opportunities for Filipino nurses: in that case, the leakage and subsequent refusal of the CGFNS to grant visa screening prevented the affected nurses from pursuing the opportunity that would maximize their economic utility (working in the United States). But working in cooperation, domestic nursing sector leaders and the CGFNS (which sought goals of maintaining the professional integrity and values of the Philippine nursing sector and the health and safety of US patients respectively) set the conditions on which nurses could pursue US job opportunities—by retaking the affected portions of the licensure exam.

The JPEPA nursing provision case also demonstrates the incompleteness of the human capital interpretation of skilled migration—the idea that skilled workers migrate to pursue opportunities that match their qualifications. This is not necessarily true in the case of the JPEPA, in which many Filipino nurses will enter Japan to work below their

qualifications and with no clear prospects of obtaining full licensure and professional status due to the difficulty of Japan's licensure and language requirements. Instead, they act in an environment where the state migration apparatus has created the opportunity, and private enterprises have capitalized on it to provide the education (language and cultural training) that suits the opportunity—or they participate without even gaining the education, but because the opportunity exists and they hope to make the most of it. The decision of Filipino nurses to work in Japan is not necessarily a rational economic decision, but it occurs in the context of the constraints and opportunities created by the activities of organizations which act to maximize their own interests (the state migration apparatus' interest in marketing Filipino workers overseas and educational institutions' interests in making a profit from the new migration pathway). The opening of Japanese markets to Filipino nurses creates a new opportunity for nurses to exercise agency—to take advantage of the new pathway as a way to pursue their personal and professional goals—which in turn could help to cement the migration pathway to Japan for future generations of nurses by legitimizing the involved institutions (schools, recruiters, etc.) and creating new professional links between Filipino and Japanese nurses.

The JPEPA nursing provision case also highlights the fact that the colonial tie perspective on skilled migration provides an incomplete explanation of the phenomenon, because now Filipino nurses even have opportunities to work in Japan—a country that historically has been closed to most immigrants and with which the Philippines has a recent and painful history of war and oppression. The difficult licensure requirements of Filipino nurses working in Japan under the JPEPA highlight the fact that it is not because the countries' educational systems are well-aligned that Filipino nurses have the

opportunity to work in Japan (as is the case with the Philippines' other former colonial power, the United States—Choy 2003). Instead the migration pathway has been forged by the actions of Philippine government officials, who actively pursued a new market even in the absence of colonial or educational alignment with Japan—a clear example of a “migrant institution” (in this case, the Philippine state migration apparatus) acting within the opportunity of a broad trade agreement to seek a new receiving market for Filipino nurses.

Finally, the institutional/structuration approach allows for the examination of how different migrant institutions interact with each other to promote competing and conflated understandings of migrants and migration in the public sphere. This study suggests that frame analysis—the examination of how different stakeholders seek to influence policymaking by presenting, contesting and co-opting frames of issues that matter to them in public discussion—can be a useful way to examine how the “dialectical process” between structural conditions and individual or institutional agency happens. Structural conditions provide institutions and individuals with ideas and devices for how to advance their interests in situations of controversy or conflict—in the cases examined in this study, various actors draw on shared understandings and goals such as “national interest” or “human rights” to advocate solutions to the controversies. As they employ these devices in public discussion of the controversies, they give legitimacy to shared understandings of what is at stake, which shape decision-makers' ideas about what must be done to resolve them. These policy decisions in turn alter the material and ideological conditions in which individual and institutional actors take subsequent action.

The Nursing Road Map produced in response to the licensure exam leakage is a particularly interesting example of how migrant institutions adopt and re-imagine each other's discourses to promote their goals. In this case, the nursing education, welfare and professional sectors adopt the longstanding state migration apparatus idea of nurses as contributors to the Philippines' economic development (through their role as an export product on the global market) and link it to their professional development goals for the nursing sector—using the rhetoric of national interest (actually adopted from a document on nation-building—Estanislao 2006) to establish the importance of these goals to themselves and to the public and to promote them to a wider audience. Studying how professional and economic discourses are conflated in documents such as the Road Map helps to explain the context in which individual nurses make education and migration decisions, as well as the field of ideas from which organizational leaders will draw to make subsequent policy decisions. It also acknowledges the dynamic nature of policymaking and enables more sophisticated studies of how certain professional sectors become “internationalized” over time.

### ***Limitations and Directions for Future Research***

This study has several limitations. Its internal validity could be threatened by several factors: first, the search terms that are used to find relevant articles for the frame analysis might have generated a sample that systematically excluded articles that reflect certain perspectives on the controversies of interest. One particular limitation is the fact that only newspaper articles in English were analyzed, despite evidence that at least the licensure exam leakage controversy was the subject of interest for the Filipino-language press as well. It is possible that the use of only English-language articles could give a

skewed impression of how the issues under study were represented and discussed, and by whom. Filipino-language publications might give less attention to the controversies altogether because of their appeal to a different readership than English-language publications: since citizens are more likely to have access to nursing education and migration opportunities (and by extension interest in the controversies) as well as English reading fluency, English-language news sources might be more likely to cover policy controversies relevant to them than Filipino-language publications. Also, Filipino-language publications might have access to different stakeholders than English-language publications in covering both controversies, and English-language publications (which use the language of business and government) might give greater weight to economic concerns than other issues relative to Filipino-language publications. While these publications could not be analyzed in this study, the newspapers included were chosen for their broad readership, access to key decision-makers in the controversies, and variety of political perspectives.

Another limitation is the possibility that the key informant interview guides could have inadequately elicited informants' views on how the controversies were framed in public discussion and how their framing reflects the interests and power dynamics between migrant institutions in the Philippines. The study method also required interviewees to recall information about processes and outcomes in the past. If their recollections were unclear or colored by current conditions, our understanding of the dynamics of interest could be incorrect. However, this risk was minimal because both controversies have occurred recently (the licensure exam leakage in 2006 and 2007 and the debate over JPEPA ratification from 2006 to 2008), and most of the interviewees



were extensively involved in discussions about one or both events throughout their time as topics of debate. The conclusion validity could be compromised if interviews or other data collection procedures were inconsistently administered, or if coding procedures were unreliable over time. In order to minimize these threats to conclusion validity, I used strict protocols for newspaper data collection and interviews, including pre-specified search terms for newspaper articles and structured interview guides (as described in Chapter 3 and Appendix IV).

Another limitation is the fact that both informants representing the health sector came from the Philippine Department of Health (DOH). Department of Health officials might not provide a full representation of how the broader health sector would interpret the controversies since they are also employed by the Philippine government. While their perspectives as DOH officers are likely different from those of the other government officials interviewed—particularly the CFO official, whose organization is explicitly involved in promoting migration of Filipino workers—their thinking and priorities were still less likely to be critical of government policy than representatives of private hospitals, for example. This could skew the interpretation of health sector responses to the controversies, possibly over-representing responses that reflect the economic logic of the other government informants and under-representing perspectives that reflect the importance of nurses in the domestic health care system.

On the other hand, the Department of Health informants were not the only ones outside the “government” category who invoked economic logics in their interpretations of the controversies. Informants representing the education and professional development sectors also invoked economic logics in their interpretations of the licensure

exam leakage and the JPEPA nursing provision (for example, a nursing educator's comment that without a retake of the licensure exam, the leakage would have "marred or damaged the image of Philippine nursing abroad fatally"). Although nursing educators are still mostly concerned with the quality of education and professional development, this educator also recognized the economic importance of nurse migration for the Philippines.

This study may also encounter threats to external validity: as noted earlier, the controversies examined occur in a particular time and socioeconomic context that might limit the applicability of the findings to other scenarios within the Philippines, or to situations in other countries. In order to counteract these threats, this study examines two very different controversies: the licensure exam leakage was ostensibly a domestic issue that threatened existing overseas markets for Filipino nurses, while the JPEPA nursing provision was an explicit opportunity to extend it to a new international market. Examining and comparing how both of these issues were framed in newspaper coverage and key informant interviews provided greater insight into the dynamics of public discussion of debates in nursing education and migration than a study of either controversy alone would provide.

The selection of cases for this study could also affect the validity of its conclusions. While the cases in the study have been arguably the most discussed and covered issues in Philippine nurse migration in the past few years, this study does not reflect other developments related to nursing education and migration such as newly signed bilateral agreements with Canadian provinces and the rise of practical nursing education programs (Jimenez-David 2008, Gamolo 2008). It is possible that a study of

the discourses surrounding these activities might give a different impression of the goals of the Philippine government and other migrant institutions with respect to nursing education and migration—and the discursive means that they employ in order to promote them to policymakers and members of the public.

For example, the Philippines Overseas Employment Agency’s efforts to achieve “mutual benefit” by signing bilateral agreements with receiving countries might reflect a less explicit marketing approach than the one demonstrated in the licensure exam leakage and JPEPA controversies. Also, the rise of practical nursing programs is an extreme example of the commercialization of nursing education and migration: nursing schools capitalize on demand for nursing education by offering practical nursing degree programs as an ostensible pathway to migration, despite the fact that practical nurses trained in the Philippines are not eligible for work visas in receiving countries (Masselink & Lee 2009). The efforts of the Philippine government and other nursing sector authorities to regulate an obvious attempt by nursing schools to profit from demand for nursing education, even when it has no clear connection to migration opportunities, might be discussed differently in terms of economic and professional interests than the controversies examined here.

Although an exhaustive study of discourses surrounding nursing education and migration in the Philippine would need to look at this, it is beyond the scope of this study to examine all possible controversies that could have been included. These issues might offer opportunities for future studies of public discussion and policymaking with respect to nursing education and migration. The controversies also occurred in overlapping timeframes, meaning that they give a representative snapshot of policymaking dynamics at a particular time—although, as we suggest with a framework that posits that

institutions' actions constantly change the structural conditions in which they will act in the future, it is worth examining subsequent issues to see how the decisions made with regard to these issues will play out in the future.

A study of how these priorities arose—how nursing education and migration became linked to economic development—is beyond the scope of this study, as it would require the examination of the discursive construction of nurses and nurse migration by various stakeholders over a much longer period of time. This study shows a snapshot of how migrant nurses were represented and discussed at a particular time and cannot necessarily be used to make explicit connections with earlier discourses until the progression can be examined over time. It would be interesting to study publications by nursing schools, professional organizations and other stakeholders in the nursing sector over time to see how discourses of the state migration apparatus have been appropriated over time, and how these are held in tension with priorities of nurses' welfare and professional development. This study shows a few progressions of discourses over time—particularly the emergence of the “economic-image” as the most prominent frame in the discussion of the licensure exam leakage throughout the study period, President Arroyo's administration becoming convinced of the “economic-image” understanding of the leakage over time—but in general it is still more cross-sectional than longitudinal relative to the lifespan of the nursing profession in the Philippines, and the country's state migration apparatus.

This study of how images of nurses and nurse migration inform and are shaped by policy decisions in the Philippines could also be the basis for comparisons with other “internationalized” sectors in the Philippines such as seamen or call center employees.

(The latter represent a different type of “internationalized” workforce that serves a global clientele from within the Philippines.) How are these discussed in the context of economic development? How are interests in development balanced with protection of migrants and professional development of workers? Are nurses unique because they are college-educated professionals rather than being trained in vocational schools? Are the expectations different in terms of protection, professional development, and contribution to economic development because they are professionals? Or because of their role as providers of health care, compared with workers who provide different types of services?

This study offers opportunities for comparison with other countries with similarly “internationalized” health professions education sectors. The ways that health professional migration is connected to development would be interesting to explore in countries such as India and Cuba, which also send large numbers of health professionals overseas: how are the priorities of economic development, migrants’ rights and professional development debated in India, which has a medical education sector with a growing focus on international markets? Or in Cuba, which has strategically deployed health professionals around the world but has a very different political and economic system? Examining how health professional education and migration are discussed and linked to matters of nation-building and economic development in these countries would shed light on the complex role of migrant and potential migrant health professionals in developing countries.

### ***Conclusion***

This study examines how images of nurses and nurse migration inform and are shaped by policy decisions in the Philippines through case studies of two recent

controversies in nursing education and migration in the Philippines: a leakage of answers on the nursing licensure exam and the inclusion of nurses in a trade agreement with Japan. It uses these controversies as windows into the logics underlying the longstanding “internationalization” or “culture of migration” within the Philippine nursing sector—a de facto government policy of training nurses for export that also appears to be supported by the nursing education and professional sectors. The study aims to understand the broader implications of this policy of deliberate overproduction of health workers for overseas markets for the Philippines and other countries that are considering similar policies.

The study finds broad support for interpretations of the controversies that position Filipino nurses as export products on the global market in both the newspaper coverage and key informant interviews with representatives of the Philippine government, health sector, nursing education and professional organizations. It shows that nurses’ professional development is often invoked in service of economic concerns, while concerns about their rights as migrants are often minimized. It demonstrates how domestic authorities have prioritized protection of the Philippine “brand” of nurses on the global market and linked nursing professional development to the Philippine economy and nation building. These findings challenge “brain drain” understandings of health professional migration, and they make a case for research approaches which account for the role of migrant institutions in shaping public understanding and policy decision-making related to migrants and migration. This study also demonstrates the usefulness of frame analysis for studies of how migrant institutions pursue their interests and change the structural conditions of migration.

## APPENDIX Ia:

### Licensure Exam Leakage Timeline

<b>Year</b>	<b>Date</b>	<b>Event</b>
2006	11-12 June	42,000 examinees take the Professional Regulations Commission's (PRC) nursing licensure examination. Days later, reports of a leakage of test questions begin to circulate.
	21 June	A group of nursing licensure examinees files a complaint against members of the Board of Nursing (BON) and a review center official. The PRC creates an independent fact-finding committee to inquire into the allegations.
	15 July	The fact-finding committee finds that a leakage occurred: the test question manuscripts for Tests 3 and 5 of 2 BON members were copied and distributed to reviewees at 2 review centers before the examination dates.
	17 July	The BON adopts a resolution invalidating 20 items of Test 3 and re-computing the scores in Test 5 in order to avoid a retake of the exam.
	20 July	PRC files administrative charges against 2 BON members implicated in the leakage.
	21 July	PRC announces that it will allow passers of the June 2006 to take their professional oaths as nurses.
	25 July	Nursing school leaders ask for sanctions against Philippine Nurses Association (PNA) president, who is implicated in an attempt to cover up the leakage.
	26 July	Nursing educators file an open letter requesting the PRC to defer the oathtaking of those who passed the nursing licensure exam.
	15 August	PRC and BON announced that they will proceed with the oathtaking of examinees who passed based on the recomputed scores.
	16 August	Nursing educators ask the Court of Appeals to stop the PRC from implementing the recomputation and allowing those who passed the June 2006 examination based on the recomputed scores to take their oaths as nurses.
	18 August	The Court of Appeals issues a temporary restraining order, preventing the PRC from enforcing the score recomputation and proceeding with the oathtaking scheduled on 22 August 2006.
	23 August	The Presidential Task Force on National Licensure Examination files a petition asking for a retake of Test 3 and Test 5.
	28 August	President Gloria Macapagal Arroyo (GMA) orders the PRC to reorganize the Board of Nursing. PNA officials resign in the wake of the leakage controversy.
	9 September	National Bureau of Investigation (NBI) files criminal charges against BON examiners involved in the leakage.

2006	24 September	Examinees and nursing educators file a petition requesting that the Court of Appeals order a retake of the affected tests.
	27 September	GMA administration orders a retake of the affected tests on the nursing licensure exam, but leaves procedural decisions to the Department of Labor and Employment (DOLE) and the PRC.
	4 October	Following protests by examinees, GMA administration defers plans for a retake of affected tests pending the Court of Appeals decision.
	10 October	GMA administration gives DOLE responsibility for determining plans for a retake of the nursing licensure exam.
	11 October	NBI announces filing of criminal charges against 17 review center officials in connection with the leakage.
	13 October	The Court of Appeals declares score recomputation null and void and orders the PRC to conduct a selective retake of the nursing licensure exam for examinees who passed under the scheme. Successful examinees are allowed to take their oaths and get their licenses.
	26 October	The Court of Appeals upholds the legality of oath-taking for successful examinees of the June 2006 nursing licensure exam.
	29 October	Department of Justice (DoJ) begins probe of the leakage.
	31 October	GMA accepts resignations and replaces all members of the BON.
	3 November	Nursing educators and examinees petition the Supreme Court to order a retake for all passers of the June 2006 licensure exam.
2007	9 February	US National Council of State Boards of Nursing (NCSBN) agrees to offer the US licensure exam (NCLEX) in the Philippines for the first time.
	14 February	The US Commission on Graduates of Foreign Nursing Schools (CGFNS) announces that it will deny VisaScreen certificates for June 2006 nursing licensure examinees. It states that June 2006 examinees can qualify for VisaScreen certificates by retaking Tests 3 and 5 on a future licensure exam.
	16 February	GMA orders the DOLE to appeal the CGFNS decision. Supreme Court rejects appeal for full retake of the licensure exam.
	19 February	A government-private sector task force is formed to appeal the CGFNS decision, headed by the PRC chairwoman.
	24 February	DOLE announces that it will offer a voluntary retake of Tests 3 and 5 of the June 2006 nursing licensure exam in response to the CGFNS decision.
	26 February	DOLE begins talks with nursing school deans to conduct reviews for the voluntary retake.
	4 March	Task force leaves for the US to appeal the CGFNS denial of VisaScreen certificates to June 2006 passers.
	5 March	CGFNS announces that its decision to deny VisaScreen



	8 March	Certification to June 2006 passers. Corruption charges filed against 2 BON examiners for their role in the leakage.
2007	14 March	GMA formally orders DOLE to begin preparations for voluntary retake of Tests 3 and 5; allocates P20 million to subsidize retake fees.
	1 June	Criminal corruption charges filed against 2 BON examiners for their role in the leakage.
	11 June	11,000 examinees retake Tests 3 and 5 of nursing licensure exam in order to preserve their eligibility for US employment.
	23 August	DoJ files criminal complaint against 4 review center officials involved in the leakage.
	27 August	Results of Tests 3 and 5 retake announced: 69% of examinees pass.
2008	7 February	DoJ clears 3 review center officials of criminal liability; charges remain against 1 official (also former PNA president).
	1 March	Commission on Higher Education (CHED) announces plans to close independent review centers unless they integrate with nursing schools by May 2008.

## APPENDIX Ib:

### JPEPA Timeline

Year	Date	Event
2006	9 September	President Gloria Macapagal Arroyo (GMA) and Japanese Prime Minister Junichiro Koizumi sign the Japan-Philippines Economic Partnership Agreement (JPEPA) in Helsinki, Finland.
	10 September	Japan announces that it will accept up to 400 nurses and 600 caregivers from the Philippines under the JPEPA.
	7 November	The Senate opens an inquiry into JPEPA provisions governing the entry of Filipino nurses into Japan and allowing toxic waste to enter the Philippines from Japan.
	17 November	GMA officially submits the JPEPA to the Senate for ratification.
	27 November	The Japanese Nurses Association (JNA) announces its opposition to having Filipino nurses work in Japan under the JPEPA.
2007	January	Filipino nurses “miss opportunity” to take licensure exams in Japan in 2007 because JPEPA has not yet been ratified.
	24 May	GMA and Japanese Prime Minister Shinzo Abe meet to discuss the JPEPA, which remains under debate in the Philippine Senate.
	15 August	Senators hold a forum with the Junk JPEPA Coalition, an advocacy group composed of lawyers, environmentalists and nursing advocates who oppose the treaty.
	21 August	Indonesia and Japan sign a free-trade agreement that includes provisions for movement of nurses and caregivers. This development is highlighted by pro-JPEPA parties as a missed opportunity for the Philippines. Filipino nurses still cannot go to Japan since the JPEPA has not been ratified.
	25 August	Japan’s Office of Development Assistance announces that it will provide financial support for Japanese language training of Filipino nurses in the Philippines and Japan.
	29 August	Senate President asks GMA for clarifying information about JPEPA provisions including “scientific assessment” of employment prospects for Filipino nurses in Japan.
	14 September	The Senate Committee on Foreign Relations begins public hearings on the JPEPA.
	4 October	Advocacy groups Free Trade Alliance and Health Alliance for Democracy ask the Philippine government to renegotiate the JPEPA, while officials from the Departments of Trade & Industry, Labor & Employment and Foreign Affairs testify to its benefits to Filipino nurses and other workers.
	6 October	GMA forms a task force to convince senators to ratify the JPEPA.

	24 October	Delegates to the Philippine Nursing Convention hold a candlelight vigil to protest the JPEPA.
2007	22 December	Japan announces that it will accept 1000 Indonesian nurses and caregivers over the next 2 years under its trade agreement.
2008	March	END OF FRAME ANALYSIS STUDY PERIOD. After Senators' initial hopes to ratify JPEPA in January 2008, the agreement has not yet been approved.
	8 October	JPEPA ratified by Philippine Senate.

**APPENDIX IIa:**

Licensure Exam Leakage Signature Matrix

	<b>Metaphors</b>	<b>Catchphrases</b>	<b>Depictions</b>	<b>Roots</b>	<b>Consequences</b>	<b>Appeals to Principle</b>
<b>Culture</b>		<ul style="list-style-type: none"> <li>• Integrity</li> </ul>		<ul style="list-style-type: none"> <li>• Apathy</li> <li>• Culture of cheating</li> <li>• Greed</li> <li>• Litigiousness</li> </ul>		<ul style="list-style-type: none"> <li>• Decency</li> <li>• Honor</li> <li>• Values</li> </ul>
<b>Economic—General</b>	<ul style="list-style-type: none"> <li>• Opportunistic recruiters as “vultures”</li> </ul>			<ul style="list-style-type: none"> <li>• Commercialization of nursing education</li> <li>• Competition—malicious accusations by competing review centers</li> <li>• Corruption</li> <li>• Economic dependence on overseas workers</li> <li>• Nursing-migration link</li> <li>• Opportunism of review center operators and recruiters</li> </ul>	<ul style="list-style-type: none"> <li>• Cost of retake to government, others</li> <li>• Financial effects on doctors, hospitals, nursing education industry, review centers</li> </ul>	

<p><b>Economic—Image</b></p>	<ul style="list-style-type: none"> <li>• Clean/dirty metaphors:</li> <li>• “Smeared” image</li> <li>• “Tainted”, “marred”, “tarnished” exam</li> <li>• Concern about ensuring “clean”, “pure” exam process</li> <li>• Retake as a “cleansing process” or “cleanup”</li> <li>• Health metaphors:</li> <li>• Leakage as a “virus”</li> <li>• Retake as a “bitter pill”, “cure”, “surgical procedure”</li> <li>• Examinees “under a cloud” or “shadow” due to leakage</li> </ul>	<ul style="list-style-type: none"> <li>• Credibility</li> <li>• Integrity</li> <li>• Reliability</li> <li>• Validity</li> </ul>	<ul style="list-style-type: none"> <li>• Leakage as anomaly or scandal</li> <li>• Sordid, unsavory</li> <li>• Leakage as illegal, beneficiaries as cheaters</li> <li>• Retake as opportunity for redemption</li> </ul>		<ul style="list-style-type: none"> <li>• Damage/destruction to image of 2006 examinees, Filipino nurses, other Filipino workers, nursing education &amp; licensure system, nursing profession, the Philippines</li> <li>• Questions, doubt about qualifications of examinees</li> <li>• Stigma, shame, embarrassment of examinees</li> <li>• Loss of prestige, confidence and trust in Filipino nurses in destination countries</li> <li>• Lost domestic and international job opportunities</li> <li>• NCLEX in the Philippines</li> <li>• Visa screening for US employment</li> </ul>	<ul style="list-style-type: none"> <li>• Strong response to the leakage a matter of national interest, common good</li> <li>• Filipino nurses’ reputation for “culture of caring”, honesty, trustworthiness</li> <li>• Tradition of excellence, “world-class” nurses</li> <li>• Dignity, honor, nobility of nursing profession</li> <li>• Sanctity of examination process</li> </ul>
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<b>Nurses' Rights</b>	<ul style="list-style-type: none"> <li>Students retaking exam under "Damocles' sword"</li> </ul>		<ul style="list-style-type: none"> <li>Leakage as a crime:</li> <li>Leakers as criminals, crooks, guilty, perpetrators</li> <li>Students as innocent victims</li> <li>Students' employment plans in jeopardy, limbo (unable to pursue independence, help families)</li> </ul>		<ul style="list-style-type: none"> <li>Discrimination in job market, lost domestic &amp; international job opportunities</li> <li>Negative effect on students' employment plans—consigned to mediocrity because of association with leakage</li> <li>Psychological effects: demoralization, despair, suffering, pain, trauma</li> <li>Cost/effort of retake to students</li> </ul>	<ul style="list-style-type: none"> <li>Compassion, sympathy for examinees</li> <li>Fairness to honest nurses, presumption of innocence</li> <li>Protection of nurses' rights, pursuit of their dreams</li> </ul>
<b>Professionalism—Health &amp; Safety</b>		<ul style="list-style-type: none"> <li>Capability</li> <li>Competence</li> <li>Knowledge</li> </ul>		<ul style="list-style-type: none"> <li>Poor quality nursing education</li> </ul>	<ul style="list-style-type: none"> <li>Comparability of qualifications/skills of examinees (to US licensure)</li> <li>Negative effects on health &amp; safety of patients</li> </ul>	<ul style="list-style-type: none"> <li>Excellence vs. mediocrity</li> <li>Rights of patients</li> <li>World-class</li> <li>Worthiness (are nurses worthy of their licensure?)</li> </ul>

<b>Professionalism—Values of Nursing</b>	<ul style="list-style-type: none"> <li>• Nursing profession in need of “revolution of heart”</li> </ul>	<ul style="list-style-type: none"> <li>• Integrity</li> </ul>	<ul style="list-style-type: none"> <li>• Nurses as heroes</li> <li>• Nursing as vocation</li> </ul>	<ul style="list-style-type: none"> <li>• Protectionism of professions—create difficult exams to protect turf rather than ensure quality</li> </ul>		<ul style="list-style-type: none"> <li>• Bravery, courage</li> <li>• Character, ethics</li> <li>• Duty</li> <li>• Honesty, candor</li> <li>• Honor</li> <li>• Humility</li> <li>• Nobility</li> <li>• Professionalism</li> <li>• Purpose/vision</li> <li>• Respect</li> <li>• Responsibility, hard work</li> <li>• Service, selflessness</li> <li>• Trust</li> <li>• Truth</li> </ul>
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**APPENDIX IIb:**

JPEPA Signature Matrix

	<b>Metaphors</b>	<b>Catchphrases</b>	<b>Depictions</b>	<b>Roots</b>	<b>Consequences</b>	<b>Appeals to Principle</b>
<b>Economic—Opportunity</b>	<ul style="list-style-type: none"> <li>Japan “opening doors/markets” to Filipino nurses</li> </ul>		<ul style="list-style-type: none"> <li>Cooperation, partnership</li> <li>Government-to-government deployment</li> <li>Historic, landmark, milestone, symbolic agreement</li> <li>First time Japan accepts foreign nurses</li> </ul>	<ul style="list-style-type: none"> <li>Close relationship between Philippines &amp; Japan</li> <li>Distance—Japan closer than other destination countries</li> <li>Aging population in Japan—high demand for nurses</li> <li>Compensation for lost entertainer jobs due to tighter visa regulations</li> <li>Nurse supply, turnover in Japan</li> <li>Oversupply of nurses in the Philippines</li> </ul>	<ul style="list-style-type: none"> <li>Higher salary</li> <li>Opportunity for other Filipino professionals to work in Japan</li> <li>Revitalization of Japanese labor markets</li> <li>Revitalization of Japanese nursing profession</li> <li>Technology/knowledge transfer</li> <li>Benefits/costs to the Philippines</li> <li>Competition from other countries</li> <li>Competitive advantage</li> <li>Jobs</li> </ul>	<ul style="list-style-type: none"> <li>Duty</li> <li>Empowerment</li> <li>Mutual advantage</li> <li>National interest</li> </ul>
<b>Economic—Critical</b>	<ul style="list-style-type: none"> <li>Nurses as “bargaining chip”</li> <li>“Clean” nurses traded for garbage, “poison”</li> </ul>		<ul style="list-style-type: none"> <li>Unfair trade</li> <li>Migrant workers as cheap labor</li> </ul>		<ul style="list-style-type: none"> <li>Tradeoff for toxic waste</li> </ul>	<ul style="list-style-type: none"> <li>Transparency</li> <li>Unconstitutional</li> </ul>

Nurses' Rights	<ul style="list-style-type: none"> <li>• Licensure exam requirement a “roadblock” to prevent Filipino nurses from working in Japan</li> </ul>	<ul style="list-style-type: none"> <li>• Neocolonial</li> <li>• “Our nurses”</li> </ul>	<ul style="list-style-type: none"> <li>• Negotiators &amp; Japanese government deceptive about provisions</li> <li>• Failure to consult with nursing groups</li> <li>• Failure to negotiate with Japanese government</li> <li>• Agreement creates false hopes for nurses</li> <li>• JPEPA as bad deal:</li> <li>• Nurses as commodities</li> <li>• Nurses treated as second-class workers</li> <li>• Modern-day slave trade</li> </ul>	<ul style="list-style-type: none"> <li>• Strict requirements Japanese government attempt to avoid domestic political backlash</li> </ul>	<ul style="list-style-type: none"> <li>• Requirements/restrictions limit options for Filipino nurses</li> <li>• Training requirement before gaining full legal status</li> <li>• Culture &amp; language—requirement to learn and take licensure exam in Japanese</li> <li>• Wages/benefits</li> <li>• Working conditions</li> <li>• Degree requirement for caregivers</li> <li>• Discrimination</li> <li>• Humiliation</li> <li>• Potential for abuse, movement into sex work</li> <li>• Sets dangerous precedent for migrant workers in other countries</li> <li>• Illegal recruitment</li> <li>• Breakdown of families</li> </ul>	<ul style="list-style-type: none"> <li>• Conditions of employment</li> <li>• Dignity</li> <li>• Fairness, equality</li> <li>• Nurses' rights, security, welfare</li> </ul>
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Professionals—Critical				<ul style="list-style-type: none"> <li>• Positive image/reputation of Filipino nurses</li> <li>• Preference for exporting skilled (vs. unskilled) workers</li> </ul>	<ul style="list-style-type: none"> <li>• Professional development</li> </ul>	<ul style="list-style-type: none"> <li>• Japanese language requirement necessary for health &amp; safety of Japanese patients</li> <li>• Effectiveness</li> <li>• Efficiency</li> </ul>
Professionals—Positive						<ul style="list-style-type: none"> <li>• Japanese language requirement necessary for health &amp; safety of Japanese patients</li> <li>• Effectiveness</li> <li>• Efficiency</li> </ul>
Professionals—Critical					<ul style="list-style-type: none"> <li>• Loss of professionals in the Philippines</li> <li>• Nurses not interested—preference for US/Europe</li> </ul>	<ul style="list-style-type: none"> <li>• Nurses' options/autonomy</li> </ul>

### **APPENDIX IIIa:**

#### **Study Fact Sheet**

**Title of Study: Health Professions Education as a National Industry: Framing of Controversies in Nursing Education and Migration in the Philippines**

**Principal Investigator:** Leah E. Masselink, BA (PhD Student)

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**Funding Source:** Department of Health Policy and Administration (Global Health Travel Grant)

**Study Purpose:** To describe the framing of a recently passed trade agreement opening Japanese markets to Filipino nurses and a cheating scandal on the June 2006 nursing licensure examination in Philippine newspapers; to explore the policy context surrounding these issues to explain why certain frames have been dominant.

**Participants:** Interviewees will be drawn primarily from three groups: policymakers/government agents, educators, and journalists.

**Procedures (methods):** Qualitative interviews of key informants; archival research at local university libraries and other institutions. Policymakers and educators will be asked to discuss their knowledge of Philippine nursing education and migration policies as they relate to the two issues of interest (the trade agreement with Japan and the response to the licensure examination cheating scandal). Journalists will be asked to discuss their knowledge of how news coverage decisions are made in relation to these issues.

**Inclusion/Exclusion Criteria:** The primary criterion for inclusion in the study is personal knowledge of nursing education and migration policy in the Philippines, particularly as it relates to a trade agreement sending Filipino nurses to Japan and/or the response to a cheating scandal on the 2006 nursing licensure examination. The study population will include policymakers, educators, and journalists, but other types

of subjects may also be added as they become available. No specific exclusion criteria exist; the PI will seek information representing the broadest variety of perspectives possible during the study period.

## **APPENDIX IIIb:**

### **Study Informed Consent Form**

**University of North Carolina-Chapel Hill  
Consent to Participate in a Research Study  
Adult Participants  
Social Behavioral Form**

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**IRB Study # 07-1080  
Consent Form Version Date: 07/25/2007**

**Title of Study: Health Professions Education as a National Industry: Framing of Controversies in Nursing Education and Migration in the Philippines**

**Principal Investigator:** Leah E. Masselink, BA  
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**Funding Source:** Department of Health Policy and Administration (Global Health Travel Grant)  
**Study Contact telephone number: 919-966-4784**  
**Study Contact email: leah\_masselink@unc.edu**

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**What are some general things you should know about research studies?**

You are being asked to take part in a research study. To join the study is voluntary. You may refuse to join, or you may withdraw your consent to be in the study, for any reason, without penalty.

Research studies are designed to obtain new knowledge. This new information may help people in the future. You may not receive any direct benefit from being in the research study. There also may be risks to being in research studies.

Details about this study are discussed below. It is important that you understand this information so that you can make an informed choice about being in this research study. You will be given a copy of this consent form. You should ask the researchers named above, or staff members who may assist them, any questions you have about this study at any time.

**What is the purpose of this study?**

This research study has two purposes: to describe the framing of a recently passed trade agreement opening Japanese markets to Filipino nurses and a cheating scandal on the June 2006 nursing licensure examination in Philippine newspapers and to explore the policy context surrounding these issues to explain why certain frames have been dominant.

**Are there any reasons you should not be in this study?**

You should not be in this study if you have no involvement with or knowledge of nursing education and migration policy in the Philippines, particularly as it relates to a trade agreement sending Filipino nurses to Japan and/or the response to a cheating scandal on the 2006 nursing licensure examination.

**How many people will take part in this study?**

You will be one of approximately 10 people interviewed for this research study.

**How long will your part in this study last?**

Your participation in this study interview is expected to last between 1 and 2 hours.

**What will happen if you take part in the study?**

The PI will ask you to discuss a variety of topics, including (but possibly not limited to) your knowledge about the policy context of nursing education in the Philippines, particularly as it pertains to the two controversies of interest in this study. The interviewer may ask to tape record the interview, and she will take notes in order to guide the discussion. You may accept or decline to have your interview tape recorded without influencing your ability to participate in the study.

**What are the possible benefits from being in this study?**

Research is designed to benefit society by gaining new knowledge. You may not benefit personally from being in this research study.

**What are the possible risks or discomforts involved from being in this study?**

The questions discussed in the interviews may pertain to sensitive topics or topics of which you have unique knowledge. However, your comments and responses will be treated confidentially, and you have the right to refuse to answer any question or withdraw from the study at any time. There may be uncommon or previously unknown risks. You should report any problems to the researcher.

**How will your privacy be protected?**

Participants will not be identified in any report or publication about this study. Although every effort will be made to keep research records private, there may be times when federal or state law requires the disclosure of such records, including personal information. This is very unlikely, but if disclosure is ever required, UNC-Chapel Hill will take steps allowable by law to protect the privacy of personal information. In some cases, your information in this research study could be reviewed by representatives of the



University, research sponsors, or government agencies for purposes such as quality control or safety.

In order to maintain confidentiality in the interviews, interview participants will also be asked not to discuss the content of the discussion with any outside parties. In order to capture the content of the interviews completely and accurately, we plan to tape record and transcribe the interviews. If at any time you wish to make an “off the record” comment, you may ask the interviewer to turn off the tape recorder and restart it when you are ready to continue. We will password protect all interview transcripts on our computers and will keep all interview tapes in a locked file. Individual responses and identifying information about interview participants will not be published in any form. After the interviews are transcribed, the tapes will be destroyed.

Informed consent forms and other documents will be stored in separate locked files. Interview transcripts will contain only coded identifiers, which will be stripped after data analysis is complete. De-identified interview transcripts will be stored a password-protected ATLAS.ti file.

**Will you receive anything for being in this study?**

You will not receive anything for taking part in this study.

**Will it cost you anything to be in this study?**

There will be no costs for being in the study.

**What if you have questions about this study?**

You have the right to ask, and have answered, any questions you may have about this research. If you have questions, or concerns, you should contact the researchers listed on the first page of this form.

**What if you have questions about your rights as a research participant?**

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject you may contact, anonymously if you wish, the UNC Institutional Review Board at 001-919-966-3113 or by email to [IRB\\_subjects@unc.edu](mailto:IRB_subjects@unc.edu).

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**Participant’s Agreement:**

I have read the information provided above. I have asked all the questions I have at this time. I voluntarily agree to participate in this research study.

\_\_\_\_\_  
Signature of Research Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Research Participant

\_\_\_\_\_  
Signature of Person Obtaining Consent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Person Obtaining Consent

## **APPENDIX IV:**

### **Interview Script**

#### **Licensure Exam Leakage**

- Why do you believe that the nursing licensure exam leakage controversy was the subject of such intensive media coverage?
- With what values do you perceive efforts to address the leakage controversy to be associated? How have you seen these invoked in public discussion?
- Whom do you perceive to be the powerful players (individuals, agencies) who influenced the response to the nursing licensure exam leakage controversy?
- What priorities do you believe that this reflects?
- What is your opinion of how the controversy was resolved? How might it have played out if addressed differently? What (if anything) do you think should have been done differently to resolve it?
- To your knowledge, what (if any) alternative perspectives or priorities on the leakage controversy exist, and how have these been expressed in public discussion and policy debates?
- What has been the long-term impact of the leakage—positive or negative? For nurse migration, or for the nursing profession in general?

#### **JPEPA**

- History of migration from Philippines to Japan—what was the precedent before the JPEPA?
- In your opinion, what was the intent of the provision for movement of nurses? Whose idea was it?
- Why do you think that the agreement was so slow to pass?
- What role did the provisions for nurses have in delaying the passage? (vs. other issues)
- Does the nursing education sector take a particular position on the JPEPA? If so, what is it?

- What are the key concerns expressed by other groups?
- Do you believe that the concerns expressed about exploitation of nurses are valid? Why or why not?
- Are concerns about exploitation unique to Japan? If so, why?
- What do you believe will be the impact of the JPEPA for nurse migration? For movement of natural persons to Japan in general?
- What would have been the impact if JPEPA had not passed?

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