

Home to Serve: A Phenomenological Study of Filipino Clinical Nurses' Return Migration

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ABSTRACT

This phenomenological study explored the lived experiences of Filipino clinical nurses who returned “home to serve” after working abroad. Guided by Colaizzi’s method and framed by Cassarino’s Theory of Return Migration, interviews with ten returnee nurses revealed the main themes: Enriching Opportunities, Quality of Life, Professional Milieu, Transformative Reflections, and Career Progression. Findings show that return migration is primarily driven by professional aspirations, strong family ties, a sense of cultural belonging, and a desire to contribute to the community. Reintegration involved complex professional and personal adjustments but also fostered resilience, personal growth, and new leadership roles. The study highlights the significant impact of returning nurses on the Philippine healthcare system and underscores the need to recognize and support their unique experiences.

Keywords: Home to Serve, phenomenological study, return migration, reintegration, Filipino clinical nurses

THE PROBLEM AND ITS BACKGROUND

The global migration of healthcare workers reflects complex dynamics and persistent workforce shortages. The World Health Organization projects a deficit of 10 million healthcare workers by 2030. Low- and middle-income countries will likely face the most severe shortages, which could worsen without strategic interventions (WHO, 2022). Developed countries increasingly recruit healthcare professionals from developing nations to fill these gaps (Atento et al., 2025; Robredo et al., 2022). High-income countries seek skilled professionals. Meanwhile, individuals from less developed regions migrate for better career prospects, higher compensation, and opportunities for advancement. As a result, migration creates both positive and negative effects for healthcare workers and their countries of origin and destination (Hillmann et al., 2022; Efendi et al., 2021).

Within this global context, the Philippines has become a major source of nurses for the international workforce. This is due to its strong educational infrastructure, widespread English proficiency, and comprehensive professional training (Atento et al., 2025). Many Filipino nurses migrate to improve working conditions, advance their careers, and achieve greater economic stability. This migration significantly impacts healthcare delivery worldwide (Robredo et al., 2022; Capucan, 2020). However, Filipino nurses often face challenges integrating into foreign health systems, including cultural adaptation, credential recognition, and workplace discrimination (Cubelo et al., 2025; Adarlo, 2023). Recently, more nurses have returned to the Philippines, bringing knowledge and expertise gained abroad. This trend highlights the emerging phenomenon of nurse return migration (Ramirez, 2025; Moncatar et al., 2023; Efendi et al., 2021).

Although extensive research has examined how Filipino nurses migrate, scholars still struggle to understand the significance of returning “home to serve.” This concept involves nurses bringing back globally acquired skills, values, and experiences to support the Philippine healthcare system. Building on the previous discussion, this study clarifies the lived meaning of “home to serve” by exploring the motivations, challenges, and transformations that shape Filipino nurses' return journeys.

While research on the emigration of Filipino nurses is extensive, studies on their return and reintegration remain relatively scarce. Evidence suggests family ties and the desire to invest in children’s futures often motivate

returnees (Trinidad & Faas, 2025), with return migration viewed as part of a broader family strategy. Migrants return for family reunification, well-being, and professional objectives (Moncatar et al., 2023; Efendi et al., 2021), while emotional connections, support networks, and a sense of belonging also shape decisions. International experience influences professional identity and perceptions of contributions to the home country's health system, further motivating return migration (Rodrigo, 2025; Ramirez, 2025).

Despite these insights, significant gaps persist regarding the reintegration experiences, motivations, challenges, and contributions of returning Filipino clinical nurses. This lack of understanding hinders efforts to develop policies and support systems that optimize their reintegration and fully utilize their skills (Conjares et al., 2025; Robredo et al., 2022).

To address this gap, this study employs a phenomenological approach to examine the lived experiences of Filipino clinical nurses who return "home to serve." Specifically, it investigates their motivations for returning, the challenges encountered during reintegration, and the nature of their contributions to the healthcare system. By focusing on these areas, the study aims to generate actionable findings to inform the development of strategies and policies that maximize the benefits of return migration, strengthen the local healthcare workforce, and better support returning nurses.

Statement of the Problem

Aligned with this purpose, this study investigates why Filipino clinical nurses return home after working abroad. It also explores their personal and professional challenges, key insights, and reasons for staying. Understanding these experiences is vital, as the Philippines produces more nurses than can be absorbed locally to meet global demand. Perspectives from returnees can offer insights to strengthen domestic healthcare and inform reintegration policies.

1. What are the motivations that influence clinical nurses to return to the Philippines after working abroad?
2. What personal and professional challenges do returning nurses encounter during reintegration?
3. What insights and reflections do returning nurses share about their professional and personal experiences abroad and upon returning?
4. What factors influence their decision to continue working and stay in the Philippines?

Significance of the Study

Given the importance of this topic, this study explores return migration among Filipino clinical nurses, a group critical to both local and global healthcare systems. The findings offer valuable insights for multiple sectors:

Nursing Practice: Understanding the experiences of returning nurses can inform the design of mentorship programs, onboarding strategies, and supportive work environments. Insights into cultural readjustment and professional changes can help institutions use international skills, improve job satisfaction, and retain nurses.

Nursing Education: The study shows the need to adapt curricula to prepare nurses for international practice and reintegration. Nursing programs can include cross-cultural training, strategies for diverse settings, and exposure to the experiences of returnees. This approach promotes global perspectives and a better understanding of international systems among students.

Policymakers: Findings can guide policies and incentives to reduce nurse emigration, encourage skilled nurses to return, and ensure their reintegration into the Philippine workforce.

Healthcare Institutions and Stakeholders: Institutions can use returning nurses' experiences to improve recruitment, retention, and workforce planning. This approach addresses staffing shortages and uses specialized skills and knowledge from abroad.



Future Research: This study addresses a gap in the literature. It provides a foundation for research about the long-term effects of return migration on nursing, workforce development, and the Philippine healthcare system.

By illuminating the experiences of nurses who choose to return “home to serve,” this study creates a foundation of valuable knowledge to support policies, practice, and educational strategies that optimize the reintegration and impact of returnee nurses in the Philippines.

Scope and Limitations

This study acknowledges several limitations. The participants’ experiences may vary depending on their workplaces, which are beyond the researcher’s control. The study uses self-reported data from volunteers, so the reliability depends on the participants’ honesty and self-awareness.

The study used non-random sampling, such as criterion-based, purposive, and snowball sampling, which may limit generalizability. As a phenomenological study with a small number of participants, the results offer an in-depth view of lived experiences rather than broad generalizations.

As a phenomenological study, this research explores what it means for Filipino nurses to return “home to serve.” The focus is on the essence and meaning of this experience, not on making broad generalizations.

REVIEW OF LITERATURE

This review examines the international migration of healthcare workers, with a focus on Filipino nurses. It asks what it means for Filipino clinical nurses to “come home to serve.” The review highlights return migration as a process of personal and professional transformation, rather than merely a workforce trend. The chapter covers the global context of migration, explores nurse migration and return, and analyzes reintegration challenges. Synthesizing current research lays a foundation for understanding return migration and supports the present study’s focus on Filipino nurses’ return.

Global Migration of Healthcare Workers

Global demand for healthcare professionals is rising, leading to increased cross-border movement of nurses and other health workers (World Health Organization, 2020). As workforce shortages persist and demographic changes accelerate, disparities in working conditions further fuel this trend (Smith & Barrow, 2022). Notably, the Philippines has emerged as a leading supplier of nurses, supported by a system specifically designed to prepare healthcare workers for international employment (Ortiga & Macabasag, 2021).

International migration is a central feature of contemporary globalization. In 2024, an estimated 304 million individuals lived outside their country of birth. This accounts for 3.7 percent of the global population of 8.2 billion (International Labor Organization, 2024). In 2020, there were 275 million migrants, making up 3.5 percent of the global population (United Nations, 2020). Skilled professionals, including healthcare workers, form a growing share of global mobility. International nurse migration involves the movement of nurses from low- and middle-income countries to higher-income nations in pursuit of advanced healthcare systems and enhanced career opportunities (Bludau, 2021). Economic disparities and workforce demand further drive these global migration patterns. Recent reports indicate that developed countries are increasingly dependent on international recruitment to address persistent workforce shortages (OECD, 2020).

The Philippines is a major source of nurses worldwide. Filipino nurses work across North America, Europe, the Middle East, and Asia (Labrague et al., 2020; Ortiga & Macabasag, 2021). In 2023, World Health Organization data indicated that approximately 240,000 Filipino nurses were employed abroad, while at least 17,000 signed overseas employment contracts in 2020 (World Health Organization, 2023; Philippine Overseas Employment Administration, 2020). This sustained mobility highlights the vital contributions of Filipino nurses to global health systems.

This dynamic has consequences for workforce stability in the Philippines and for healthcare delivery in recipient nations. Understanding these global trends provides important context for examining the individual motivations that drive Filipino nurses to pursue opportunities abroad.

Motivations for Nurse Migration

The migration of Filipino nurses is driven by the pursuit of higher salaries, job security, career advancement, safer and better-resourced workplaces, and more supportive environments in destination countries (Peralta et al., 2024; Ortiga & Macabasag, 2021; Labrague et al., 2020). Dissatisfaction with local conditions, along with the desire to support families and achieve personal and professional growth, further motivates migration (Labrague & de los Santos, 2020).

The global demand for Filipino nurses is high, reflecting their strong skills and their country's reputable nursing education system (World Health Organization, 2020; Health at a Glance, 2025). This demand aligns with their motivations—better pay, stability, advancement, and improved workplace conditions (Schäfer & Morillas, 2025; Nezhad & Vaisi-Raygani, 2025; Konlan et al., 2023). Consequently, many choose to work abroad to support their families and reach socioeconomic goals.

Recent research shows that workplace conditions significantly affect nurses' migration intentions. Job satisfaction, compensation, working conditions, and burnout are strongly linked to healthcare worker emigration (Ferreira et al., 2020). Labrague et al. (2020) found that these job-related factors led Filipino nurses to leave within 1 to 5 years. This results in persistent turnover and staffing shortages in local hospitals (Tiu et al., 2025). The International Council of Nurses (2025) supports these findings. It identifies poor working environments, workforce shortages, and limited professional support as major push factors.

Institutional policies and recruitment strategies shape nurse migration. Agreements, such as those that place Filipino nurses in Saskatchewan and Manitoba, structure global flows of nursing labor. High-income nations depend on internationally educated nurses to fill gaps (Cabanda, 2020; OECD, 2025). These "global nurse care chains" can create inequalities and transform health systems (Chamberlain & Lyons, 2022; Näre & Silva, 2021; Kordes et al., 2020). While much research focuses on the motivations for nurse migration, less attention is paid to the experiences of Filipino nurses returning home. This study, centered on the phenomenon of "home to serve," addresses this gap by highlighting the unique challenges and opportunities encountered by returnees.

Motivations for Return Migration

Motivations for return migration among Filipino nurses are multifaceted, reflecting a complex interplay of economic, social, cultural, and professional factors (Shrestha & Bista, 2021; Tezcan, 2023). Family responsibilities are often paramount—many nurses return to care for children, spouses, or elderly parents, or to reunite with loved ones after years of separation (Villacorta et al., 2020; Hernandez & Yap, 2024). Emotional ties and a sense of belonging in the Philippines also strongly influence the decision to come home (Wu et al., 2024; Tezcan, 2023). In some cases, the return is a collective decision, shaped by the needs and expectations of family members and the broader household (Shrestha & Bista, 2021; Hernandez & Yap, 2024).

Professional ambitions and personal growth also motivate returns. Some nurses achieve financial stability or secure contracts abroad before returning, aiming to apply their skills and international experience to the domestic healthcare system (Liao et al., 2025; Moncatar et al., 2023). Many feel a sense of professional responsibility and want to give back to the Philippines, contributing to national health services and supporting local healthcare development (Smith & Barrow, 2022; Hernandez & Yap, 2024). These findings highlight that returning "home to serve" is rarely a single-factored decision, but rather a deeply personal process shaped by the interplay of duty, belonging, aspiration, and identity—core ideas at the heart of this study.

Return Migration Experiences and Reintegration Challenges

Despite the potential benefits of return migration, reintegration into the Philippine healthcare system is often complex and multi-dimensional. Returning nurses must navigate a range of structural, professional, and

emotional adjustments as they readapt to local healthcare environments after international practice (Berdida et al., 2025). Variations in workplace resources, healthcare infrastructure, and organizational practices can be significant obstacles. Advanced skills and international perspectives acquired abroad are not always recognized or fully utilized by domestic institutions.

A study by Tubaña (2021) found that institutional barriers may hinder career progression, professional recognition, and access to support networks, leading to frustration and, in some cases, underemployment among returning Filipino nurses. Emotional and cultural adjustments, such as reverse culture shock, often complicate the reintegration process, as Ghimire and Qiu (2025) discuss in their longitudinal study of returning nurses. When expectations shaped by international experiences do not align with local workplace realities, nurses may experience disorientation, frustration, or dissatisfaction (Ghimire & Qiu, 2025). Additionally, Tubaña (2021) highlighted that adapting to different clinical protocols, hierarchical workplace structures, and varying levels of technological support can pose distinct challenges for returnees.

Reintegration also requires renegotiating professional identity and roles within the domestic healthcare system. As noted by Moncatar et al. (2023), while returnees bring valuable skills and global perspectives, they must adapt these competencies to local contexts—a process that shapes their sense of belonging and professional contribution. The process of “coming home to serve” thus involves not only logistical and professional adjustments, but also emotional and identity work as nurses renegotiate their roles and sense of purpose in the local context. Despite the growing body of literature, there remains a lack of detailed accounts of Filipino nurses' lived experiences upon return. Furthermore, little is known about the long-term effects of reintegration on professional identity and about strategies to better leverage international competencies within the local system (Spiliopoulos & Cuban, 2025). Addressing these gaps is crucial to ensuring that policy and practice fully support returning nurses, thereby optimizing their impact on Philippine healthcare.

Theoretical Framework

Cassarino's (2004, 2013) Theory of Return Migration frames return migration as a significant decision shaped by economic, professional, and socio-cultural factors. For Filipino clinical nurses, motivations include financial goals, experiences abroad, family responsibilities, and a renewed commitment to serving at home, all of which align with the theory's view of migration decisions as dynamic and context-dependent. Yet, the essence of “home to serve” goes beyond structural factors, encompassing the lived meaning, fulfillment, and transformation that Filipino nurses experience upon returning.

This theory is well-suited for studying return migration as a purposeful choice influenced by economic, professional, and socio-cultural factors. Studies support that workplace experiences, family, and changing priorities shape nurses' return decisions, reflecting migration's fluid nature (Alameddine et al., 2020; Li et al., 2025).

Economic and structural explanations do not fully capture Filipino nurses' decisions to return. Traditional models often overlook emotional and identity-based factors. Recent research shows return migration is also driven by critical life events and personal values (Lam et al., 2024; Villamin et al., 2024). The phrase “Home to Serve” encapsulates the core phenomenon this study explores: the return of Filipino clinical nurses as a deeply personal and transformative act, motivated by identity, belonging, and a desire to serve.

To deepen understanding, this study employs a phenomenological approach to explore the lived experiences of Filipino clinical nurses. Instead of testing predetermined variables, it investigates how nurses interpret their journeys, motivations for returning, and how they find meaning in serving their home country (Poth & Shannon-Baker, 2022).

The theory of return migration outlines factors affecting return, such as economic success, professional experience, and reintegration. Phenomenology uses nurses' narratives to show how these factors are experienced and negotiated, providing insight into the human side of return migration.

Reintegration is more than relocation; it is a process of adjusting to local professional, workplace, and societal expectations. Returning nurses experience reverse culture shock and identity shifts. The theory highlights reintegration as vital, while phenomenology reveals its subjective realities.

By combining the theory of return migration with phenomenology, this study addresses two gaps: contextualizing return migration in the Philippine nursing sector and highlighting Filipino clinical nurses' perspectives on service, home, and identity. Through this combined framework, the present study seeks to reveal how "home to serve" is lived and understood by returnee nurses, offering new insights into the personal and collective meanings of return migration in the Philippine context.

This framework supports the study's aim: to understand the essence of Filipino clinical nurses' return migration and how they interpret their decision to return and serve.

Definition of Terms

The following terms are operationally defined as a guide to the reader to grasp the specific terms that have relevance in the study:

Nurse Migration. Nurse migration in this study refers to a nurse moving from one location to another, whether temporarily or permanently, to work and reside there.

Return Migration. Return of a migrant nurse to her place of origin or country of citizenship after a period of living in another location.

Filipino Clinical Nurses. Filipino clinical nurses who provide direct patient care in various healthcare settings.

Home to Serve refers to the lived experience of Filipino clinical nurses who return to the Philippines from overseas employment, driven by a sense of professional duty, personal fulfillment, and a commitment to serve their fellow Filipinos.

METHODOLOGY

This chapter presents the methodology used to investigate the lived experience of "home to serve" among Filipino clinical nurses who have returned from overseas employment. Utilizing a descriptive-phenomenological design, the study seeks to explore both the practical aspects of return migration and the underlying meanings, motivations, and transformations that characterize the nurses' decisions to return and serve their country and community. The chapter details the research design, sampling strategies, instrumentation, data collection, bracketing, triangulation, data analysis, trustworthiness, and ethical considerations. These procedures contribute to a credible and comprehensive portrayal of the phenomenon central to this study.

Research Design

A descriptive-phenomenological design, grounded in Edmund Husserl's philosophical framework, was employed. Descriptive phenomenology aims to capture the essence of lived experiences as individuals consciously perceive them (Creswell & Poth, 2016; Neubauer et al., 2019). This approach was chosen to examine the motivations, reintegration experiences, and meanings attributed to return migration among Filipino clinical nurses who resumed practice in the Philippines after working abroad. The design enabled the collection and synthesis of detailed first-person accounts, emphasizing shared experience rather than theory generation or variable measurement (Giorgi, 2009).

Population and Sampling Techniques

The target population for this study was Filipino clinical nurses who had returned to practice in the Philippines after working abroad. This group was chosen because they were best positioned to provide rich insights into the phenomenon of "home to serve," offering detailed descriptions of their return migration, reintegration experiences, professional challenges, and renewed commitment to service. Participants were selected through



purposive sampling to ensure all met key inclusion criteria: (1) a minimum of five years of clinical experience abroad, ensuring substantial exposure to diverse cultural and healthcare contexts; (2) no legal issues related to overseas employment, to exclude cases influenced by legal complications; and (3) current employment as a clinical nurse in a hospital setting upon return, ensuring active engagement in professional practice.

At least ten participants were initially selected, with further recruitment continuing until data saturation was reached—when new interviews no longer yielded additional insights (Naeem et al., 2024). Recruitment involved referrals and snowball sampling, utilizing existing participants’ professional connections with other returning clinical nurses from various hospitals (Ting et al., 2025).

To provide meaningful context for the lived experiences of Filipino clinical nurses returning “home to serve,” this study gathered a range of demographic data from participants, as presented in Table 1. These characteristics were selected to highlight the diversity of backgrounds, career trajectories, and reintegration experiences among returnee nurses. Key variables include age, gender, years of clinical experience abroad, years since return to the Philippines, and current clinical role.

Table 1. Demographic Profile of Study Participants

Age Category		Number of Participants
31-40 years old		3
41-50 years old		5
51-60 years old		2
Gender		
Female		8
Male		2
Clinical Experience Abroad		
5-9 years		6
10-14 years		1
15 years and above		3
Years Since Return to the Philippines		
2 years		2
4 years		2
6 years		4
Current Clinical Role		
Staff Nurse		2
Charge Nurse		2
Supervisor Nurse		6
Total Participants		10

Instrumentation

A semi-structured interview guide was employed to explore the perceptions and lived experiences of Filipino clinical nurses who had returned to the Philippines after working abroad. In this study, the phrase "home to serve" refers to the process and meaning of Filipino nurses returning to their home country to contribute their skills and knowledge to their local communities after international work experience. The guide was carefully crafted to illuminate this meaning, centering on how nurses interpret their return and renewed service to their country and community. It comprised open-ended questions designed to elicit detailed descriptions of reintegration experiences, motivations for returning, challenges encountered, and personal reflections on what it means to serve at home (Creswell & Poth, 2016; Neubauer et al., 2019). Although the sequence of questions was prepared in advance, the order and phrasing were adapted to the flow of each interview, consistent with best practices in qualitative interviewing (Kallio et al., 2016). This flexibility allowed participants to narrate their experiences authentically while ensuring comprehensive coverage of core topics. Probing questions were used as necessary to clarify and expand upon responses. This approach balanced consistency in data collection with the depth required in phenomenological research (Giorgi, 2009). In this study, "return" refers specifically to Filipino nurse migrants who have permanently returned to the Philippines as opposed to those returning for temporary visits or short-term stays (Cortez et al., 2016).

Ensuring Trustworthiness

To ensure the reliability and validity of this research, the study applied Lincoln and Guba's trustworthiness criteria, encompassing credibility, transferability, dependability, and confirmability (Kocaman, 2024). These elements guided the research process to ensure robust, credible, and grounded results.

Credibility was ensured through member checking, inviting participants to review transcribed interviews and preliminary findings for accuracy. Prolonged engagement and peer debriefing further reinforced data integrity. The researcher ensured transferability by describing the study context, participant backgrounds, and data collection process in detail. This allows readers to judge if findings apply to other contexts.

Dependability was enhanced through a transparent audit trail documenting the research design, data collection, coding, and analysis. Systematic coding and recoding, along with peer review, validated the study's consistency and methodological rigor.

Confirmability was addressed by minimizing researcher bias to ensure findings reflected participants' perspectives. Reflective journaling, peer debriefing, and member checking helped ensure interpretations remained data-grounded.

By using these methods, the study ensures its rigor and the trustworthiness of its findings.

Data Gathering Procedure

Data collection commenced after receiving approval from the Ethics Research Board. Once relevant approvals were secured, the researcher contacted eligible participants, explained the study objectives, and obtained informed consent (Appendix F). Interview schedules were arranged according to participants' preferences for online or face-to-face formats. Online interviews were conducted via video conferencing platforms such as Zoom or Google Meet, while face-to-face interviews were held in public venues with semi-private seating, such as cafés.

Before each interview, the researcher reiterated participants' rights and reviewed the voluntary and confidential nature of participation. Permission for audio recording was obtained. Each interview included the researcher and a professional psychologist, who served as an external observer and support if any participant experienced distress (McCarron et al., 2021). Interviews were conducted from April to May 2025. Each session was video-recorded and later transcribed.

Collected information was member-checked for completeness and accuracy. Data were coded and analyzed following Colaizzi's (1978) descriptive phenomenological method: reading transcripts, extracting significant

statements, formulating meanings, grouping into thematic clusters, developing an exhaustive description, and validating findings through member checking. This process revealed patterns related to identity change and professional reconfiguration.

Ethical Considerations

The study adhered to ethical principles outlined in the Belmont Report: respect for persons, beneficence, and justice (Nagai et al., 2022). In line with respect for persons, participants provided informed consent, entered the study voluntarily, and had full knowledge of its objectives, procedures, potential risks, and their right to withdraw at any time without penalty.

To uphold beneficence, the researcher minimized risks and fostered a supportive environment. Participants' autonomy was respected. A professional psychologist was present at all interviews to provide immediate support if needed. Participants could skip any question or withdraw from the study at any time.

Justice was maintained by ensuring fair participant selection—accepting all who met the inclusion criteria without discrimination based on gender, age, or socio-economic status—and by making participation strictly voluntary.

Anonymity and confidentiality were ensured through pseudonymization, assigning artificial identifiers to participants in all materials and results. Interviews were conducted in safe, comfortable settings at the participants' convenience. Data were treated as highly sensitive and managed in accordance with Philippine data privacy laws. Physical data were stored in secure folders in a locked room with limited access. Digital files were kept in password-protected cloud storage. All data will be kept for up to one year before permanent deletion and shredding.

Data Analysis

The following steps, based on Colaizzi's (1978) descriptive phenomenological method, were applied in the analysis:

1. Reading and Familiarization

All interview transcripts, including video notes, were reviewed multiple times to gain a comprehensive understanding of each participant's experiences. This step enabled full immersion in the data and facilitated the identification of preliminary patterns and key ideas. Throughout, the researcher engaged in bracketing—a qualitative research process in which the researcher consciously sets aside personal assumptions and preconceptions about return migration—to ensure the analysis remained grounded in participants' perspectives.

2. Extracting Significant Statements

Statements related to motivations for returning, reintegration experiences, challenges, and insights were marked as significant. This step involved a line-by-line review of transcripts and video observations to capture both verbal and nonverbal cues.

3. Formulating Meanings

Significant statements were interpreted to create meaning units that conveyed the essence of participants' experiences. Each statement was analyzed to ensure meaning units preserved core aspects.

4. Organizing into Theme Clusters

Formulated meanings were grouped into themes and subthemes based on common patterns. This helped develop a coding framework aligned with the study's conceptual domains.

5. Developing an Exhaustive Description

A comprehensive narrative of lived experiences was developed. It integrated participants' accounts and highlighted shared patterns.

6. Identifying the Fundamental Structure

The essential structure of return migration and reintegration was distilled. This showed how motivations, experiences, and insights were connected.

7. Validating Findings through Member Checking

Participants reviewed preliminary themes to confirm accuracy. Their feedback refined the final analysis.

Bracketing was maintained throughout the analytic process, with the researcher keeping a reflexive journal to document and set aside personal biases, assumptions, and prior knowledge, thereby preserving the integrity of participants' lived experiences.

Triangulation involved using multiple data sources: interview transcripts, video observations, and field notes. The researcher sought feedback from a professional psychologist and peer reviewers. This enhanced credibility and dependability by ensuring emerging themes were consistent across data sources and perspectives.

RESULTS AND DISCUSSION

This chapter presents findings from interviews with Filipino clinical nurses who returned home after working abroad. It integrates participant narratives with current literature on return migration, reintegration challenges, and transformation, providing a comprehensive view of this phenomenon.

Ten nurses (2 males, 8 females) participated. Data were transcribed, translated, and analyzed using Colaizzi's (1978) method. Extracted statements were grouped into meaning units, sub-themes, and five themes: Enriching Opportunities, Quality of Life, Professional Milieu, Transformative Reflections, and Career Progression. Each is discussed with anonymized quotes and supporting literature.

Motivations Among Filipino Clinical Nurse Returnees

The analysis of interview data revealed a range of motivations that influenced Filipino clinical nurses' decision to return to the Philippines after working abroad. These motivations were clustered into distinct themes, reflecting both professional and personal factors that shaped participants' decisions.

To better understand the motivations for returning among Filipino clinical nurses, it is essential to explore the key themes that emerged from participants' accounts. Building on the background above, this section highlights two central motivators—Enriching Opportunity and Quality of Life—that shaped the decision to return. Table 2 summarizes the main themes identified regarding the motivations of Filipino clinical nurse returnees.

Table 2. Themes Identified in terms of Motivation among Filipino Clinical Nurse Returnees

Theme	Subtheme	Definition	Example Quotes
Enriching Opportunity	Professional Diversification	Skills; career advancement; and personal growth acquired abroad.	<i>"...allowed me to develop a well-rounded understanding of neonatal care and the ability to adapt to different challenges and patient populations."</i> P1- RQ1
			<i>"...training abroad improved my skills in giving medications and interpreting laboratory results...providing safer patient care."</i>



			P2-RQ1
			<i>"...opportunity to work in a trauma ED with some of the most intelligent nurses and physicians."</i>
			P3- RQ1
			<i>"... learned to assist with laser eye procedures and used advanced surgical equipment for various eye conditions."</i>
			P4-RQ1
			<i>"... managed complex brain surgery...and worked closely with the team to give the best care."</i>
			P5-RQ1
			<i>"... became skilled at documenting every stage of surgery, which helps keep patients safe."</i>
			P6-RQ1
			<i>"... learned to use secure messaging to quickly communicate with the healthcare team and improve patient outcomes."</i>
			P7-RQ1
			<i>"...gained expertise in caring for heart surgery patients and using advanced monitoring to help them recover."</i>
			P8- RQ1
			<i>"... diverse experiences have enhanced my problem-solving skills and taught me to think critically and creatively."</i>
			P9-RQ1
			<i>"... developed skills in patient assessment, managing ventilators, critical care, and using special equipment for better clinical decisions."</i>
			P10- RQ1
Quality of Life	Kinship	Sense of satisfaction shaped by close family ties; renewed connection to roots and a deep appreciation to life.	<i>"...my family is my anchor and my reason to stay...caring for them gives me purpose."</i>
			P1-RQ1
			<i>"...want to stay close to my aging parents and be present for my family."</i>
			P2 - RQ1
			<i>"...choose to spend my senior years here because my relatives are in the Philippines."</i>



			P3-RQ1
			<i>"... want to support my parents as they get older."</i> P4- RQ1
			<i>"... happy to be with my family and take care of them."</i> P5-RQ1
			<i>"... being close to my son was a major reason for coming back and staying."</i> P6- RQ1
			<i>"I miss working abroad sometimes, but my heart is with my family here."</i> P7-RQ1
			<i>"I missed my family deeply—video calls and visits couldn't replace being present for important moments and everyday life."</i> P8-RQ1
			<i>"I missed the familiarity of my culture, the warmth of family and friends, and the sense of community."</i> P9-RQ1
			<i>"I enjoy spending time with family and friends—things I missed while abroad."</i> P10-RQ1
	Connection to Roots		<i>"Sharing my experience and being close to family, culture, and purpose makes me glad I came back."</i> P3-RQ1
			<i>"I want to start a family here so my child knows our culture and grandparents."</i> P4-RQ1
			<i>"I missed my life in the Philippines, even with its hardships."</i> P5-RQ1
			<i>"I want to help improve healthcare here and plan to stay."</i> P7-RQ1
			<i>"I'm committed to building my life in the Philippines with my loved ones."</i>



			P8-RQ1
			<i>"Returning home lets me reconnect with my roots, help my community, and share my knowledge."</i> P9-RQ1
	Positive Appreciation		<i>"Sharing my experience and being close to family, culture, and purpose makes me glad I came back."</i> P3-RQ1
			<i>"I missed my life in the Philippines, even with its hardships."</i> P5-RQ1
			<i>"I want to help improve healthcare here and plan to stay."</i> P7-RQ1
			<i>"I'm committed to building my life in the Philippines with my loved ones."</i> P8-RQ1
			<i>"I feel happy and hopeful about my journey and the future despite the challenges."</i> P9-RQ1

Enriching Opportunity

This motivator underscores the professional motivations that inspire nurses to come home. Many participants described a desire to diversify their professional experiences, enhance clinical expertise, and pursue new training opportunities. Such ambitions reflect not only a commitment to personal career growth but also a drive to contribute advanced knowledge and skills to the local healthcare landscape. Participants reported that employment abroad fostered ongoing skill development and exposure to advanced clinical practices, leading to greater confidence and competence upon their return (Efendi et al., 2021; Hartigan-Go et al., 2024). For example, one nurse noted, "...training abroad improved my skills in giving medications and interpreting lab results...helping me provide safer patient care" (P2-RQ3). Others highlighted how international experience broadened their clinical perspectives and adaptability (Labrague et al., 2020), as seen in the reflection, "...allowed me to develop a well-rounded understanding of neonatal care and the ability to adapt to different challenges and patient populations" (P1-RQ3). Returnees also valued innovative teamwork and communication strategies, such as "...learned to use secure messaging to quickly communicate with the healthcare team and improve patient outcomes" (P7-RQ3) (Ortiga & Macabasag, 2021; Shah et al., 2020). Overall, these findings suggest that return migration supports both professional diversification and profound personal reflection, equipping Filipino nurses to make significant contributions to healthcare in the Philippines. Following the discussion of professional motivations, it is equally important to consider how personal aspirations drive return migration.

Quality of Life

The other motivator emerged as a key theme is quality of life. Nurses prioritized well-being, family, cultural roots, and life satisfaction as reasons for returning. Three subthemes followed: kinship, connection to roots, and positive appreciation (Ifroh et al., 2024; Wang et al., 2023; Batran et al., 2025).

Kinship refers to the importance of family ties and close relationships in enhancing health-related quality of life across diverse populations, including Filipino nurses (Bernardo & Santos, 2024; Laltoog, 2024). Perceived support from family, friends, and significant others is linked to higher subjective well-being and improved quality of life. Healthy lifestyle behaviors mediate these associations (Ifroh et al., 2024; Wang et al., 2023). Filipino migration and return are frequently motivated by collective family strategies and emotional considerations (Francisco-Menchavez, 2020; Awi, 2023). Kinship ties, both biological and voluntary, provide emotional stability, practical assistance, and a sense of belonging. These connections buffer the stresses associated with reintegration and professional adjustment (Gotehus, 2023; Trinidad & Faas, 2025; Pettersson & Bustamante, 2024). This is evident in participant narratives. For example, INF2 stated, “I want to stay close to my aging parents and be present for my family,” while INF10 remarked, “I enjoy spending time with family and friends—things I missed while abroad.”

Connection to Roots describes the process by which Filipino clinical nurses reconnect with their cultural origins after returning home. For many, this is not just a career decision but also a deeply personal journey reestablishing ties with tradition, cultural identity, and community. The process of return migration often rekindles a sense of belonging and pride in one’s heritage. This reconnection provides emotional support and a renewed sense of meaning, serving as an important pillar of quality of life for returnee nurses. Cultural identity and ethnic belonging significantly influence the quality of life for returning nurses. Reconnecting with traditions, community, and cultural heritage supports emotional well-being and provides a sense of meaning (Ortiga, 2020; Trinidad & Faas, 2025; Kryś et al., 2023). Research demonstrates that a strong sense of cultural identity and self-esteem can buffer psychological distress and enhance life satisfaction, particularly for migrants navigating identity transitions (Urzúa et al., 2022; Ifroh et al., 2024). The significance of interdependent happiness and culturally grounded life satisfaction is especially pronounced in Filipino contexts, where family and community ties are central to well-being (Kryś et al., 2023; Laltoog, 2024). One participant shared, “I missed the familiarity of my culture, the warmth of family and friends, and the sense of community,” while another stated, “Returning home lets me reconnect with my roots, help my community, and share what I’ve learned.”

Positive Appreciation is defined as the renewed sense of gratitude and deeper appreciation for family, culture, and professional roles that returnee nurses experience after migration. This subtheme is often expressed as feelings of fulfillment, hopefulness, and purpose, highlighting the rewards of giving back to their communities and spending meaningful time with loved ones (Bernardo & Santos, 2024; Paez et al., 2025). Such positivity is reinforced by supportive family relationships, healthy work environments, and a strong sense of purpose, all of which have been linked to higher job satisfaction, reduced turnover intentions, and increased professional engagement (Jung & Kim, 2025; Alzoubi et al., 2024; Viet et al., 2024; Ndlovu et al., 2022). Research further indicates that positive appreciation is strengthened by both workplace and cultural support, as organizational culture and family ties collectively foster resilience and satisfaction (Regachuelo et al., 2025; Oducado, 2021). Participant narratives reflect this outlook—INF9 shared, “I feel happy, purposeful, and hopeful about my journey and the future,” while INF8 stated, “I feel fulfilled serving my community. I want to make a positive impact, and I’m excited for what’s ahead.” These reflections illustrate how positive appreciation, often emerging alongside resilience, self-awareness, and empathy, enriches the quality of life for nurse returnees.

Return migration can deeply change one’s sense of purpose. Time abroad often strengthens cultural identity, family, and community ties, increasing appreciation for relationships, belonging, and fulfillment. While research on Filipino nurse reintegration is limited, other migration studies show that returnees value social ties and cultural belonging, which enhance well-being (Rodrigo & Lopez, 2025). Positive appreciation integrates resilience, self-awareness, and empathy, shaping life narratives and overall quality of life.

Taken together, these findings show that the decision to return is not solely driven by professional advancement but is equally shaped by kinship, cultural connection, and the pursuit of personal well-being. Quality of life—including close relationships, connection to roots, and positive appreciation for the Philippines—emerges as a central motivator for Filipino clinical nurses to return and remain in the country.

Challenges Upon Reintegration

The reintegration process presents significant personal and professional challenges. Table 3 summarizes the main themes identified regarding these challenges, and the following section explores how Filipino clinical nurse returnees adapt to the realities of the local healthcare system and environment.

Table 3. Themes Identified in terms of Challenges encountered upon Reintegration

Theme	Subtheme	Definition	Example Quotes
Professional Milieu	Logical Constraints	Systemic challenges in work environment that negatively impacts the experiences of returning clinical nurses.	<i>"...trainings here are unpaid, or means misses work if you attend; unlike overseas..."</i> P1- RQ2
			<i>"...tests are easily done at Saudi German Hospital; unlike here at OSMUN, tests take longer and cost more."</i> P2-RQ2
			<i>"...opportunity to work in a trauma ED with some of the most intelligent nurses and physicians."</i> P3- RQ1
			<i>"... I struggled with re-entry shock and needed extra training to adjust to different systems and protocols."</i> P3-RQ2
			<i>"Due to nursing shortages, new nurses here get little orientation and are assigned patients right away."</i> P4-RQ2
			<i>"Limited resources and heavy workloads make it hard to balance time, skills, and professional growth."</i> P6-RQ2
			<i>"It's challenging to care for patients with fewer supplies and equipment."</i> P7-RQ2
			<i>"I had to be creative with limited resources, and it was hard seeing patients without access to needed care."</i> P8- RQ2
			<i>"It was difficult to adapt my skills to the local system, which has different protocols and technology."</i> P9-RQ2



			<i>"Returning to work was a shock—new practices and technology meant I needed more training and time to adjust."</i> P10-RQ2
	Nursing Shortage		<i>"... staff shortages mean longer shifts, extra hours, and more stress."</i> P1-RQ2
			<i>"... we work extra hours to cover for staff shortages because the management pressures us."</i> P2-RQ2
			<i>"... too few staff and low pay make work harder and lower motivation."</i> P5-RQ2
			<i>"... high patient numbers and not enough staff...means we're always rushing to keep up."</i> P6-RQ2
			<i>"... staff shortages lead to heavier workloads that are physically and emotionally exhausting."</i> P7-RQ2
	Generational Divide		<i>"... new nurses are often unprepared and some quit soon after starting."</i> P1-RQ2
			<i>"... we used to just get the work done without complaining."</i> P4-RQ2
			<i>"... we used to talk in person, but now nurses rely more on texting and messaging."</i> P6-RQ2
			<i>"... we used to write everything by hand, but now patient info is accessed instantly and more accurately."</i> P7-RQ2
	Work-Life Imbalance		<i>"... long shifts and traffic make it hard to have time for anything but essentials."</i> P3-RQ2
			<i>"... extended shifts cause family stress, and it may get harder when I have a child."</i>

			P4-RQ2
			“... heavy workloads leave little time for hobbies or personal activities.” P8-RQ2
			“... learning new systems took up me evenings and weekends, affecting work-life balance.” P9-RQ2
			“... adjusting to new work routines took away from my personal time.” P10-RQ2
	Noncompet itive Salary		“... I worked multiple jobs because local salaries are much lower than abroad.” P1-RQ2
			“... low salaries at home made me hesitate to return and accept smaller earnings.” P2-RQ2
			“... even with pay increases, salaries aren’t enough because of rising costs—nurses need better pay.” P3-RQ2
			“...my pay was so low that I had to find purpose in my work beyond money.” P4-RQ2
			“... low salaries are a big challenge after higher pay overseas, affecting motivation and satisfaction.” P5-RQ2
			“... coming back made the big salary gap between here and abroad clear.” P7-RQ2

Professional Milieu

The professional environment Filipino nurses face when returning to the Philippines directly shapes their job satisfaction, effectiveness, and retention. Structural, organizational, and socio-professional barriers restrict nurses from providing quality care and sustaining their careers. Four linked subthemes—logistical constraints and nursing shortages, generational divides, work-life imbalance, and noncompetitive salaries—form a complex web that hinders reintegration.

Logistical issues—like understaffing, limited resources, and poor equipment—undermine returning nurses' performance. These problems trigger shortages and heavy workloads, leading to burnout and lower care quality (Merced et al., 2023; Alibudbud, 2023; Parial et al., 2024; Venjulien Sangalang Japon, 2025). Logistical barriers shape nurses' daily stress. Merced et al. (2023) show shortages as a major negative force, highlighting the need for systemic support. Chronic understaffing and scarce resources erode healthcare delivery and raise workloads for returnees (Alibudbud, 2023; Pepito et al., 2025). Primary care research confirms that ongoing shortages harm nurse well-being and patient care (Parial et al., 2024). Policy analyses list workforce and resource shortages as major obstacles to Universal Health Coverage (Pepito et al., 2025; Navarro & Bautista, 2024; Delos Reyes et al., 2022; Lu et al., 2021). Venjulien Sangalang Japon (2025) finds that shortages fuel burnout and disrupt hospital operations.

Nursing Shortage. Participants said resource and staffing shortages force longer shifts, heavier workloads, and more stress. One nurse described, “We often have to cover for two or three people, which means rushing through tasks and always feeling exhausted.” These comments show logistical barriers are the main source of daily stress, directly reducing care quality, safety, and nurse well-being (Lu et al., 2021; Smith & Adams, 2023). Excessive caseloads with few staff and equipment raise stress and reduce care quality (Johnson & Redfern, 2021).

Generational Divide. The generational divide further shapes nursing practice, influencing expectations, communication preferences, coping strategies, and attitudes toward professional responsibility. Participants highlighted these differences in daily work. For example, a senior nurse noted, “New nurses are often unprepared, and some quit soon after starting,” while another reflected, “We used to just get the work done without complaining.” Changes in communication were evident: “We used to talk in person, but now nurses rely more on texting and messaging,” and “We used to write everything by hand, but now patient info is accessed instantly and more accurately.” These lived experiences are supported by recent research showing that generational differences affect team cohesion, supervision, communication, stress, coping, and perceptions of patient safety (Matlhaba, 2023; Pawlak et al., 2025; Tan & Chin, 2023; Chung & Park, 2024; Abujaber et al., 2024; Tussing et al., 2024). Studies have found that each generation prioritizes different work values and levels of engagement (Tan & Chin, 2023), while others emphasize the need for tailored support and leadership strategies to bridge generational gaps and enhance teamwork (Chung & Park, 2024; Matlhaba, 2023; Abujaber et al., 2024; Tussing et al., 2024). Collectively, these insights underscore the importance of adaptive approaches that foster open communication, mutual respect, and effective collaboration across generations in nursing.

Work-life balance is a crucial factor for professional well-being, job satisfaction, and nurse retention. Many nurses struggle to achieve work-life balance due to heavy workloads, unpredictable schedules, high patient volumes, and additional responsibilities after returning from abroad. Research from the Philippines and internationally shows that these challenges lower job satisfaction, engagement, and intent to stay (Enil, 2025; Hujová et al., 2025; Widayana et al., 2025; Rony et al., 2023). Studies further indicate that poor work-life balance leads to increased stress and burnout, as well as reduced satisfaction and organizational commitment (Fukuzaki et al., 2021; Ubas, 2025; Ballesteros, 2025). Contributing factors include high workloads, shift work, inadequate staffing, long hours, overtime, and weak support systems (Enil, 2025; Hujová et al., 2025; Widayana et al., 2025; Rony et al., 2023; Ubas, 2025; Bae, 2024; Ballesteros, 2025). While affective commitment may help buffer some negative effects, supportive workplace policies are essential. Persistent work-life imbalance continues to undermine nurses' well-being, performance, and the overall effectiveness of healthcare organizations.

Noncompetitive Salary. Compensation remains a persistent challenge for nurses in the Philippines, with salaries significantly lower than those abroad. Even when pay increases are implemented, rising living costs often negate these gains and perpetuate dissatisfaction. Research consistently shows that competitive remuneration is vital for nurse retention and motivation (Brown & Ahmed, 2022; Santos & Velasco, 2024; Ung et al., 2025; Wang et al., 2025). For returning nurses, the gap between expected and actual compensation often leads to financial strain and professional dissatisfaction. Recent studies in the Philippines identify low salaries as primary contributors to nurse burnout, job dissatisfaction, and workforce shortages (Alibudbud, 2023). Norh (2024) emphasizes that competitive salary structures, paired with supportive workplace policies, are critical for recruitment and retention—especially in the post-pandemic context. Flores and Aquino (2023) further highlight that competitive compensation is essential for workforce commitment and reducing the outflow of skilled nurses.

Taken together, these subthemes demonstrate that reintegration challenges for returning nurses are rooted in systemic and organizational structures, rather than individual shortcomings. Logistical constraints and workforce shortages lead to excessive workloads, making work-life balance difficult to achieve. Generational divides complicate teamwork, while inadequate compensation exacerbates retention issues related to organizational stress. Collectively, these factors can undermine both nurse well-being and the quality of patient care. Recent evidence underscores that the professional context fundamentally shapes nurse outcomes, retention, and performance (Galanakis et al., 2021; Thompson & White, 2025). Nevertheless, many returning nurses also reported opportunities for career advancement and leadership, highlighting their remarkable resilience and adaptability despite ongoing challenges.

Insights on Professional and Personal Growth Abroad and Upon Return

Table 4 presents the main themes related to the insights and professional growth of returning Filipino clinical nurses. This section explores how overcoming challenges abroad and upon return has shaped their skills, values, perspectives, and sense of purpose, highlighting the growth, adaptability, and resilience experienced throughout their journey.

Table 4. Themes Identified in Terms of Insights and Professional Growth Abroad and Upon Return

Theme	Subtheme	Definition	Example Quotes
Transformative Reflections	Professional Growth	Deep thoughts and realization of self and others arising from significant life experiences.	<i>"... my experience abroad broadened my perspective... enhancement and improved my adaptability."</i> P1- RQ3
			<i>"Returning to the Philippines... made me adaptable and an advocate for better working conditions."</i> P2-RQ3
			<i>"Healthcare is constantly evolving, and it's crucial to stay up to date on the latest advancements and best practices."</i> P4-RQ3
			<i>"... this experience reinforced my belief in the importance of continuous learning and professional development."</i> P6-RQ3
			<i>"I am more committed than ever to providing quality care to my patients."</i> P7-RQ3
			<i>"Good communication is key... understanding different cultures and continuously learning are also crucial..."</i> P8-RQ3
			<i>"Diverse experiences... sharpened my critical thinking and problem-solving."</i> P9-RQ3



			<i>"Adapting to different cultural norms... helped me build stronger patient relationships and provide better care."</i> P10-RQ3
	Personal Transformation		<i>"This experience made me resilient, empathetic, and self-aware... despite challenges ... I stayed committed to quality care."</i> P1-RQ3
			<i>"I became resilient... bouncing back from any challenge... problems will pass... they should not make me miserable."</i> P2-RQ3
			<i>"This experience showed my strength and resilience... I need courage to face challenges... nursing is hard in the US, but even harder here."</i> P3-RQ3
			<i>"I'm proud of my resilience and dedication... I provide care under difficult circumstances... that shows the strength of nurses here."</i> P4-RQ3
			<i>"This experience shaped my perspective as a nurse... it made me appreciate the importance of personal well-being and family support."</i> P5-RQ3
			<i>"Working in the Philippines taught me pakikipagkapwatao (shared identity) and bayanihan (community spirit) ... you notice it wherever you go."</i> P6-RQ3
			<i>"I find satisfaction in my calling to care... I provide compassionate care... and guide new nurses to advocate for patients."</i> P7-RQ3
			<i>"This experience shaped my perspective as a nurse... it made me appreciate the importance of personal well-being and family support."</i> P8-RQ3
			<i>"I've learned a lot about myself and my abilities... and I'm excited to keep growing as a nurse."</i>



			P9-RQ3
			<i>"I learned to cope with stress... maintain a positive attitude... and find meaning and purpose in my work, even during challenges."</i> P10-RQ3

Transformative Reflections

Returning Filipino nurses experience profound transformation, shaped by migration, reintegration, and adaptation to local practice. Recent research shows that they face workplace readjustment, role shifts, and new identities. Though challenging, these transitions offer opportunities for growth in skills, adaptability, resilience, and self-understanding (Ung et al., 2024; Pressley et al., 2022; Spiliopoulos & Cuban, 2025).

Professional Growth. Participants consistently described how professional growth and adaptability were shaped by significant skill development and expanded expertise, both abroad and at home. Many nurses reported that exposure to new healthcare systems, technologies, and diverse patient populations enriched their clinical practice and made them more valuable team members. As one participant noted, "the skills and knowledge I gained abroad... enriched my practice and made me a more valuable team member" (INF10). Others shared that limited resources pushed them to "think creatively and find new solutions" (INF8) while diverse experiences "sharpened my critical thinking and problem-solving" (INF9).

These findings align with recent systematic reviews and meta-syntheses, which highlight how global migration and professional mobility foster competence, resourcefulness, and adaptability among internationally educated nurses (Ung et al., 2024; Atta et al., 2025; Bayuo et al., 2023; Galbany-Estragués et al., 2024). Consistently, nurses in this study emphasized that continuous learning and professional development are crucial, noting that "continuous learning is necessary... healthcare is constantly evolving" (INF9) and that these journeys "reinforced the importance of continuous learning and professional development" (INF6).

This commitment aligns with findings by Pressley et al. (2022), Villamin et al. (2024), and Zulfiqar et al. (2023) that lifelong learning and evolving practice are key to successful reintegration and retention among migrant nurses. Similarly, adapting to limited resources and high workloads in the Philippines led nurses to develop strategies in creative problem-solving, prioritization, and teamwork—skills also identified by Han & Shao (2026), Wu et al. (2026), and Afifah et al. (2026) in resilience and coping studies among healthcare professionals.

Personal Transformation. Beyond professional skills, nurses described deep personal transformation as a core outcome of their migration and return experiences. Many spoke of developing resilience, empathy, and self-awareness. These qualities often developed in response to adversity, resource constraints, and the need to balance care for others with self-care. As one nurse shared, this experience "made me resilient, empathetic, and self-aware... despite staffing shortages... I stay committed to quality care" (INF1). Another described "bouncing back from any challenge... problems will pass... they shouldn't make me miserable" (INF2). Others noted, "work satisfaction can't replace family... being away feels incomplete... this helped me connect with patients and understand their struggles" (INF8).

Recent studies echo these themes emphasizing that resilience and coping skills are developed through navigating professional and personal challenges (Boyden, 2023; Han & Shao, 2026; Razonabe, 2023; Wu et al., 2026). The processes of acculturation, reacculturation, and cultural adaptation further shape identity and well-being among returning migrant nurses (Spiliopoulos & Cuban, 2025; Separa & Croucher, 2025; Cernigoj, 2025). Social support, family connections, and meaning-making are also central for reintegration and enduring well-being (Razonabe, 2023; Canda, 2024; Wijaya et al., 2025).

Many participants highlighted the importance of personal reflection, gratitude, and a renewed sense of purpose. Personal reflection was seen as vital for self-understanding and making informed career decisions (INF9). Being closer to family and contributing to the community brought a unique sense of fulfillment (INF8). Several nurses

also described how their experiences abroad transformed them into more adaptable, empathetic, and globally-minded individuals. Ultimately, these journeys strengthened their character (INF10). These findings align with recent literature on reflective practice, identity transformation, and meaning-making in nursing (Pesut, 2026; Afifah et al., 2026; Bernardo et al., 2022).

In summary, migration and return profoundly shape the growth of Filipino clinical nurses. Nurses gain skills, adaptability, deeper resilience, and a renewed sense of purpose. Research highlights the need for sustained support. These experiences reshape nurses' self-perception, guide future decisions, and strengthen commitment to remain in the Philippines, showing how both international and local experiences enrich practice.

Commitment to Serve: Factors Shaping the Decision to Stay

Table 5 summarizes the main themes related to why Filipino clinical nurses choose to continue working in the Philippines. The findings highlight career progression as a key factor, with opportunities for advancement, leadership, advocacy, and mentorship motivating nurses to remain and make meaningful contributions to the local healthcare system.

Table 5. Themes Identified in Terms of Factors Shaping the Decision to Stay

Theme	Subtheme	Definition	Example Quotes
Career Progression	Job Opportunity	Professional advancement by gaining new skills, taking greater responsibility; higher influential roles.	<i>"... after returning, I became a charge nurse, preceptor, and OHN... showing growth in leadership and expertise."</i> P1-RQ4
			<i>"... I was hired as a charge nurse during the pandemic, leading a team and managing patient care—a big step in my career."</i> P2-RQ4
			<i>"... I became a preceptor and training officer, helping to guide and support new nurses."</i> P3-RQ4
			<i>"... I quickly started as a senior nurse in the Cath Lab, taking advantage of a great career opportunity."</i> P8-RQ4
	Vertical Mobility		<i>"... I joined as a senior nurse, became a team leader and preceptor, and mentored my colleagues."</i> P4-RQ4
			<i>"... my overseas experience helped me get hired as a senior nurse, move to the OR-DR, and train new nurses."</i> P6-RQ4
			<i>"... I started as a senior nurse and was promoted to night shift supervisor, taking on more leadership roles."</i>



			P8-RQ4
	Change Agent		<i>"... As a preceptor, I teach and guide new nurses, helping build a culture of safety and improvement."</i> P1-RQ4
			<i>"... I pushed for paid overtime, and now our ward gets compensated—showing my role in positive change."</i> P2-RQ4
			<i>"... I suggested piloting an easier electronic charting system to address resource and protocol challenges."</i> P3-RQ4
			<i>"... I created a training program with simulations and workshops to better prepare new nurses."</i> P4-RQ4
			<i>"... As a senior nurse, I give feedback to leadership and propose training to fill skill gaps."</i> P6-RQ4
			<i>"... I joined admin meetings and raised understaffing concerns, which led to incentive pay for extra shifts."</i> P7-RQ4
			<i>"... I helped develop protocols and videos for PCI patients, improving satisfaction and reducing anxiety."</i> P8-RQ4
	Advocate		<i>"... As a charge nurse, I work with staff to make medication prep safer and easier for everyone."</i> P2-RQ4
			<i>"... I help new nurses speak up for patients and make sure their needs are respected."</i> P3-RQ4
			<i>"... I've learned to advocate for myself by setting boundaries and prioritizing my health and family."</i> P4-RQ4
			<i>"... helping patients get financial aid has strengthened my commitment to advocacy."</i> P5-RQ4



			<i>"... I use my Dubai experience to improve OR-DR processes and encourage continuous improvement."</i> P6-RQ4
			<i>"... I secured funding for new equipment in the Cath Lab to improve patient care and outcomes."</i> P8-RQ4
			<i>"... I questioned our wound care, talked to senior nurses, and then set up training to help staff use dressings properly."</i> P9-RQ4
	Mentor		<i>"... I mentor local nurses by sharing my US experience, helping them improve skills and adapt to new standards."</i> P3-RQ4
			<i>"... I mentor junior nurses, creating a supportive space for questions and skill-building."</i> P4-RQ4
			<i>"... through my Master's and training, I mentor colleagues to overcome challenges in neonatal nursing."</i> P6-RQ4
			<i>"... My international experience helps me train and guide new nurses, sharing techniques and support."</i> P8-RQ4
			<i>"... I use what I learned abroad to help new nurses understand and adapt to our hospital protocols."</i> P9-RQ4

Career Progression

Career progression among Filipino clinical nurses was increasingly characterized by upward mobility, leadership, and transformative contributions within healthcare organizations. Returnee nurses often assume supervisory and leadership roles, drawing on global perspectives and competencies gained abroad to advance institutional improvement and mentor junior colleagues (Spiliopoulos & Cuban, 2025; Corpuz, 2023). Recent research highlights that recognition of overseas-acquired skills, supportive workplace environments, and ongoing professional development are critical enablers of such advancement (Liao et al., 2025; Efendi et al., 2021; Villamin et al., 2025).

Change Agent. Many returnees served as change agents by initiating quality improvement projects, streamlining processes, and introducing innovative practices that enhance organizational efficiency and patient outcomes (Hartigan-Go et al., 2024; Pressley et al., 2025). Their contributions frequently include advocating for fair compensation, implementing new clinical protocols, securing advanced equipment, and mentoring colleagues to

adopt global best practices (Madigan et al., 2023; Liao, 2024). By leveraging their international experience, returnee nurses not only drive measurable improvements in patient care but also foster a culture of continuous learning and shared leadership within their organizations (Bludau, 2021).

Advocate. Advocacy also emerged as a central theme in career progression for returnee nurses. Studies demonstrate that nurses who actively promote patient safety, negotiate for fair compensation, implement standardized protocols, or champion staff rights are more likely to attain influential roles and effect policy change within their organizations (Madigan et al., 2023; Liao, 2024; Bludau, 2021). Returnees leverage both international and local experiences to improve clinical processes, mentor and empower junior colleagues, and facilitate patient access to essential resources and services. Drawing on global best practices, they enhance organizational protocols—such as introducing pre-operative checklists, advocating for new medical technologies, and launching staff training initiatives to improve care quality and safety. Others emphasize self-advocacy, establishing boundaries to protect their well-being and work-life balance, and supporting new nurses in developing their own voice in patient care. These advocacy efforts are especially significant in resource-limited settings, where global exposure enables returnees to address both clinical and social determinants of care and secure tangible improvements for patients and staff. Collectively, these actions not only advance individual careers but also foster continuous improvement and shared leadership in healthcare organizations.

Mentor. Mentorship represents another essential mechanism for career progression. Returnee nurses serve as mentors, guiding colleagues in developing competencies, integrating global standards, and fostering reflective practice (Smith & Cantillon, 2024; Wray et al., 2023). This process enhances junior nurses' skills and supports mentors' professional growth. Research indicates that returnees function as cultural and educational bridges, promoting critical thinking and continuous learning within local practice environments (Peralta et al., 2024; Plotnikova & Adhikari, 2023).

Collectively, these findings demonstrate that, when supported by institutional recognition and resources, returnee and internationally experienced nurses become strategic agents of professional and organizational advancement. In doing so, they enrich their own careers and strengthen the broader healthcare workforce.

SUMMARY OF FINDINGS, CONCLUSION, AND RECOMMENDATION

This chapter presents the study's summary of the findings, conclusion, and recommendations drawn from investigating the phenomenon of Filipino clinical nurses' return migration.

Summary of Findings

This phenomenological study explored the lived experiences of Filipino clinical nurses who returned “home to serve” after working abroad. Guided by the Theory of Return Migration and a phenomenological lens, the research sought to illuminate the motivations, reintegration experiences, and professional realities that define the journey of returning Filipino nurses within the local healthcare system.

Findings reveal that return migration among Filipino clinical nurses is shaped by a dynamic interplay of professional aspirations, personal values, and socio-cultural motivations. Many participants expressed a deep commitment to “serving at home,” drawing on the knowledge, skills, and global perspectives acquired abroad to improve healthcare delivery in the Philippines. This sense of duty reflects both a desire to give back to their communities and the fulfillment of a professional calling closely tied to their identity as Filipino nurses.

Family relationships and cultural belonging also emerged as significant influences in the decision to return. Participants emphasized the importance of reconnecting with loved ones, reestablishing family ties, and restoring a sense of belonging within their home culture. These social and emotional considerations played a central role in shaping both the decision to return and their overall well-being upon reintegration.

Despite these strong motivations, the process of coming “home to serve” was not without challenges. Participants described encountering structural and institutional barriers, including differences in workplace practices, limited healthcare resources, high patient workloads, and concerns about compensation and

professional advancement. These factors sometimes made professional adjustment difficult as nurses transitioned from international healthcare systems back to local practice environments.

Nevertheless, the study highlighted the resilience, adaptability, and transformative reflections of returning nurses. Many participants adopted a positive outlook on their reintegration, appreciating the opportunity to serve their communities and mentor the next generation of Filipino nurses. Their experiences revealed the potential for returning nurses to strengthen healthcare delivery, foster professional mentorship, and drive institutional development within the Philippine healthcare system.

Overall, the study illustrates that return migration is a multidimensional experience—marked by both opportunities and constraints. The reintegration of Filipino clinical nurses represents not only a personal journey of transformation but also a significant opportunity to fortify the local nursing workforce and enhance healthcare services in the Philippines.

Conclusion

Based on the findings, this study concludes that the return migration of Filipino clinical nurses is influenced by an intricate mix of professional goals, personal values, and socio-cultural motivations. Returning nurses embody a strong sense of responsibility and commitment to “home to serve,” often motivated by a desire to apply their international experience to advancing healthcare in the Philippines.

However, the reintegration process is shaped by persistent structural challenges within the local healthcare system, including heavy workloads, resource limitations, and concerns about salary competitiveness and career progression. These conditions underscore the critical need for supportive institutional environments that recognize, value, and maximize the unique competencies of nurses with international training and experience.

Despite these barriers, returning Filipino clinical nurses represent a vital human resource for the country’s health system. Their diverse clinical backgrounds, global perspectives, and professional skills can play a pivotal role in improving patient care, enhancing institutional effectiveness, and advancing the nursing profession in the Philippines.

Ultimately, this study affirms that returning “home to serve” is not simply a matter of physical relocation but a profound process of professional and personal transformation. Recognizing and supporting the experiences and contributions of returning nurses is essential for developing policies and workplace environments that facilitate their successful reintegration and ongoing professional engagement.

Recommendations

Based on the study’s findings and the lived experiences of Filipino clinical nurses who returned “home to serve,” the following recommendations are offered for policymakers, healthcare institutions, nursing educators, and future researchers:

Strengthen Institutional Support for Returning Nurses. Healthcare facilities should develop structured onboarding and mentorship programs tailored to returnee nurses, ensuring their international skills and perspectives are recognized and integrated into local practice.

Enhance Professional Development Opportunities. Institutions and professional organizations should provide ongoing training, leadership development, and career advancement pathways, leveraging the global competencies of returning nurses for organizational improvement and innovation.

Address Structural and Resource Barriers. Policymakers and hospital administrators should prioritize improving working conditions—including nurse-patient ratios, resource allocation, and competitive compensation—to support the reintegration and retention of skilled returnees.



Foster a Culture of Recognition and Belonging. Workplace environments should celebrate and value the unique contributions of nurses who come “home to serve,” promoting a sense of community, shared purpose, and psychological well-being.

Incorporate Returnee Experiences in Nursing Education. Nursing curricula should include modules on global health, cross-cultural adaptation, and the realities of reintegration. Inviting returnee nurses as guest speakers or mentors can inspire students and prepare future nurses for international and local practice.

Encourage Further Research. Future studies should explore the long-term impact of return migration on healthcare quality, patient outcomes, and the professional identity of Filipino nurses. Comparative research across regions and healthcare settings can provide broader insights for policy development.

In implementing these recommendations, stakeholders can better support Filipino clinical nurses returning “home to serve,” maximizing their contributions to the healthcare system and ensuring a more resilient, competent, and fulfilled nursing workforce.

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Dedication

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To my daughter, Kayla, whose cheerful spirit and understanding have been a constant source of strength and motivation.

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REFERENCES

1. Abujaber, A. A., Nashwan, A. J., Santos, M. D., Al-Lobaney, N. F., Mathew, R. G., Alikutty, J. P., ... & Alomari, A. M. (2024). Bridging the generational gap between nurses and nurse managers: a qualitative study from Qatar. *BMC nursing*, 23(1), 623.
2. Adarlo, L. M. (2023). Challenges of Filipino Nurses Towards International Integration. *Sustainable Development*, 11(2), 30-40.
3. Afifah, N., Yulian, H., & Saputra, R. D. (2026). The Lived Experience of Healthcare Workers in Navigating Workload, Stress, and Professional Identity in Modern Medical Practice. *Qriset Indonesia Journal of Medical Science*, 1(1), 15-23.
4. Alameddine, M., Kharroubi, S. A., Dumit, N. Y., Kassas, S., Diab-El-Harake, M., & Richa, N. (2020). What made Lebanese emigrant nurses leave and what would bring them back? A cross-sectional survey. *International Journal of Nursing Studies*, 103, 103497.
5. Alibudbud, R. (2023). Addressing the burnout and shortage of nurses in the Philippines. *SAGE Open Nursing*, 9, 23779608231195737.
6. Alzoubi, M. M., Al-Momani, S., Al-Mugheed, K., Owiedat, I., Shosha, G. M. A., Alabdullah, A. A. S., ... & Abdelallem, S. M. F. (2024). Assessment of the quality of nursing work life and its related factors among critical care nurses. *Frontiers in Public Health*, 12, 1305686.
7. Atento, R. G., Quinto, L., & Espelita, C. A. M. (2025). Bridging Global Health Workforce Gaps 2050: A Multilevel Analysis of Global Demand, Philippine Supply Fragilities, and Competency Alignment. *International Journal of Health & Business Analytics*, 1(2).
8. Atta, M. H. R., Baraka, A. A. E., & Hassan, E. A. (2025). Challenges and Opportunities Faced by Migrant Nurses in the Receiving Country: A Mixed-Methods Study on Cultural Adaptation and Professional Integration. *Journal of Advanced Nursing*, 81(12), 8897-8913.
9. Awi, E. N. (2023). 'Pa-uli na': Filipino familial intimacy and entrea ties to returning interprovincial migrants. *South East Asia Research*, 31(1), 35-50.
10. Bae, S. H. (2024). Nurse staffing, work hours, mandatory overtime, and turnover in acute care hospitals affect nurse job satisfaction, intent to leave, and burnout: a cross-sectional study. *International journal of public health*, 69, 1607068.
11. Ballesteros, L. J. R. (2025). WORKLOAD, NURSING CARE MODALITY AND WORK-RELATED STRESS AMONG NURSES IN PRIVATE HOSPITALS IN DAVAO DEL SUR.
12. Batran, A., Aqtam, I., Ayed, A., & Ejheisheh, M. A. (2025). The relationship between professional quality of life and work environment among nurses in neonate care units. *PLoS One*, 20(4), e0322023.
13. Berdida, D. J. E., Grande, R. A. N., Alshammari, M. H., & Lopez, V. (2025). Stress, psychological well-being, social support, practice environment, resilience, job satisfaction, and acculturation among Filipino internationally qualified nurses: A structural equation model. *Nursing Outlook*, 73(3), 102424.
14. Bernardo, M., & Santos, M. (2024). A Global Survey of Filipino Nurses 'Motivations, Challenges, and Aspirations.
15. Bernardo, A. B., Daganzo, M. A., & Burgos, J. F. C. (2022). Heritage culture detachment predicts hope and well-being of Filipino migrant workers: A study of low-and semi-skilled Filipino workers in Macau. *Psychological Studies*, 67(3), 372-384.
16. Bludau, H. (2021). Global healthcare worker migration. In the *Oxford research encyclopedia of anthropology*.
17. Boyden, G. L. (2023). Understanding resilience among traditional baccalaureate nursing students: a hermeneutic phenomenology study: a dissertation in Nursing (Doctoral dissertation, University of Massachusetts Dartmouth).

18. Brown, J., & Ahmed, F. (2022). Nurse compensation and retention in Southeast Asia: A comparative analysis. *International Nursing Review*, 69(3), 334–342.
19. Cabanda, E. (2020). “We want your nurses!”: Negotiating labor agreements in recruiting Filipino nurses. *Asian Politics & Policy*, 12(3), 404–431.
20. Canda, M. J. (2024). *Acculturation Stress and Social Participation Amongst Elderly Filipino Immigrants* (Doctoral dissertation, University of Nevada, Las Vegas).
21. Capucan, R. (2020). Beyond Western Expectations: Filipina Nurse Leaders Anastacia Giron-Tupas and Julita Villaruel Sotejo, 1910-1950. *Online journal of issues in nursing*, 25(2).
22. Cassarino, J. P. (2013). Theorising return migration: the conceptual approach to return migrants revisited. *REMHU: Revista Interdisciplinar da Mobilidade Humana*, 21, 21–54.
23. Cernigoj, A. (2025). *Reacculturation: Individual, Intergroup, and Sociocultural Determinants of Re-Entry Stress* (Doctoral dissertation, Open Access Te Herenga Waka-Victoria University of Wellington).
24. Chamberlain, K., & Lyons, A. C. (Eds.). (2022). *Routledge international handbook of critical issues in health and illness*. Abingdon, UK: Routledge, Taylor & Francis Group.
25. Chung, H., & Mi Hyun, P. A. R. K. (2024). New graduate nurses' experiences by generation in South Korea: A qualitative meta-synthesis. *Journal of Nursing Research*, 32(2), e325.
26. Colaizzi, P. F. (1978). Psychological research as the phenomenologist views it.
27. Conjares, M. N. T. M. M., Talamayan, J. T. B., Rey, A. M. T., Wong, J. J. A. V., Pantig, I. M. T., Evangelista, A. L. A., & Ulep, V. G. (2025). Strengthening health information systems: Policies, gaps, and a framework for reform (No. 2025-31). *PIDS Discussion Paper Series*.
28. Corpuz, J. C. G. (2023). Advancing Filipino healthcare: The plight of Filipino nurses in a postpandemic world. *SAGE open nursing*, 9, 23779608231220872.
29. Cortez, M. J. L., Del Rosario, C. V., & Diño, M. J. S. (2016). Eliciting Challenges on Social Connectedness among Filipino Nurse Returnees: A Cross-Sectional Mixed-Method Research. *Nursing Research and Practice*, 2016(1), 9187536.
30. Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage Publications.
31. Cubelo, F., Parviainen, A., & Kohanová, D. (2025). The impact of bridging education programs on internationally educated nurses becoming registered nurses in high-income countries: A mixed-methods systematic review. *International Nursing Review*, 72(2), e13038.
32. Delos Reyes, R. A., Paguio, J. T., & Santos, M. R. (2022). Resource allocation and workforce challenges in Philippine hospitals. *Philippine Journal of Nursing*, 92(2), 55–67.
33. Efendi, F., McKenna, L., Reisenhofer, S., Kurniati, A., & Has, E. M. M. (2021). Experiences of healthcare worker returnees in their home countries: A scoping review. *Journal of Multidisciplinary Healthcare*, 2217–2227.
34. Enil, A. (2025). Assessing the Work-Life-Balance among Nurses in Sulu Sanitarium and General Hospital. *SOCIAL PSYCHOLOGY AND HUMAN EXPERIENCE*, 2(1), 1–20.
35. Ferreira, P. L., Raposo, V., Tavares, A. I., & Correia, T. (2020). Drivers for emigration among healthcare professionals: Testing an analytical model in a primary healthcare setting. *Health Policy*, 124(7), 751–757.
36. Flores, L. P., & Aquino, C. B. (2023). Compensation and retention of returning Filipino nurses: Policy implications. *Asian Nursing Research*, 17(1), 45–57.
37. Francisco-Menchavez, V. (2020). All in the family: Transnational families and stepwise migration strategies. *Geographical Research*, 58(4), 377–387.
38. Fukuzaki, T., Iwata, N., Ooba, S., Takeda, S., & Inoue, M. (2021). The effect of nurses' work-life balance on work engagement: The adjustment effect of affective commitment. *Yonago acta medica*, 64(3), 269–281.
39. Galanakis, C., Sharp, D., & Matthews, J. (2021). Workplace environment and nurse performance: A systematic review. *Nursing Outlook*, 69(4), 613–622.
40. Galbany-Estragués, P., Giménez-Lajara, M. À., Jodar-Solà, G., Casañas, R., Romeu-Labayen, M., Gomez-Gamboa, E., & Canet-Vélez, O. (2024). Exploring nurses' experiences: Abandoning the profession and migrating for improved opportunities. *Applied Nursing Research*, 77, 151787.
41. Ghimire, A., & Qiu, Y. (2025). Beyond Borders: A Longitudinal Study of Nepali Nurses' Dreams, Realities, and the Pursuit of a Global Career. *Policy, Politics, & Nursing Practice*, 26(3), 163–176.

42. Giorgi, A. (2009). *The descriptive phenomenological method in psychology: A modified Husserlian approach*. Duquesne University Press.
43. Gotehus, A. (2023). 'She's Like Family': transnational Filipino families, voluntary kin and the circulation of care. *Journal of Family Studies*, 29(4), 1704-1721.
44. Han, B., & Shao, Y. (2026). Nursing home nurses' experiences of psychological resilience development in dementia care: A qualitative descriptive study.
45. Hartigan-Go, K., Bongcac, M., Castillo, A. F., Eleazar, E. M., Liamzon, C. M., Mariano, D., ... & Mina, E. (2024). *Confronting the Care Crisis: A Comprehensive Analysis of the Nursing Crisis in The Philippines*. Available at SSRN 4946236.
46. Hernandez, L., & Yap, J. (2024). Professional responsibility and return migration among Filipino nurses. *Nursing Outlook*, 72(1), 52–65.
47. Hillmann, F., Walton-Roberts, M., & Yeoh, B. S. (2022). Moving nurses to cities: On how migration industries feed into global urban assemblages in the care sector. *Urban Studies*, 59(11), 2294-2312.
48. Hujová, A., Zemanová, M., Stupková, D., & Vostrý, M. (2025). Exploring the Determinants Impacting Work–Life Balance for General Nurses in Diverse Healthcare Settings: A Cross-Sectional Study. *Journal of Nursing Management*, 2025(1), 8856776.
49. Ifroh, R. H., Gai, X., Rabiautsani, M. A., & Han, X. (2024). The social support, healthy lifestyle, subjective well-being, and health-related quality of life among university students. *Journal of Education and Health Promotion*, 13(1), 427.
50. Johnson, P., & Redfern, S. (2021). Workload intensification and nurse stress: Contemporary challenges in Asian healthcare. *Journal of Clinical Nursing*, 30(7–8), 1050–1061.
51. Jung, Y. J., & Kim, H. (2025, October). Job Satisfaction, Quality of Life, and Turnover Intention Among Nurses: A Comparative Study of Pattern-Based and Rotating Shift Schedules. In *Healthcare* (Vol. 13, No. 20, p. 2551). MDPI.
52. Konlan, K. D., Lee, T. W., & Damiran, D. (2023). The factors that are associated with nurse immigration in lower-and middle-income countries: An integrative review. *Nursing open*, 10(12), 7454-7466.
53. Kordes, J., Pütz, R., & Rand, S. (2020). Analyzing migration management: on the recruitment of nurses to Germany. *Social Sciences*, 9(2), 19.
54. Krys, K., Haas, B. W., Igou, E. R., Kosiarczyk, A., Kocimska-Bortnowska, A., Kwiatkowska, A., ... & Bond, M. H. (2023). Introduction to a culturally sensitive measure of well-being: Combining life satisfaction and interdependent happiness across 49 different cultures. *Journal of Happiness Studies*, 24(2), 607-627.
55. Labrague, L. J., De Los Santos, J. A. A., Falguera, C. C., Nwafor, C. E., Galabay, J. R., Rosales, R. A., & Firmo, C. N. (2020). Predictors of nurses' turnover intention at one- and five-years' time. *International Nursing Review*, 67(2), 191-198.
56. Labrague, L. J., & De los Santos, J. A. A. (2020). COVID-19 anxiety among front-line nurses: Predictive role of organisational support, personal resilience and social support. *Journal of nursing management*, 28(7), 1653-1661.
57. Laltoog, B. B. (2024). Support System of Transnational Families in Guinzadan Bauko Mountain Province Philippines. *Diversitas Journal*, 9(1), 220-251.
58. Lam, T., Yeoh, B. S., & Tan, Y. (2026). Linked Life-Course: Mapping the Intertwined Trajectories of Skilled Australian Migrants in Singapore. *Population, Space and Place*, 32(1), e70195.
59. Li, Z., Yu, L., Gao, F., Cheng, H., & Liu, Y. (2025). Integration failure or integration risk? Revisiting the modality of return migration in China. *Applied Spatial Analysis and Policy*, 18(1), 19.
60. Liao, K. A., & Asis, M. (2020). Back to the Philippines: Connecting aspirations, return and social remittances in international student migration. *Asian and Pacific Migration Journal*, 29(3), 402-421.
61. Liao, K. A. S. (2025). The grey window of temporary reintegration: The involuntary return and crisis-induced immobility of Filipino migrant workers. *International Migration Review*, 59(4), 2299-2322.
62. Liao, X., Li, S., Li, M., Wang, J., Li, J., Liu, H., ... & Hao, C. (2025). The return of Chinese nurses from overseas (2009–2023): a mixed-method study on influencing factors. *Globalization and Health*, 21(1), 63.
63. Lu, H., Zhao, Y., & While, A. (2021). Staffing levels and nurse burnout: A systematic review. *International Journal of Nursing Studies*, 119, 103921.

64. Madigan, E. A., McWhirter, E., Westwood, G., Oshikanlu, R., Iregi, Z. M., Nyika, M., & Bayuo, J. (2023). Nurses finding a global voice by becoming influential leaders through advocacy. *Clinics in Integrated Care*, 20, 100165.
65. Matlhaba, K. L. (2023). The perceived effects of generational diversity on supervision of new professional nurses in public hospitals. *Health SA Gesondheid*, 28, 2227.
66. McCarron, A., Fiely, K., & O'Brien, S. (2021). The role of the external observer in qualitative interviews: Enhancing participant well-being. *Qualitative Health Research*, 31(7), 1356–1368.
67. Merced, J. J. D., Villanueva, E., De Luna, J., Garcia, J. G., Garrido, C., Malana, M. E., ... & Villalva, J. D. (2023). Lived Experiences of Nurses on Nursing Shortage: Basis in Strengthening Nurses' Protection Advocacies and Education. *Psychology and Education: A Multidisciplinary Journal*, 13(3), 1-1.
68. Moncatar, T. T., Leyva, E. A., Maniacup, J., Andonaque, A. R. & Lorenzo, F. E. (2023). Reintegration of returning migrant healthcare workers into the Philippine workforce: A qualitative case study. *Philippine Journal of Nursing*, pp. 13-27.
69. Naeem, M., Ozuem, W., Howell, K., & Ranfagni, S. (2024). Demystification and actualisation of data saturation in qualitative research through thematic analysis. *International Journal of Qualitative Methods*, 23, 16094069241229777.
70. Näre, L., & Cleland Silva, T. (2021). The global bases of inequality regimes: The case of international nurse recruitment. *Equality, Diversity and Inclusion: An International Journal*, 40(5), 510-524.
71. Navarro, R. G., & Bautista, B. V. (2024). Systemic barriers to healthcare delivery in the Philippines: Perspectives of returning nurses. *Health Policy and Planning*, 39(1), 22–34.
72. Ndlovu, E., Filmlalter, D., Jordaan, J., & Heyns, T. Professional quality of life of nurses in critical care units: influence of demographic characteristics. *South Afr J Crit Care*. 2022; 38 (1): 39–43.
73. Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from others' experiences. *Perspectives on medical education*, 8(2), 90-97.
74. Nezhad, M. S., Abdi, A., & Vaisi-Raygani, A. A. (2025). Explaining the causes and factors related to nurse migration from the perspective of nursing students in Iran: a content analysis study. *BMC nursing*, 24(1), 1204.
75. Norh, S. B. D. (2024). Enhancing nurse retention in private hospitals in the new normal: A comprehensive approach for post-pandemic healthcare stability. *Davao Research Journal*, 15(4), 149-160.
76. Oducado, R. M. (2021). Revisiting job satisfaction and intention to stay: A cross-sectional study among hospital nurses in the Philippines. *Nurse Media Journal of Nursing*.
77. Ortiga, Y. Y. (2020). Learning to leave: Filipino families and the making of the global Filipino nurse. In *Ethnographies of Development and Globalization in the Philippines* (pp. 98-113). Routledge.
78. Ortiga, Y. Y., & Macabasag, R. L. A. (2021). Understanding international immobility through internal migration: “Left behind” nurses in the Philippines. *International Migration Review*, 55(2), 460-481.
79. Paez, J. J., Mabasa, C. R., Peñalosa, M. C., & Isip-de Torres, M. (2025). Employment and Satisfaction Association Among Operating Room Staff Nurses. *WVSU Research Journal*, 14(1), 21-33.
80. Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed-method implementation research. *Administration and policy in mental health and mental health services research*, 42(5), 533-544.
81. Parial, L. L. B., Leyva, E. W. A., Siongco, K. L. L., Dones, L. B. P., Bernal, A. B. S., Lupisan, J. A. C., ... & Bonito, S. R. (2024). Staffing and workload in primary care facilities of selected geographically isolated and disadvantaged communities in the Philippines. *Acta Medica Philippina*, 58(12), 21.
82. Patton, M. Q. (2015). *Qualitative research & evaluation methods: Integrating theory and practice*.
83. Pawlak, N., Serafin, L., & Czarkowska-Pączek, B. (2025). Generational differences in nurse stress and coping strategies in relation to perceived patient safety: A cross-sectional study. *International Journal of Nursing Studies Advances*, 100385.
84. Pepito, V. C. F., Loreche, A. M., Legaspi, R. S., Guinaran, R. C., Capeding, T. P. J. Z., Ong, M. M., & Dayrit, M. M. (2025). Health workforce issues and recommended practices in the implementation of Universal Health Coverage in the Philippines: a qualitative study. *Human Resources for Health*, 23(1), 21.

85. Peralta, E. P., Ancho, I., & Pelegrina, D. (2024). Migration theories and development: A focus on push & pull factors of Filipino migrants. *Journal of Administrative Science*, 21(1), 169-188.
86. Peralta, M. S., Garcia, A. L., & Reyes, J. B. (2024). Mentorship and knowledge transfer among returning Filipino nurses. *Philippine Journal of Nursing*, 94(1), 88-102.
87. Pesut, D. (2026). FUTURE THINK: A META-FRAMEWORK FOR LEGACY CURATION IN NURSING.
88. Pettersson Bustamante, M. (2024). Beyond Financial Support: The Social and Emotional Dimensions of Remittances among Filipino Migrants.
89. Philippine Overseas Employment Administration. (2020). 2019 Overseas employment statistics. <https://www.poea.gov.ph/statistics/2019.html>
90. Plotnikova, M., & Adhikari, R. (2023). Knowledge transfer and professional development among migrant nurses. *Journal of Nursing Management*, 31(4), 612-620
91. Poth, C. N., & Shannon-Baker, P. (2022). State of the methods: Leveraging design possibilities of qualitatively oriented mixed methods research. *International Journal of Qualitative Methods*, 21, 16094069221115302.
92. Pressley, C., Newton, D., Sanderson, L., Simkhada, B., Stephenson, J., Duodu, P. A., ... & Garside, J. (2025). International nurse migration experience of the first two years: a mixed methods study. *Journal of Advanced Nursing*, 81(5), 2672-2686.
93. Ramirez, V. E. (2025). Exploring Forms of Reintegration of Filipino Migrant Health Workers in the Global World. *J Glob Health Soci Med*, 1(2), 1-12.
94. Razonabe, J. P. (2023). Reunified Filipino Family Immigrants with Children in Lisbon, Portugal: Coping Strategies and its Challenges (Master's thesis, ISCTE-Instituto Universitario de Lisboa (Portugal)).
95. Regachuelo, E. S., Grande, R. A. N., & Maniago, J. D. (2025). Thriving or surviving? A structural equation model of organizational culture and professional quality of life among Filipino nurse educators in America.
96. Robredo, J. P., Ong, B., Eala, M. A., & Naguit, R. J. (2022). Outmigration and unequal distribution of Filipino physicians and nurses: An urgent call for investment in health human resource and systemic reform. *The Lancet Regional Health-Western Pacific*, 25.
97. Rodrigo, A. A., & Lopez, V. (2025). The meaning of return: Social ties, cultural belonging, and well-being among Southeast Asian nurse returnees. *Asian and Pacific Migration Journal*, 34(1), 45-62.
98. Rodrigo, C. G. G. (2025). Lived experiences of Filipino nurses in the global healthcare arena: a qualitative inquiry. *Int. J. Acad. Multidiscip. Stud*, 5(2).
99. Rony, M. K. K., Numan, S. M., & Alamgir, H. M. (2023). The association between work-life imbalance, employees' unhappiness, work's impact on family, and family impacts on work among nurses: A Cross-sectional Study. *Informatics in Medicine Unlocked*, 38, 101226.
100. Santos, R. D., & Velasco, A. P. (2024). Wage competitiveness and nurse migration: Evidence from the Philippines. *International Journal of Health Policy and Management*, 13(2), 89-98.
101. Schäfer, G., & Morillas, M. (2025). Strangers in paradise? The wellbeing of migrant professionals across professional and personal environments. *Comparative Migration Studies*, 13(1), 24.
102. Separa, L. A. C., & Croucher, S. M. (2025). The acculturation tendencies of Filipino migrant workers in New Zealand. *Journal of International and Intercultural Communication*, 18(2), 194-213.
103. Shah, M., Gandhvi, D., & Ameen, R. (2020). Professional growth and international migration of nurses: A qualitative perspective. *Journal of Nursing Management*, 28(2), 210-219.
104. Shrestha, S., & Bista, B. (2021). Emotional motivations for return migration. *Asian Migration Review*, 15(3), 80-94.
105. Smith, C., & Cantillon, P. (2024). Exemplar or facilitator: An exploration of the lived experience of nurse mentors supporting the adaptation of internationally educated nurses. *The Clinical Teacher*, 21(2), e13702.
106. Smith, J. A., & Barrow, R. (2022). Professional motivations among returning migrant nurses. *Journal of Nursing Studies*, 34(2), 123-139.
107. Smith, T., & Adams, J. (2023). Nurse staffing and patient outcomes: A review of evidence from developing countries. *Journal of Nursing Care Quality*, 38(1), 50-58.

108. Spiliopoulos, G., & Cuban, S. (2025). Filipino Migrant and Returnee Nurses Resisting and Adapting to the Pressures of Becoming “Ideal Migrants” G. Spiliopoulos and S. Cuban. *Journal of International Migration and Integration*, 26(3), 1435-1460.
109. Tan, S. H. E., & Chin, G. F. (2023). Generational effect on nurses 'work values, engagement, and satisfaction in an acute hospital. *BMC nursing*, 22(1), 88.
110. Tezcan, M. (2023). Future aspirations and return migration among healthcare professionals. *Nursing Migration Studies*, 20(1), 100–112.
111. Thompson, A., & White, R. (2025). The professional environment and nurse retention in Southeast Asia. *Nursing Outlook*, 73(1), 1–12.
112. Ting, H., Memon, M. A., Thurasamy, R., & Cheah, J. H. (2025). Snowball sampling: A review and guidelines for survey research. *Asian Journal of Business Research*, 15(1).
113. Tiu, C. J. S., Alberto, N. R. I., Baron, M. B. C., Mercado, M. V. V., & Baticulon, R. E. (2025). Leaving the health workforce during the COVID-19 pandemic: A cross-sectional study among Filipino healthcare workers. *PLOS Global Public Health*, 5(10), e0004861.
114. Trinidad, A. C., & Faas, D. (2025). Familial ties and their impact on the class conditions of migrant nurses in the Republic of Ireland. *European Societies*, 27(5), 936-958.
115. Tsujita, Y., & Oda, H. (2020). Career Development of Foreign-Trained Nurses in Malaysia. *Human Resources for the Health and Long-term Care of Older Persons in Asia*, 34.
116. Tubaña, R. B. (2021). Reintegration: A Concept Analysis. *Philippine Journal of Nursing*, 91(2).
117. Tussing, T. E., Chipps, E., & Tornwall, J. (2024). Generational differences in the nursing workforce: Strategies for nurse leaders. *Nurse Leader*, 22(5), 602-608.
118. Ubas, M. (2025). Burnout, Organizational Support, and Work-Life Balance Among the Abu Dhabi Filipino Nurses. *Psychology and Education: A Multidisciplinary Journal*, 42(6), 1-1.
119. Ung, D. S. K., Goh, Y. S., Poon, R. Y. S., Lin, Y. P., Seah, B., Lopez, V., ... & Liaw, S. Y. (2024). Global migration and factors influencing retention of Asian internationally educated nurses: a systematic review. *Human Resources for Health*, 22(1), 17.
120. Ung, K. O., et al. (2025). Economic determinants of nurse retention: Evidence from Asia. *International Journal of Nursing Studies*, 137, 104413.
121. United Nations, Department of Economic and Social Affairs, Population Division. (2020). *International migration 2020 highlights*.
122. Urzúa, A., et al. (2022). Self-esteem, cultural identity, and life satisfaction in Latin American immigrants in Europe. *International Journal of Intercultural Relations*, 90, 1–9.
123. Venjulien Sangalang Japon, R. (2025). From Burnout to Bottlenecks: The Multidimensional Impact of Nurse Shortages in Hospital Operations and Patient Outcomes. *International Journal of Research and Innovation in Applied Science*, 10(8), 676-681.
124. Viet, P. N., Van, T. N., Le Kim, T., Le Hoang, H., Van, T. D., Xuan, Q. T., ... & Edreck, E. D. (2024). Factors Associated with Nurse's Professional Quality of Life. *Journal of Medical and Health Studies*, 5(4), 180-187.
125. Villacorta, A. T., Bey, A., & Fernández, J. A. (2020). Push and pull factors in the migration of Filipino nurses. *International Journal of Nursing Practice*, 26(6), e12890.
126. Villamin, M., Reyes, D., & Santos, P. (2024). Policy perspectives on reintegration of Filipino nurses: Addressing structural inequities. *Philippine Journal of Health Policy*, 9(1), 15–28.
127. Villamin, P., Lopez, V., Thapa, D. K., & Cleary, M. (2025). Retaining a multicultural nursing workforce: a self-determination theory perspective. *Journal of Transcultural Nursing*, 10436596251318027.
128. Wang, K. Y., Chien, C. M., Lee, H. F., & Yobelina, Y. (2023). The mediation of health-promoting lifestyle on self-perceived health status and quality of life among nurses: a cross-sectional study. *BMC nursing*, 22(1), 447.
129. Widayana, I. G. A. A., Agustina, H. R., & Mediawati, A. S. (2025). Factors associated with work life balance among nurses in hospitals: a socio-ecological scoping review. *Journal of Multidisciplinary Healthcare*, 4511-4521.
130. Wijaya, H., Lubis, L. A., & Zulkarnain, I. (2025). A Structural Equation Model of Reverse Culture Shock, Digital Coping, and Sustainable Reintegration Among Returning Migrant Content Creators. *International Journal of Sustainable Development & Planning*, 20(12).

131. World Health Organization. (2022). Working for health 2022-2030 action plan. World Health Organization.
132. World Health Organization. (2023). WHO report on global health worker mobility. World Health Organization.
133. World Health Organization. (2025). State of the world's nursing 2025: Investing in education, jobs, leadership and service delivery. World Health Organization.
134. Wray, J., Calzolari, M., Gammone, M., Aleo, G., Catania, G., Zanini, M., ... & Bagnasco, A. (2023). The potential benefits of legacy mentoring for newly qualified nurses. *Nurse education in practice*, 66, 103511.
135. Wu, Y., Du, H., Li, P., & Ouyang, H. (2024). Family structure of migrant workers and long-term local settlement intention in China. *Population, Space and Place*, 30(4), e2742.
136. Wu, L., Hong, X., Liang, Y., Yan, X., & Gong, H. (2026). Stress Coping and Psychological Resilience Development in Newly Licensed Registered Nurses During the Transition to Independent ICU Practice: A Descriptive Qualitative Study. *Psychology Research and Behavior Management*, 1-15.
137. Zulfiqar, S. H., Ryan, N., Berkery, E., Odonnell, C., Purtil, H., & O'Malley, B. (2023). Talent management of international nurses in healthcare settings: A systematic review. *PloS one*, 18(11), e0293828.

APPENDICE

Appendix A

Correspondences

Request Letter

02/13/2025

Dr. Giovani Mercado

Chair, Ethics Review Board

Adventist University of the Philippines Dear Sir:

I am Marites Barnido Fourie, a graduate of Santo Tomas University taking up Master's degree of Science in Nursing. I would like to request for an ethics review of my research entitled: "HOME TO SERVE: A HENOMENOLOGICAL STUDY OF FILIPINO CLINICAL NURSES RETURN MIGRATION".

I am also submitting all the required documents related to this request.

Looking forward for your response on this matter.

Sincerely



Marites B. Fourie, RN

2055203 @ aup.edu.ph

Endorsement

02/13/2025

Dr. Giovani P. Mercado Chair, Ethics Review Board



This letter is to endorse **Marites Barnido Fourie**, a graduate student in the MS

Nursing program is completing her thesis entitled *Home to Serve: A Phenomenological Study of Filipino Clinical Nurses' Return Migration*. Ms. Fourie has passed the proposal defense and is ready to collect data.

Before proceeding to her data collection, her study protocol must undergo ethical review.

Any help extended to Miss Fourie will be much appreciated.

Thank you very much,

Sincerely,

Dr. Maria Julita SJ Sibayan

Appendix B

Gantt Chart

Center Of Graduate Studies Adventist University Of The Philippines

TITLE OF THE STUDY: Home to Serve: A Phenomenological Study of Filipino Clinical Nurses' Return Migration

RESEARCHER: Marites Barnido Fourie, RN

ADVISER: Dr. Maria Julita SJ. Sibayan

DATE STARTED: April 2025

TARGET DATE OF COMPLETION: May 2025



PERIOD	ACTIVITY	WEEK				REMARKS
		1	2	3	4	
January 2024	Choosing a title		✓			Completed
February 2024	Gathering of Literature		✓			Completed
March 2024	Working on Chapters 1 & 2			✓		Completed
April 2024	Revision of Chapters 1 & 2	✓				Completed
April 2024	Title Defense		✓			Completed
April 2024	Revision of Chapters 1 and 2				✓	Completed
May 2024	Working on Chapter 3		✓			Completed
May 2024	Revision on Chapters 1,2 & 3				✓	Completed
June 2024	Revision on Research Questions	✓				Completed
July 2024	Revision on Chapter 3			✓		Completed
Aug 2024	Proposal Defense	✓				Completed
April 2025	Gathering of Data		✓			Completed
May 2025	Analysis & Interpretation of Data		✓			Completed
June 2025	Working on Chapters 4 & 5			✓		Completed
December 2025	Colloquium			✓		Completed
February 2026	Final Defense	✓				Completed
	Final Editing of Manuscript					
	Graduation					

Appendix C

Line-Item Budget

Center Of Graduate Studies Adventist University Of The Philippines

TITLE OF THE STUDY: Home to Serve: A Phenomenological Study of Filipino Clinical Nurses 'Return Migration

RESEARCHER: Marites Barnido Fourie, RN

TOTAL BUDGET: 33,700

Item/Service	Unit Price (Php)	Quantity	TOTAL COST (Php)
Data Gathering Cost			
Research Assistant Fee (Psychologist)	5000	1	5,000
Transportation	400	10	4,000
Participant Support Cost	300	10	3,000
Academic Fees			
Proposal Defense	2500	1	2,500
Final Defense	14000	1	14,000
Stationery and Printing			
Photocopy (Final Defense)	200	3	600
Hardcopy (Thesis)	700	4	2,800
Miscellaneous (Food for the Panel)	300	6	1,800
TOTAL			33,700

Appendix D

Validation

Appendix E

Approval of the Ethics Review Board



Date: 26 March 2025
To: Marites Barnido Fourie
Affiliation: College of Nursing (MSN Program)
Institution: Adventist University of the Philippines
RE: Home to Serve: A Phenomenological Study of Filipino Clinical Nurses'
Return Migration
ERB Case Code: 2025-1466
Subject: Ethics review

Dear Ms. Fourie:

This is to acknowledge receipt of your request and the following supporting documents submitted on 20 March 2025:

1. Letter requesting for an ethics review
2. Filled out application form for ethics review
3. Endorsement letter
4. Informed consent document
5. Research instrument (Interview guide)
6. Research protocol
7. Proof of payment of review fee

The above documents underwent **expedited review** which generated the following results:

- The research protocol does not involve more than minimal risks to the respondents.
- The participants do not belong to any vulnerable groups.

You are hereby granted an **ETHICAL CLEARANCE** to proceed with your study. This ethical clearance is valid until 26 March 2026. Use the ERB case code **2025-1466** as you communicate with us the progress of your research.

Cordially,


 Giovanni P. Mercado, PhD
 Chair, Ethics Review Board



Appendix F

Informed Consent

Name of Principal Investigator	Marites Barnido Fourie
Name of Organization	Adventist University of the Philippines (AUP)
Name of Sponsor, if applicable	NA
Name of Project and Version	Home to Serve: A Phenomenological Study of Filipino Clinical Nurses Return Migration

Part I: Information Sheet

Introduction

I am a graduate student, and I am inviting you to participate in my thesis research. My study focuses on the experiences of Filipino clinical nurses who have returned to the Philippines. I would be grateful if you would carefully review the following information, and please do not hesitate to ask if anything is unclear. Your insights would be invaluable to my research.

Purpose Of The Research

This study aims to address this gap by exploring the lived experiences of Filipino clinical nurses who have returned to the Philippines after working abroad. By understanding their motivations for returning, the challenges they face, and the contributions they make, this research seeks to inform strategies that optimize the benefits of return migration for both individual nurses and the Philippine healthcare system.

Type Of Research Intervention

This qualitative study aims to understand the experiences of Filipino nurses returning to the Philippines after working abroad and the impact of this return. Through criterion, purposive, and snowball sampling, 10 participants will be recruited and asked semi-structured interview questions. The goal is to address the gap in current research regarding the benefits and challenges of return migration for these nurses.

Participant Selection

We are inviting you to participate in this research because of your professional background as a clinical nurse with international experience.

Voluntary Participation

Your participation in this study is purely voluntary. You may choose to withdraw from the study at any time without consequences to your employment status. If you wish, you may request that any data collected from you not be used in the study. You are free to ask questions about the study at any time, even if you decide not to participate or if you withdraw. We will provide you with contact information for the research team so you can reach out with any concerns.

Procedures

In this study, you will participate in a one-on-one interview with a researcher, and you will answer a questionnaire that will ask you about your perceptions towards return migration. The interview will be conducted face-to-face or online and will be video- or audio-recorded. Before the interview begins, you will be asked to provide your informed consent to participate and to be recorded. You have the right to refuse to answer any question you are not comfortable with, and you may stop the interview at any time.



All recordings and transcripts will be kept confidential and stored securely. Your name and other identifying information will be removed to protect your privacy. The recordings will be used for transcription and analysis purposes only. They will help the researcher accurately capture your experiences and perspectives. Only the research team will have access to the recordings. You can choose whether to be video-recorded or only audio-recorded.

Duration

The data collection will begin on April 20, 2025, and end on May 20, 2025.

Risks

Participation in this study is entirely voluntary. You are not obligated to answer any question or participate in any part of the interview, discussion, or questionnaire. If you find a question too personal or feel uncomfortable discussing a particular topic, you may decline to respond without any consequence. Your comfort is a priority in this research. Please be aware that you have complete control over your participation. You are free to skip any question or withdraw from the interview, discussion, or questionnaire at any time if you feel the questions are too sensitive or if discussing them causes you any discomfort.

BENEFITS And REIMBURSEMENTS

While this study does not offer cash compensation, your participation is invaluable in helping us understand the experiences of clinical nurses who have returned to the Philippines, ultimately contributing to a better understanding of return migration. We would be happy to treat you to a beverage of your choice during our conversation, and we will provide a meal during the questionnaire completion as a token of our appreciation.

Confidentiality And Sharing Of Results

The researcher will observe strict precautions to ensure the confidentiality of your data in accordance with the 2020 Data Security Guidelines. This includes storing data securely, using coding to protect your identity, and limiting access to the research team only. Any information you share will not be used for purposes other than what was specified in this study. When the study is shared through a research presentation or publication, all identifiable information will be removed to protect your privacy.

Appendix G

Interview Transcript

Interview Transcript (Translated) Informant 1

DATE & TIME OF THE INTERVIEW: 4/09/2025 at 7 PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

KKM/ 50/ 15 years/ Came back 2020

INTERVIEWER: Ma'am, can you walk me through your experience in the Philippines before you decided to work abroad?

INFORMANT 1: I was a NICU Nurse in South Luzon Medical Center, now The Medical City South Luzon, where I developed a strong foundation in neonatal care, particularly in managing respiratory distress syndrome and providing nutritional support to premature infants.

INTERVIEWER: It sounds like you had a well-established career in the Philippines before working abroad. What ultimately motivated you to pursue opportunities in the Middle East?

INFORMANT 1: "While I was happy working as a NICU nurse at South Luzon Medical Center (now The Medical City South Luzon), I always had a desire to broaden my professional horizons and gain international experience. At that time, as I mentioned, applying to the US was a difficult and expensive process. Opportunities in the Middle East, particularly in Saudi Arabia and the UAE, seemed more accessible through POEA. The King Faisal Specialist Hospital in Jeddah offered a great opportunity to work in a well-regarded facility and gain experience with different protocols and patient populations. It was a chance for professional growth that I couldn't pass up, despite knowing there would be adjustments involved."

INTERVIEWER: How would you describe your practice abroad?

INFORMANT 1: As a NICU nurse, I start my day with a comprehensive review of my assigned patients. This involves receiving a detailed report from the previous nurse carefully assessed each infant's condition and reviewed their medical history, current treatment plan, and any overnight events. I pay close attention to vital signs, respiratory status, IV infusions, and any other relevant data. Throughout the day, I continuously monitor my patients' progress, document my observations, and communicate with the families, providing updates and answering any questions they may have. A significant part of my role also involves providing comfort and support to these families during a very stressful time.

One of the biggest adjustments was navigating cultural differences and language barriers. I had to learn to communicate effectively with patients and families from diverse backgrounds, which sometimes required using interpreters or learning basic phrases in the local language. Despite the challenges, working as a NICU nurse abroad was deeply fulfilling. I felt a sense of pride in providing high-quality care to vulnerable infants and in making a positive impact on their lives and their families' lives.

INTERVIEWER: Ma'am, what cases in particular have you handled?

INFORMANT 1: I've managed a wide range of neonatal cases, including prematurity (managing respiratory support, nutrition, temperature, and preventing infections), respiratory distress syndrome (administering surfactant, managing ventilation, and monitoring oxygenation), neonatal sepsis (administering antibiotics and providing supportive care), neonatal abstinence syndrome (providing comfort measures and monitoring withdrawal symptoms), congenital anomalies (collaborating with specialists), hyperbilirubinemia (providing phototherapy and monitoring bilirubin levels), and necrotizing enterocolitis (providing supportive care and administering antibiotics).

In addition to these common cases, I've also had experience with more complex cases, such as persistent pulmonary hypertension of the newborn, meconium aspiration syndrome, and infants requiring extracorporeal membrane oxygenation.



My experience in both the Philippines and abroad has allowed me to develop a well-rounded understanding of neonatal care and the ability to adapt to different challenges and patient populations."

INTERVIEWER: Ma'am, you mentioned you stayed 10 years in King Faisal Specialist Hospital, so what can be considered the peak of your career?

INFORMANT 1: "One of the most significant peaks of my career at KFSH was the opportunity to serve as a charge nurse. This role allowed me to develop my leadership and organizational skills while contributing to the unit's overall performance. I focused on improving team coordination, ensuring efficient resource management, and mentoring newer nurses to foster their professional growth. Successfully resolving conflicts and supporting the team in providing optimal patient care were particularly rewarding aspects of this role, and I believe my leadership as a charge nurse contributed to improved patient outcomes and a more cohesive and supportive work environment."

INTERVIEWER: Could you elaborate on the factors that influenced your decision to return to your home country?

INFORMANT 1: "Yes, I was an only child, and my parents were aging, and my son was in college during the pandemic. I considered coming back home several times, but I saw my mother's struggle because she was lame, and my father was diabetic. It turned out my son was the one taking care of them, and they weren't even telling me. I had enough savings by then, so I resigned from my job overseas and applied back to one of the tertiary hospitals near my place. I'm now the senior nurse at the hospital, a preceptor, and a part-time occupational health nurse at a nearby BPO company. I took on every job I could get (laughs out loud) so I could make ends meet, knowing that the salary I am earning is not enough compared to my salary overseas".

INTERVIEWER: That's quite a transition! Given all that you were juggling – family responsibilities, finding new work, adapting to a new environment – what's one particular personal experience that really stands out for you during that reintegration period?

INFORMANT 1: "I feel like I'm having a hard time with the new nurses.

You can't really correct the new nurses' attitude. They are emotionally weak; after 3 months of training, if they find it difficult, they resign immediately. Even when I tell them that the same thing will happen when they transfer, they say, "So why not stay for another 3 months? Maybe they'll change their minds?" When I talk to the staff about their attitude, they say the same thing, for example, they're late for the endorsement because they didn't finish something in the doctor's order. So, this experience stood out to me a bit when I came back because it's only now that I've experienced it. Before, even if it was not paid, as long as we learned, we were okay, right? I started that way, with a goal that, even if the senior staff scolded me, I would learn everything.

Nowadays, it is not like that anymore. I feel like they even resent you if you tell them that they should study the protocols because soon they'll be alone, and we're few in the NICU. Before, we knew that being a nurse meant serving humanity, but I've noticed that new nurses just want the experience so they can use the documents abroad. I told them it's harder abroad; the salary is higher, but the work is harder."

INTERVIEWER: That's a really insightful observation about the changing attitudes of new nurses. Shifting gears a bit, what other professional challenges or opportunities did you encounter when you returned to nursing in the Philippines?

INFORMANT 1: "Professional challenges for me would still be scheduling and work-life balance. You work 8–12-hour shifts or even longer, and we don't have a set schedule. Due to staff shortages, the shift has been extended to 15 hours, and 3 nights have been increased to 4, resulting in significant unpaid overtime. Also, our work is physically demanding, and many times we also lack nursing aides, so if I have to transfer patients on my own, which is very risky, I have to wait until another nurse comes in. Opportunities? The continuing training we receive is comparable to King Faisal, but the difference is that sometimes it's unpaid; there are trainings where you are on duty, and if you want to attend, you have to be absent from work. Which is unfair, right?"

INTERVIEWER: Given all of those challenges with scheduling, staffing, and training, how did that ultimately impact your ability to effectively function as a nurse?

INFORMANT 1: "I experienced burnout and stress, which affects the quality of care I provided to my patients, but luckily, in the NICU, we are not often floated to other areas unless the census is low, which rarely happens. So even if the census is high, we help each other to handle the workload. Recently, they also added nursing aides because there are new hires, so they are helping. The most difficult thing about understaffing is that it delays medication administration. You have to check all medications with another nurse. If they are all busy, there may be no medication nurse available, and medication errors are critical; we do not allow that to happen. Understaffing really has a negative outcome, including an increased mortality rate, because monitoring is insufficient".

INTERVIEWER: "What are the key insights you've personally gained from navigating these challenges in the NICU?"

INFORMANT 1: "To be honest, I am more motivated to teach new nurses the knowledge I gained abroad; it's like paying it forward, if they are willing. I focus on teaching new nurses who have been at the bedside for almost a year now and haven't resigned, passing on what I learned abroad. The hospital's training has been a big help to me because I was exposed to it, especially regarding the machines, and I use the expertise I gained to teach them. Being a preceptor, I teach them all I know and answer all their questions to the best of my ability. I don't know everything, but I know a lot. We all help each other in achieving our goals, be it today's goal or tomorrow's."

INTERVIEWER: "I feel that you're happy in your work right now, especially being a preceptor. Your idea of paying it forward creates a chain of kindness. It generates a ripple effect. I believe you're doing this not for personal gain, but it's about giving to others all the things you have learned abroad, without hesitation."

INFORMANT 1: "Yes, it doesn't require a lot of money, time, or effort to make a difference in someone's day, and I always believe that in a world often filled with negativity, paying it forward restores our confidence in our ability to function as a community. It's just so nice if everyone contributes. Is no one a burden? (laughs out loud)."

INTERVIEWER: "Thinking about where you started and where you are now, looking back, what are your sentiments regarding your growth and evolution as a nurse?"

INFORMANT 1: "Personally, I don't think I have any negative sentiments (laughs). I'm just a happy person. I embrace positivity, and working abroad for almost a decade made me realize that coming home was the best decision I made. In truth, my son was the reason why I worked abroad. I was an only child, so when I got pregnant, and my partner was not ready to support us, I immediately told my parents that I would take care of them. I would be the breadwinner, so it was easy for me to decide to stay when I saw that they needed me. Professionally, I just want our salary to change. I work at a government hospital, and we are still receiving salaries that do not reflect our workload. We have a high patient ratio. In the wards, we are caring for between 5 and 8 patients per shift, which is overwhelming. It is difficult to provide the level of care we want, which is why I can only handle the NICU because I would have difficulty in the ward. But even in the NICU, there are times when we have 3 patients per staff because some are pulled out to other units. That's how difficult it is here in our country."

INTERVIEWER: "Your values of family, community, and paying it forward are very clear. How have your experiences reinforced or further shaped these values?"

INFORMANT 1: "When I came back, I wasn't expecting to stay at the bedside for long, knowing that the salary is low. But luckily, my focus is no longer on the salary. I was able to save enough to support my family's needs. And if you are asking me what has changed in me because of this experience? There are many things, let me see (laughs)...short pause...Hmmm, OK game (laughs again). This experience contributed to my personal development. It made me resilient, empathetic, and self-aware. Resilient because we are known for our strong commitment to our profession; we often go above and beyond to provide quality care, even during staffing shortages. FIGHT ON! (laughs). Despite the challenges, we are like actors, so we can maintain a positive attitude,



which helps us cope with stress. Empathy because of our sacrifice to continue working, even though there are many shortages in our area. Self-awareness, because working back in the Philippines showed me an appreciation and understanding of *pakikipagkapwa-tao* (shared identity) and *bayanihan* (community spirit). Imagine, no matter where you are rotated, you will notice this."

INTERVIEWER: "Ma'am, the insights you've shared are truly inspiring. It's given me a newfound appreciation for how nurses like you maintain such a humble attitude, even after gaining experience abroad. Could you also share some of the things you learned while you were working overseas?"

INFORMANT 1: "My experience abroad broadened my perspective, and it also improved my adaptability because of how many nationalities were there at King Faisal? I think 30 plus? So, imagine? Different cultures, but we speak English because other languages are not allowed at the bedside. But still, when we go to their accommodations, you can see their culture, and you also adapt to it. My approach to teamwork changed because my workmates had different personalities. Problem-solving, too, because you have to fight for it if you know you are right. And when I became a charge nurse, these also added to my leadership role. If I was able to handle the cultural diversity in another country, how much more if you are with your own race?"

INTERVIEWER: "I'm deeply grateful for all of the learnings and insights you've shared with me today. I truly admire your honesty. As a last question, what are the reasons why you decided to stay in the Philippines for good?"

INFORMANT 1: "I am a LOLA now, so family is really the reason why I decided to stay for good. I am happy to take care of my parents and my grandchild. It's just sad that my child is far away from me, but his contract in Japan allows him to come home yearly, and we can come and visit him anytime because it's just nearby, so I am OK with that set-up."

Note: "LOLA" means "grandmother" in Filipino.

Interview Transcript (Translated) Informant 2

DATE & TIME OF THE INTERVIEW: 4/12/2025 at 7PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

INFORMANT 2: PPH, 52, native of Pangasinan, I worked in Saudi German Hospital, Jeddah, KSA, for a total of 15 years. I came back in January 2020.

INTERVIEWER: Ma'am, how would you describe your practice abroad?

INFORMANT 2: "I was hired on December 30, 2009. I was 26 years old, and it was my first time leaving the country. I started as a staff nurse in the Oncology Ward. My job description was similar to my previous work at PNP General Hospital in the Philippines, so I had no trouble. The only difference was that the day case in PNP was just an hour case in the Saudi German Hospital. The tumor markers already have results in a day. They admit the patient in the morning and then discharge them later in the afternoon. My only struggle was that I was assigned to the ward, and my patient load was limited to 5. When it comes to medication, the medication nurse and I would still look for each other when I would give medication because I need to check with her all the medications that I have to give to my patients. We usually give infusion therapies in the OPD, but in SGH, the rooms per patient are spacious, so it's like we are always looking for the medication nurse (laughs). The patient census was really the struggle, but since SGH was JCIA-accredited, I learned a lot. Training was provided to us. Also, the language barrier was my struggle, but we were also given lessons for that. It took me a while to learn Arabic, but it was necessary to learn because few Arabs know English. All of your health teaching for the patients was in Arabic.

INTERVIEWER: "Ma'am, you mentioned earlier that you stayed at SGH for almost 10 years. Looking back, what would you consider the peak of your career? Where there any particular moment that stood out?"

INFORMANT 2: "I started as a staff, then worked my way up as a charge nurse after 8 years. It took me a long time to transition. In every contract, I would tell my head nurse to reassign me to another ward so I could learn other skills. After 5 years, I was assigned to the ER, and that's where I was given the chance to serve as a charge nurse. Many times, I would think of going home because my children were still small when I went abroad; my eldest was 7 and my youngest 3 when I left. But when I think about my salary, I backtrack (laughs). It's a waste of the salary if you go home. You will endure the small salary again here in our country (laughs)."

INTERVIEWER: "So, Ma'am, during those years that you were working abroad, how often were you able to come home to the Philippines to visit?"

INFORMANT 2: "We were allotted yearly vacations, but because I incurred debt before I left, I endured 3 years in Saudi Arabia before I went on vacation. I saved my ticket and just reimbursed it for money so my children would have remittances. Then, after that, I went on vacation yearly. I sometimes divide my 45 days for vacation so that I could attend to my children's important milestones. "

INTERVIEWER: "Ma'am, you mentioned that there were several occasions when you considered coming back home. When did you finally decide to stay in the Philippines for good, and what circumstances led you to that decision?"

INFORMANT 2: "My children also, and my age (laughs). I was 50 when I returned here to our country. I promised my daughters that when I became a 'golden girl,' I would come home. We haven't been together for a long time, and only my youngest is with me now because her older sister is married, but her house is also near us, so I decided it's time to spend time with them. My children are even getting mad at me, saying I should travel because I deserve it. My idea is that I am not used to traveling for pleasure, which is the trend now. What I'm used to is traveling to earn (laughs), right? So, I can't be persuaded by my children to travel, travel (laughs)."

INTERVIEWER: "I agree, Ma'am. The trend these days is leisure travel, supposedly to create lots of memories. It's also difficult to travel if you're not used to spending money. So, Ma'am, when you came back to the Philippines for good, did you start working again right away, or did you take some time to rest first?"

INFORMANT 2: "I came back the last week of January 2020, then there was a lockdown in March 2020 due to the pandemic. I was hired during the pandemic at Ospital ng Muntinlupa because I have a friend who endorsed me to the head nurse, who was also a former friend. I was hired as a charge nurse in the Pediatric Ward. I'm happy because the time given to me is flexible and there's no night shift, so I'm not complaining (laughs)."

INTERVIEWER: "Ma'am, you mentioned that you returned to the Philippines in January 2020 and then started working at Ospital ng Muntinlupa during the pandemic. Given the unique circumstances of returning home right before the lockdown, what personal experience really stood out for you during that reintegration period? Was

there a particular challenge or moment that was especially memorable or impactful as you adjusted back to life and work in the Philippines?"

INFORMANT 2: "Oh, there are many differences. For one, just the work environment alone. At SGH, even the lobby was air-conditioned, but at OSMUN, which is a government hospital, there's no air conditioning. At SGH, everything is available, especially for diagnostics. Here at OSMUN, referrals to nearby laboratories are always needed because they lack equipment. The doctors can't read the results of their requests immediately, so patients are always following up. I pity the Filipinos because of the lack. If the requested diagnostics aren't available at OSMUN, they're referred elsewhere, which is out-of-pocket for patients, and they should use the funds to buy other necessities. That's where I get sad. The services are supposed to be free, but the equipment is lacking. An additional concern is the shortage of manpower and the low salaries paid to those hired. If they just increased the salary a little, I think the majority would stay, but unfortunately, salary increases aren't given. There are many new hires, but after 2 years, they leave for other countries. I definitely encourage them because I also came from another country, but I always tell them to stay grounded and humble. To be honest, these were the scenarios when I left 15 years ago, and sadly, the same issues are still there when I return. So, I think the lack of salary and budget is still a concern I've known about, and there's still no solution. That's what I can consider as something that stuck in my mind.

INTERVIEWER: "Ma'am, you've highlighted some significant challenges in your experience reintegrating into the Philippine healthcare system, particularly the resource limitations and staffing issues at OSMUN. On the other hand, were there also any professional opportunities or unexpected benefits that you encountered upon your return?"

INFORMANT 2: "Professional challenges would include working extra hours due to pressure from management to cover shifts because of a lack of staff. Being a nurse is a struggle every day. Sometimes, you've barely arrived, and you already want to go home. It happens, but there's no easy job. The challenges a nurse faces have remained the same from before until now. Aside from time management, there's the daily struggle in dealing with each patient. Each patient is different, so you really have to put yourself in their shoes to understand and care for them. That's why being a nurse isn't just about being intelligent and skilled; your attitude should always be positive because your true character will come out in your work.

In terms of opportunities, I've noticed that the shortage of nurses is decreasing because the head nurses are helping in the understaffed wards. The head nurses join us on rounds and help at the bedside. We follow a functional nursing model when delegating tasks. So, we complete our work as quickly as possible. I noticed that it was an opportunity for me to be part of a team that helps each other, unlike abroad, where we were alone. Our head nurses were just locked in their offices.

Every day except Sunday, patients would line up outside as early as 4 AM because OSMUN is the closest tertiary hospital to the surrounding communities. So, you need energy first thing in the morning (laughs). As a charge nurse, I help prepare medications for the shift with the staff nurses. I usually help them with this task because I believe medication errors are the most frequent and avoidable source of patient harm, so that's where I help. And our head nurses will also help with other tasks. I believe this type of teamwork helps reduce the struggles of the struggling workforce of OSMUN."

INTERVIEWER: Ma'am, you've described both the challenges of staff shortages and long hours, and the positive aspects of teamwork and support from head nurses at OSMUN. Considering both of these factors, how has this environment overall impacted your capacity to function as a nurse?

INFORMANT 2: "I think this made me resilient. Like a ball, you bounce back immediately from any challenge or hardship, and smile again. Problems will pass; they shouldn't be a reason to be miserable. You can cry and complain about a lousy day, but always remember that a day has 24 hours only, so when you wake up, it should be a new day to be positive again. I always remember a quote that says we wake up with a choice to be happy or sad. So, will we be sad knowing that cancer cells thrive when we allow negativity in our lives? (laughs). I am not saying that my emotions are not valid. Yes, of course, my emotions are valid, but once I've talked about them

with my co-workers, that's it. I don't bring my work problems home. This adaptability is what has made me stay in this profession until now."

INTERVIEWER: "Ma'am, you've shared a lot about the challenges you face, but also the resilience and adaptability you've developed. Looking back on your experiences, what key *insights* can you draw from this journey?"

INFORMANT 2: "Well, thinking about it all... I guess the biggest insight is that nursing in the Philippines demands a special kind of strength. It's not just about the clinical skills, though those are obviously important. It's about the ability to adapt to whatever comes your way, to find creative solutions when resources are limited, and to support each other through tough times. I've learned that resilience isn't something you're born with; it's something you develop. For me, it's been about finding my own ways to cope, whether it's through laughter with my colleagues, reminding myself that every day is a new day, or simply taking a few minutes to breathe and refocus.

I've also realized that teamwork is everything. When we're short-staffed and overwhelmed, we rely on each other to get through it. That support from head nurses and fellow staff is what keeps us going. I think my experience has also reinforced the importance of a positive attitude. I know it sounds cliché, but it really does make a difference. When you approach your work with a smile and a willingness to help, it not only makes your day better but also your patients' and your colleagues'.

So, if I had to sum it up, I'd say the biggest insights are: nursing in the Philippines requires resilience and adaptability; teamwork is essential for survival; and a positive attitude can make all the difference. And, of course, never forget to find humor in the chaos!"

INTERVIEWER: "Ma'am, you've shared some valuable insights about resilience, adaptability, and the importance of teamwork. Now, looking back on your time at OSMUN and your nursing career in general, what are your overall *sentiments*? What feelings or emotions come to mind when you reflect on these experiences? Is there a sense of pride, satisfaction, perhaps some lingering frustrations, or a mix of emotions?"

INFORMANT 2: "Ah, sentiments... well, it's a mix, really. There's definitely a lot of pride. I'm proud of the work I've done, the patients I've helped, and the challenges I've overcome. There's a real sense of accomplishment in knowing that I've made a difference, even in small ways. But if I'm being completely honest, there's also a bit of frustration. Frustration with the system, with the lack of resources, with the long hours, and the heavy workload. It can be tough sometimes, knowing that you can't always provide the level of care you want to give because of these limitations. Overall, though, I'd say my dominant sentiment is one of fulfillment. Despite the challenges, I wouldn't trade my experiences for anything. Nursing has been a challenging yet incredibly rewarding career, and I'm grateful for the opportunity to have made a positive impact on others' lives. It's a profession that demands a lot, but it gives back even more."

INTERVIEWER: Considering these experiences and the sentiments you've shared, how do you think all of this has *shaped* you as a person and as a nurse? What are the lasting qualities, values, or perspectives that you've gained from this journey?"

INFORMANT 2: "My experience returning to the Philippines and working at the bedside again made me adaptable and an advocate for better working conditions and fair compensation among nurses. If it were just for me, I'd be okay financially; I was able to save up from working abroad. But looking at the nurses who stayed behind, who are the same age as me but don't even have their own house, made me realize how difficult it is to stay and work as a nurse in our country. I hope our nurses' salaries will be increased, because they're really not enough. I hope the government notices because the local government funds OSMUN. A Nurse 1 level only earns 32K, can you imagine? How can you make that salary stretch if you have children? If you're single, a 32K salary might be enough, but if you have children or you're a single parent, it's really not enough. At least 25K every 15th of the month would be better.

Remember that there are deductions, so the struggle is real (laughs). To be honest, my salary is only enough for gasoline and groceries; nothing is left. That's why I fully understand why all the hospitals are understaffed; they just become training grounds for newly hired nurses, who leave after 2 years. So, nothing really changes, right? We always talk about that during meetings with the admin, and I really am one of those who push for change, that all overtime should be paid; every minute counts. So far, the OTs (overtime) of the staff in our ward are being paid, so that's the only contribution I can say I've made."

INTERVIEWER: "Ma'am, you've painted a vivid picture of the challenges and rewards of nursing in the Philippines, and your dedication to advocating for better conditions is truly inspiring. Given all of this, what ultimately led you to decide to stay for good, despite the difficulties? What are the key reasons that keep you committed to nursing in the Philippines?"

INFORMANT 2: "Well, that's a good question. It's not always easy, and there are definitely days when I wonder if I made the right choice. But when I really think about it, there are a few key reasons why I've decided to stay. You see, my family is here. My daughters are grown and adulting now, so they don't need me in the same way, but I still value being close by and available if they ever do." My parents are getting older, and I want to be here to help them out and spend time with them. My siblings and their families are here as well, and I value being part of their lives and seeing my nieces and nephews grow up. It's important for me to be present for them. And most importantly, my daughters are grown and adulting. Of course, I also care about my patients and feel a sense of duty to contribute to our healthcare system. But ultimately, family comes first. I want to be here to support them, to be a part of their lives, and to be there in times of need. It's not always easy balancing work and family, especially with the demands of nursing, but it's what's most important to me. Knowing I'm here for them gives me a sense of purpose and keeps me grounded. They are my priority."

Interview Transcript (Translated) Informant 3

DATE & TIME OF THE INTERVIEW: 4/16/2025 at 7PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

SSH is 55 years old with over 20 years of experience at Cedars-Sinai Medical Center in Los Angeles, California, USA.

INTERVIEWER: How would you describe your practice abroad? INFORMANT 3: "I graduated in 1992. I moved to California in 1994, took the LVN board exam in 1995 and passed it on the first try; took the much harder NCLEX in 1996 and again, luckily, passed it on the first try. I had to study very hard for my licensure exams because I was already married, and I needed to support my husband, who was still studying Engineering in the Philippines at the time. Needless to say, I have been working as a nurse here in the U.S. since the early

1990s. I became eligible to retire when I turned 50 years old and had been employed for at least 20 years. I stopped working in 2008 because my husband had prostate cancer. I had to take care of him for a while, then he was in remission, and I moonlighted in clinics near my house for almost 8 years. Then my husband got sick again during the pandemic, and that's when I stopped working again because I needed to take care of him until he died in 2022. So, I came back here to our country because our relatives are scattered all over the U.S. I chose to come back because I still have siblings here, and I helped put many of my nieces and nephews through school, so they are the ones I am with now. It's nice to come back after staying away for so long because it's also lonely in the U.S. when you have nothing to do."

INTERVIEWER: "Thank you for sharing all of that. What kind of nursing work did you get into? Were you assigned to a specific hospital, clinic, or area of practice?":

INFORMANT 3: "I was a preceptor for more than a decade, and I think that's something I can be proud of. I had the opportunity to work in a trauma ED with some of the most intelligent nurses and physicians. Although I was afraid that I would never be able to match their level of expertise, or that I simply wasn't smart enough to be there as a newbie nurse, my preceptor was a brilliant nurse named Susie. She was a no-nonsense nurse, but she supported me and protected me, whether she was just making sure I submitted my schedule on time or she was standing up for me when I wasn't as quick on the orders as some of the physicians would have liked. Of course, there was a language barrier; I could understand their language, but sometimes my reaction was delayed, so they thought I didn't hear them. That was a struggle when I was new. Instead of berating me, Susan would give me advice, and she was always encouraging.

Early in my career, I took care of a patient who had COPD and arrived in respiratory distress. As I cared for him, his spouse held his hand and prayed. He did not want to have an invasive airway, so a do-not-resuscitate order was initiated. His priority was comfort care. This was a difficult concept for me to understand because, as an emergency trauma nurse, I had learned to rescue those who needed rescuing. On that day, I had to learn that sometimes there is no need for rescuing, only comfort and peace. I remember asking Susie as I neared the end of my orientation, 'How will I be able to do all of this on my own?' She simply replied, 'You'll never be alone.' Ten years later, as a nurse preceptor, I continue to use Susie's lessons. She taught me that a nurse's voice is stronger than their insecurities and that if I didn't know something, it's important to ask for help. Don't forget the emotions and fears you experienced when beginning your first nursing job. Support new nurses and your colleagues. That's what I have been doing until now, even in my current work at Qualimed Hospital."

INTERVIEWER: "You mentioned taking care of your husband during his illness and then his passing. Was that a significant factor in your decision to return to the Philippines, or were there other circumstances that led you to come back?"

INFORMANT 3: "Yes, after he died in 2022, I decided to come back.

Actually, we would visit the Philippines every three years, even more frequently when he was sick, because he wanted to see his siblings in Batangas. It was only delayed during the pandemic because he really couldn't travel. Life in the US is very hard. Life there revolves around credit cards, mortgages, and car loans. You can live a good life in the US if you don't have credit—I mean, you can't get those nice homes and spanking Lincoln Navigators by cash. So, for the next 30 years, you will be making your mortgage payments. After 30 years, sell your property and retire in the Philippines. US nurses are full of credit and loans, but if you live by your means, you'll be okay. Over there, if you start saving for your retirement early, like your 401(k) or IRA, I think your retirement will be okay.

Plus, of course, healthcare is way better [in the US]. I've thought about the option of going back to the Philippines when I'm ready to retire because I don't want to end up in a nursing home, with diapers soaked in urine, contracted, and having stage 4 decubitus. I don't have children; it was just my husband and me. All my relatives are scattered across the US, but at least they have children to look after them when they are elderly. But with me, I have no children because we were too busy with work, and I think we weren't really blessed with a child, so that's why I decided to come back. There's no place like home. Yes, life can be so good in the US and other countries, but the best things in life are free, and they're in the Philippines! Money can't buy them (laughs)."

INTERVIEWER: "Following your return, what was your work situation like? Did you find yourself back at work soon after you came home?"

INFORMANT 3: "I came back in the first quarter of 2022, when it was safe to travel. Then I had the house in Cavite fixed first, and after that, I started looking for a job because I'm not used to having nothing to do. Luckily, there was an opening at Cavite East Asia Medical Center along Molino, which is near me. I was just looking for a moonlighting job, but luckily again, they were looking for a preceptor/training officer/tenured nurse to train and oversee the newly built extension of their ERD [Emergency Room Department]. Cavite East Medical Center was formerly known as Southeast Asian Medical Center, Inc., now a tertiary hospital, so they expanded. So, I grabbed the offer because I also needed a monthly salary for due date bills (laughs)."

INTERVIEWER: "Thinking back on that time, what's one personal experience from your reintegration that really stands out in your mind?"

INFORMANT 3: "One personal experience that stood out during my reintegration as a US-based nurse returning to work in the Philippines involved adapting to the differences in healthcare systems. I had become accustomed to the readily available resources and advanced technology in US hospitals. Upon returning, I found myself challenged by the resource limitations and different protocols in place. For example, the documentation methods were different, and I had to adjust to a higher patient-to-nurse ratio. I had to revise most of the protocols because they need JCI [Joint Commission International] accreditation. Initially, I felt frustrated by these constraints, as I was used to a certain standard of care. However, I quickly realized that the local nurses were incredibly resourceful and dedicated, finding innovative ways to provide quality care with limited resources. I learned to adapt my approach, seeking guidance from local colleagues and embracing the resourcefulness inherent in the Philippine healthcare setting."

INTERVIEWER: "Beyond that initial adjustment, what other professional challenges and opportunities did you come across during your reintegration?"

INFORMANT 3: "One of the first hurdles I faced was re-entry shock, which involves adjusting to a different work culture, lower salaries, and variations in healthcare systems and protocols. On the other hand, this transition also provides numerous opportunities. I was able to share my expertise gained in the US to mentor local nurses by sharing my experiences. What I learned from Susan reached the Philippines (laughs). This experience taught me the importance of cultural sensitivity and adaptability in nursing. It reinforced my commitment to providing the best possible care, regardless of available resources. This experience highlighted the strength and resilience of Filipino nurses and deepened my appreciation for the unique challenges and rewards of practicing nursing in the Philippines. I'm here now, so I must have the courage and strength to face the challenges (pause). It's hard to be a nurse in the US, but believe me, it's even harder to be a nurse here."

INTERVIEWER: "Given these adjustments and your mentorship role, how would you say your capacity to function as a nurse has been impacted by returning to the Philippines?"

INFORMANT 3: "By integrating my US-based training with the resourcefulness and cultural sensitivity of my workmates at Cavite East Asia Medical Center, I was able to expand my skill set and become a more well-rounded healthcare professional. My unique perspective and experience also gave me a greater capacity to influence and improve patient care and mentor other nurses. Ultimately, it boosted my confidence and that of my colleagues at work, which increased job satisfaction and a sense of purpose. I am one of those nurses who find life satisfaction in fulfilling a calling to care. My sense of purpose is deeply rooted in the desire to provide compassionate care, advocate for patients, and make a positive impact on their lives. It's about being present in moments of vulnerability, offering comfort, and empowering individuals to navigate their health journeys."

INTERVIEWER: "I definitely agree, nursing is either a calling or a choice, but whatever your initial motivation, the caring aspect of nursing can transform a career choice into a calling."

INFORMANT 3: "Yes, that is exactly what I meant; ultimately, the significance lies in the individual's experience and the meaning they find in the profession. To some, the motivation for becoming a nurse was a

career choice, attracted by job security and advancement opportunities, which is why they leave the country; the ability to provide meaningful care to patients comes last. But as a mentor, I always tell my mentees to treat their patients as their own family. They leave their family in the Philippines, so if they get sick, who will take care of them? So, if you treat your patient as your mom, dad, sibling, or your own child, you won't be afraid that those you left behind in the Philippines will get sick, because you yourself are kind to your patients, and God will always make sure to look after your loved ones. He will also give your family a kind and caring nurse, just like you."

INTERVIEWER: "I truly appreciate you sharing your journey. It's admirable to see such humility in a US-trained nurse. Reflecting on your experience of returning to the Philippines, what key insights have you gained from this chapter in your career?"

INFORMANT 3: "The opportunities to share my expertise, also to advocate for improved standards, and of course, to mentor local nurses. This journey of coming back reinforces a deeper sense of purpose, rooted in making a tangible difference in patients' lives and contributing to a healthier community. Also, I've come to deeply appreciate the resourcefulness and dedication of Filipino nurses. They are able to provide quality care even with limited resources, and this is admirable. I've realized that sharing my knowledge and experience from the US can be valuable in mentoring local nurses and improving patient care.

INTERVIEWER: "Considering the challenges, opportunities, and the sense of purpose you've described, what are your feelings as you look back on this experience?"

INFORMANT 3: "Reflecting on my current work situation, one sentiment that often surfaces is the desire for greater work-life balance. Balancing the demands of work with personal commitments can be challenging. You also need to unwind or go out, but after a 12-hour shift, you can only manage to go to the grocery store (laughs). The traffic alone is tiring, and Cavite is so congested, so it's really hard to achieve that work-life balance. I still go out, it's just expensive."

INTERVIEWER: "Given those sentiments about work-life balance, in what ways do you think this experience has shaped your perspective on your career and your priorities in life?"

INFORMANT 3: "Achieving work-life balance as a nurse involves intentionally managing your time and energy to accommodate both your professional duties and personal life. Even before, it was already difficult to balance, but with the holidays, my husband and I used to go out often. But we seldom travel far, usually just with friends. I traveled to New York because we have friends there, and also to Texas and Illinois. I think in the Philippines' setup, we can only go to malls; that's probably why we have so many malls here (laughs). The salary is not enough. Where else are you going to get money to go out? That's why nurses' salaries should be increased. Before, they were already low, but now, even if they've increased, the prices of goods have also increased, so it's like nothing has changed. That's why you can't blame so many nurses for leaving because of salary disputes. Why is it that nurses' salaries are so low here? Whether in government or private institutions? Nurses have no choice but to leave the country. But me, to be honest, I still really want to spend my senior years here because my husband and I don't have children. Even before he passed away, we always shared the same feeling of spending our senior years here because of our siblings and relatives.

INTERVIEWER: "You talked about wanting to be near your siblings and relatives, and instilling Filipino values in the next generation. Beyond those family connections, what other reasons factored into your decision to stay in the Philippines permanently?"

INFORMANT 3: "To be honest, I feel a sense of responsibility. I have experience and expertise to share with local nurses. So, even with the lower salary and the struggles with work-life balance, the sense of family, culture, and purpose keeps me rooted here. I'm happy with my decision to come back and stay."

Interview Transcript (Translated) Informant 4

DATE & TIME OF THE INTERVIEW: 4/21/2025 at 7PM



Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

KMF/ 40/ 6 years/ Came back 2022

INTERVIEWER: What was your work here in the Philippines before you worked abroad?"

INFORMANT 4: "I worked at Asia-Pacific Eye Center, and my exposure was cataract surgery, glaucoma, and LASIK procedures, which were only day cases because the patients weren't admitted. I wanted to go to the UAE to save money. My boyfriend was working in Dubai, and I needed to take an exam before I could go to the UAE. Then, a friend of mine referred me to her agency so I could apply and start the process. After passing the HAAD (Health Authority Abu Dhabi) exam, I applied to ABBA (agency), so long story short, I ended up in Abu Dhabi."

INTERVIEWER: You mentioned working in Abu Dhabi after your time at Asia-Pacific Eye Center. How would you describe your nursing practice while you were working abroad?

INFORMANT 4: "I was assigned to the Ophthalmology Department at Sheikh Khalifa Medical Center, which caters to all eye-related illnesses, including eye cancer. SKMC is large; it's the flagship tertiary hospital in the UAE and the largest teaching medical center in Abu Dhabi. SKMC has 16 OPD Specialty clinics. These include Cardiology, Nephrology, Neurology, Orthopedics, Dermatology, Endocrinology, Urology, Rehabilitation, Nutrition, OB-Gynecology, and Pediatrics. You name it, we have it (laughs)."

INTERVIEWER: What cases in particular have you handled?

INFORMANT 4: "I handled a wide range of eye-related conditions, which include visual acuity checkups, management of ocular surface diseases like dry eye and conjunctivitis. We also have glaucoma evaluation and treatment, and retina conditions such as hypertensive retinopathy and diabetic retinopathy. We also have strabismus and neuro-ophthalmology cases. We have an OR theater equipped with up-to-date surgical machines and microscopes.

INTERVIEWER: "You've had such a diverse career. If you had to pick one moment or period that felt like the peak, what would it be?"

INFORMANT 4: "Our eye specialists at Sheikh Khalifa taught us how to view under the microscope so we could master the skills to view the slit lamp. It's a special microscope with a bright light attached, so we can view the different parts of the patient's eyes. This skill is needed in the OR theater, so they train us to be experts on this machine. At AsPac, only the ophthalmologists use this machine, so there's really a difference. That's why, when I last came home before the pandemic, in 2018, I visited AsPac and told one of our closest ophthalmologists that, at Sheikh Khalifa, I was trained to use the slit lamp. He was amazed, and we decided to have one of our

administrators help us demonstrate it to the nurses. I was just so happy because I was able to help my former colleagues with skills they can use when needed."

INTERVIEWER: "During your time in Abu Dhabi, how many times did you manage to come home to the Philippines for visits?"

INFORMANT 4: "Because my contract included a yearly vacation, I came home to the Philippines annually. I was obligated to take a yearly vacation because my parents were alone at home at the time, as my elder sister had also gotten married. But she lives nearby, so it was okay with my parents. It was during the pandemic that I wasn't able to come home for 3 years; the pandemic was no joke. Because we didn't have patients in Ophthalmology, there were no OR cases; we were rotated to bedside and floated to different wards.

We were the frontliners, and the sacrifice we had to endure was unimaginable. Imagine having to work in a different ward where you don't know the protocols? Having to learn everything because it's needed right away? Of course, it's a different department, different protocols, medications, and setup. The only thing you can do is depend on yourself and hope that you will not harm any patient.

We were given patients and tasks, and we needed to complete them within a specific time to get the job done. We couldn't stay exposed for long; we were only in PPE for a maximum of 6 hours, and then our duty for the day was done. I was exposed to COVID twice, so I'm very thankful that I worked at Sheikh Khalifa hospital because they provided excellent protective equipment, prioritized our safety, and offered comprehensive support during a very difficult and uncertain time."

INTERVIEWER: "You've described your experiences working in Abu Dhabi, including the challenges of the pandemic. What circumstances eventually led you to come back to the Philippines?"

INFORMANT 4: "The main reason why I decided to come home was that my husband and I had saved enough for a down payment on a house and for our wedding. My husband had been in Dubai for a long time, but when I decided to get married, I wanted to help with the expenses, so I also decided to work abroad. So, it was just about saving enough so we wouldn't have any debt; it's hard to sleep soundly when you have debt (laughs)."

INTERVIEWER: "If you're comfortable sharing, how do you find married life?"

INFORMANT 4: "I found love, support, and companionship in marriage. I was happy even when I was single, but when I turned 30, I started to wonder if I would ever get married or become a mommy. My parents and my elder sister encouraged me that if budget was the only problem, I could work overseas to help with the expenses, so that's what happened. I came home in January 2022, and I got married in December 2022, so while waiting, I applied to Unihealth Southwoods Hospital here in Binan, Laguna, because it's very close to the condo we live in. I am currently working at the Medical Ward. It will be 3 years this June 2025 that I've been here."

INTERVIEWER: "After working abroad and then returning, what was a particularly memorable or striking personal experience you had as you reintegrated into life here?"

INFORMANT 4: "The experience of being the only senior nurse on the shift and having only new nurses as your colleagues. A lot of senior nurses left last year, and sadly, mostly novices were left behind. Unlike abroad, where there's preceptorship, here in the Philippines, due to the nursing shortage, even those without experience are immediately assigned patients to handle.

Before you are given a patient abroad, you have to be competent in every task. But here, it's scary because it's the opposite. So, as the senior nurse, I'm the 'know-it-all' or 'go-to nurse' on every shift (sighs). Also, with some of the new nurses, you have to use the sandwich approach when giving feedback. They should only hear positive statements. I am on board with fostering open communication, but sometimes you have to openly tell them the blunt truth.

That's where I struggle a bit with them, but I still tell them what areas need improvement; otherwise, we're just being fake here, right?"



INTERVIEWER: "I understand you're aiming for a good balance between constructive feedback and honest communication. Is there anything else you feel is important to share regarding this situation or your overall reintegration experience?"

INFORMANT 4: "I also think that the lack of self-confidence in novice nurses reduces the quality of care that they give to the patient. I have heard that some of those who left were only 2 years at their bedside, so it's like this is just a training hospital for those who plan to work overseas. It's the reality now, isn't it? Before, agencies required 4 years of experience before I could leave, but now it seems even 2 years is enough. It's very difficult to train nurses; it was already a challenge being understaffed before, but it's even harder now because we're understaffed and surrounded by newcomers."

INTERVIEWER: "You mentioned some differences in nursing practices between Abu Dhabi and the Philippines. What professional challenges have you had to adapt to, and what new opportunities have you discovered since your return?"

INFORMANT 4: "Challenges? The shortage of staff and experienced nurses. I think that a shortage of experienced nurses means that new graduates may not receive the mentoring and support they need. The lack of confidence among novice nurses can be addressed by providing adequate supervision. So, mentorship is a great solution, but how? (pause). On every shift, there are 6 of us nurses, and we look after up to 10 patients. I'm the only senior, meaning I have more than 5 years of bedside experience; some have 3, and the majority have less than a year. So, let's do the math (laughs); of course, I get the patients that need monitoring; the patients aren't evenly distributed because you're afraid there might be an incident report the next day. It's really hard; just thinking about it makes me not want to think anymore (sigh). But we thrive because this is what we were born to do. Opportunities? They provide training to reduce the knowledge and skills gap of the new nurses. I know they have the knowledge, but what's lacking is the skills, so that's what we need to improve."

INTERVIEWER: "Considering the current environment, how has this affected your overall well-being and your capacity to function as a nurse?"

INFORMANT 4: "I'm having a hard time balancing my time at home and at work because sometimes the 12 hours are not followed. My husband gets angry that he always has to pick me up late at night. But the good thing is overtime is paid, but still, what about work-life balance? Especially since I'm newlywed and planning to start a family. It's already difficult now; how much more will it be when I have a baby? The long hours and lack of sleep are starting to take a toll on my physical health, and I'm worried that this could lead to errors in patient care. It's challenging to maintain the energy and focus needed to handle the demands of the job when I'm constantly running on empty."

INTERVIEWER: Reflecting on these challenges and the impact on your work-life balance, what key insights have you gained from this experience so far?"

INFORMANT 4: "Honestly, this experience has really highlighted the importance of systemic support for nurses. It's not enough to just be 'passionate' or 'born to do this' mantra. We need better staffing ratios, more experienced mentors for new grads, and genuine consideration for work-life balance.

Otherwise, we're setting nurses up for burnout and ultimately compromising patient care. I've also realized that I need to advocate for myself and set boundaries. As much as I care about my patients, I can't sacrifice my own well-being and my family's needs. It's a tough lesson, but I'm learning to say 'no' when I'm stretched too thin and to prioritize my own health. Finally, I think this experience has reinforced the need for nurses to support each other. We need to create a culture of open communication, where we can share our struggles and offer each other practical help and emotional support. We're all in this together, and we need to look out for each other."

INTERVIEWER: "Thinking about the adjustments you've made and the obstacles you've overcome, what are your strongest sentiments when you look back on your experiences?"



INFORMANT 4: "Looking back, there's a mix of emotions. I'm proud of the resilience and dedication I've shown. We manage to provide care under incredibly difficult circumstances, and that says a lot about the nurses here. But there's also frustration, definitely. Frustration that the system isn't set up to support us, and that we're constantly having to fight for basic things like adequate staffing and resources. There's also a sense of worry. I worry about the future of nursing, about burnout, and about the impact on patient care if things don't improve. But overall, there's still hope. Hope that things can change, that our voices will be heard, and that we can create a better working environment for ourselves and provide even better care for our patients."

INTERVIEWER: "Having gone through these experiences, both positive and challenging, how do you feel this has shaped you as a nurse and as a person?"

INFORMANT 4: "This whole journey has made me realize the importance of finding purpose and fulfillment in my work beyond just the paycheck. Seeing how much a supportive, appreciative work environment can impact nurses' well-being has really solidified my commitment to fostering that culture wherever I go. I believe that when we are recognized and appreciated at work, it manifests in our psychological health. Our job brings us satisfaction, and, of course, many nurses will excel when they are appreciated. The movement to other countries will decrease, and retention will increase. I still remember my salary at AsPac was the bare minimum, but I stayed there for a long time because we were appreciated and valued, and my colleagues were kind. Here at Unihealth, we strive to foster empathy, compassion, helpfulness, and kindness in our workplace. You know, you'd go on duty because you like your colleagues? That's what we always aim for daily. Our job is stressful as it is, so we create a place that reduces stress. Oh well, if there was a massage included, that would be perfect (laughs)."

INTERVIEWER: "Considering your experiences both abroad and back in the Philippines, what ultimately led to your decision to stay here for good?"

INFORMANT 4: "Ultimately, the decision to stay in the Philippines comes down to family. We secured a condo while working in Abu Dhabi, and my husband found a job nearby, which was a big factor. But more importantly, my parents are getting older and need me here. I want to be here for them."

"Looking ahead, I also dream of starting a family, and I want my child to grow up knowing my parents and our culture. So, while things might change if my husband struggles financially, my heart is set on building our life here in the Philippines."

Interview Transcript (Translated) Informant 5

DATE & TIME OF THE INTERVIEW: 4/25/2025 at 7PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?



Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

VWN/ 42/ 6 years/ Came back 2020

INTERVIEWER: "Sir V, could you tell me a bit about what motivated your decision to work overseas?"

INFORMANT 5: As the eldest child, the primary reason why I decided to work abroad was so I could earn more for my family. I wanted to provide.

Another reason is that I've always wanted to "see the world," to know what lies beyond the horizon(laughs).

INTERVIEWER: Can you also share which country you decided to work in?

INFORMANT 5: "I initially wanted to go to Saudi Arabia, Qatar, or anywhere. I was desperate at that time because I was almost the only one left among my acquaintances. An opportunity arose in 2013 when the German government announced it would hire foreign nurses through the Triple Win program. I immediately applied and passed the first requirement of the program: the B1 Language exam. By early 2014, I was sent to Tübingen, Germany, for the familiarization phase of the program, where I was trained for 6 months. The struggle is real when you're in another country with a different language. During those 6 months of training, I was scared of answering the phone at work. The language was hard, really hard. During every shift, I would write down words I did not know and learn the meaning at home. Every day was a challenge, so while I was there, I studied to become proficient in the German language, not just the basic level I learned before I left."

INTERVIEWER: "So, language was definitely a challenge. What other hurdles did you have to overcome while working in Germany as a nurse?"

INFORMANT 5: "Cultural integration and the weather (laughs). The culture has been challenging because Germans are more serious, straightforward, and disciplined. I'm a bit of a joker, always laughing, and I enjoy being with friends, even back home. After 2 years in Germany, I felt I was starting to adjust to their culture. At work, the Germans are kind; they're just straightforward. The German doctors and nurses are a bit strict, and some aren't approachable. It's also cold, so it's hard to adjust, especially during December, January, and February. We felt like hot dogs in a chiller (laughs), but we adjusted eventually."

INTERVIEWER: "So, considering those cultural and climate adjustments, how would you describe your nursing practice in Germany overall? What were some of the key aspects of your role and responsibilities?"

INFORMANT 5: "I handle adult patients in a neurosurgery male ward. I worked 5 days a week, and the maximum patient ratio was 1:8. So, it's really tiring. When I got hired, they asked me if I was good at lifting patients, of course, I immediately said yes because I wanted to leave [the Philippines] so badly (laughs). The reason they asked me that in the interview was because I would be handling male patients who are bigger than the beds in our ER in the Philippines (laughs). Some patients could weigh 300 lbs, so patient transfer from the bed to a wheelchair was a real struggle. German patients are much more dependent on nurses. Since their family members are at work, they depend on the nurses for everything. The majority of my patients are non-ambulatory; they need assistance due to chronic illness, and some due to previous injuries that affected their ability to walk. This level of dependence was something I had to adjust to, as it required a different approach to patient interaction and communication compared to what I was used to."

INTERVIEWER: "You mentioned you worked 5 days per week, and you also mentioned earlier that one reason why you wanted to work abroad was to 'see the world.' So, were you able to squeeze in some time to explore on your days off?"

INFORMANT 5: "Oh, yes, of course! (laughs) That's why I was very frugal with my budget, because I really made it a point to travel to nearby cities near where I was working. But my travels were always within budget because I was also sending money to my two siblings who were in college at the time, and providing financial

assistance to my mother, who was on dialysis. That's really why I went abroad. That was my personal motivation for working in Germany: to provide for my siblings and my mother, who was on dialysis. I just thought about how blessed I am to actually be working in Germany and be able to provide for my family. I always remind myself that there are many people who would do anything to get to where I am, so I need to be thankful. I also reminded myself that nothing in life comes easy. If we want to achieve great things, we all have to go through challenges and make great sacrifices. Thinking about my mom also gives me strength. My father passed away when I was 10, leaving my mother to work hard to pay for my Nursing education. So, whenever

I feel tired, I think about what she's been through and how she gave me a great life. That's why I'm staying strong—I owe her that. That's why in 2019, during the pandemic, when she had complications because she couldn't get dialysis due to the lockdown, I immediately asked her to go home. I was so worried that something bad might happen, and they allowed me to go home quickly because I didn't take a long leave."

INTERVIEWER: "Given what you shared about your mother's dialysis and the challenges during the pandemic, was that a key factor in your decision to return from Germany?"

INFORMANT 5: "Yes, knowing that a family member is sick back home, and you can't do anything but pray for them, was the hardest thing I had to deal with. My mother was already a senior citizen during the lockdown, and she really couldn't go out, so I went home in January of 2020. She needed dialysis sessions every week; luckily, in Cavite, there were nearby dialysis centers, so her dialysis schedule continued without interruption. Also, because I'm in the medical profession, we just showed our IDs, and we could travel to nearby cities, especially for medical emergencies. I was afraid to work during the pandemic because of my mother's condition, while waiting for an opportunity to return to bedside nursing, I worked online as a virtual assistant. Because my return was sudden and I couldn't return to my job in Germany right away, I resigned from my overseas position. There was really no choice; there was nothing else I could do because of the pandemic. I was planning on going back, but my mother's condition continued to deteriorate, so I'm still here in the Philippines. While caring for my mother, I applied at De La Salle Medical Center and was hired as an ER nurse.

INTERVIEWER: "We've talked about the challenges you faced returning to the Philippines to care for your mother. Now that you've been back for a while, what personal experience stood out from that reintegration process?"

INFORMANT 5: "One thing that really stood out during my reintegration was realizing how much I had grown, both professionally and personally. While there was definitely some pressure to meet expectations, I also felt a sense of pride in bringing new perspectives and skills back to the Philippines. I was able to integrate some of the practices I learned in Germany into my work here, particularly in terms of patient care and teamwork. It was also interesting to see the similarities and differences between the healthcare systems. Of course, adjusting to the longer working hours and different resource levels was a challenge, but overall, it's been a rewarding experience to be back and contribute to the healthcare system here at home."

INTERVIEWER: "We've touched on both the positive and negative aspects of your reintegration. In terms of your professional life, what have been some of the biggest challenges you've faced, and what new opportunities have presented themselves?"

INFORMANT 5: "Understaffing and low salary are still the biggest challenges for me, especially since I've experienced a higher salary. Salary really makes a big difference. But I'm also grateful for the opportunity to grow professionally, and that's where becoming a preceptor comes in. Before, I was shy; I was afraid to teach for fear of being judged, but after working overseas, I overcame that shyness (laughs). It's exciting to see my own skills develop as I guide and mentor new nurses."

INTERVIEWER: "So, considering these challenges with understaffing and salary, and this opportunity to be a preceptor, how has all of this impacted your capacity to function as a nurse on a day-to-day basis?"

INFORMANT 5: "I am resilient, so it's not new to me. If there is one thing I am worried about, it is that my savings are depleted, but they went to my mother, who is sick. My siblings are both working, so they are helping

with our expenses. That's why I don't have any plans to go back abroad because I want to enjoy having my siblings treat me (laughs). This whole experience has really shaped my perspective as a nurse, and it's made me appreciate the importance of both personal well-being and family support. I am really blessed with all the opportunities I have received, but with these opportunities come great sacrifices. There are many times that I really want to give up, but then I realize the main reason why I'm doing this in the first place – myself and my family. So now that I am back, I want to make the most of my time with my family. I was just 10 years old when my father passed away, and my siblings never got to know him, so I am like the man of the house, which is why I'm happy to be here in the Philippines."

INTERVIEWER: "Given everything you've been through, and the insights you've gained about family, sacrifice, and the nursing profession, what lasting lessons or insights do you think you'll carry forward in your career and life?"

INFORMANT 5: "This experience has really reinforced the importance of advocating for patients and their families. I've seen firsthand how difficult it can be to navigate the healthcare system, especially when you're dealing with illness and financial stress. Moving forward, I want to be a stronger advocate for my patients, ensuring they have access to the resources and support they need."

INTERVIEWER: "You've given us a glimpse into a very personal and transformative experience. Looking back on this journey, what are your prevailing sentiments and emotions?"

INFORMANT 5: "I think the strongest sentiment I have is one of hope. Despite the hardships, I'm hopeful for the future. I'm hopeful that my mom's health will continue to improve, hopeful that my siblings and I will continue to support each other, and hopeful that I can use my experiences to make a positive impact in my nursing career. I'm ready to move forward with a renewed sense of purpose. Regarding my work, I feel a sense of both gratitude and frustration. I'm grateful for the opportunities I've had to grow as a nurse and to make a difference in people's lives. But I'm also frustrated by the challenges within the healthcare system, the long hours, and the emotional toll it can take. I hope that things will improve in the future, but I'm committed to doing my part to make a positive change."

INTERVIEWER: "You've mentioned the gratitude, frustration, and renewed purpose you've found. In what specific ways do you feel this experience has shaped you, both personally and professionally?"

INFORMANT 5: "I bounce back when there's hardship, and I don't dwell on the problem, which again is a characteristic of a resilient nurse. Think about this, you might have a high salary, but your expenses are also high; compared to having a low salary, but you make it work. I am happy where I am in my life, like I mentioned, I enjoyed [time with] my siblings who treated me. They said this is their way of giving back, which, if I were abroad, I wouldn't experience. It's about adapting to what life throws at you and finding the silver linings, right? That ability to adapt is crucial, especially in nursing."

INTERVIEWER: "It's inspiring to hear how you've found a sense of peace and gratitude in your current situation. It seems this experience has shaped you by strengthening your resilience, your adaptability, and your appreciation for the simple things in life, such as the support of your family. Do you think this experience has also influenced your approach to patient care in any way?"

INFORMANT 5: "I think it's made me a better advocate for my patients. I'm more willing to go the extra mile to ensure they get the resources and support they need. I understand that navigating the healthcare system can be overwhelming, so I try to be a guide and a resource for them."

INTERVIEWER: "We've talked about how this experience has shaped you and your perspective. So, what ultimately led you to the decision to stay for good, rather than pursuing opportunities elsewhere?"

INFORMANT 5: "My ailing mother and my siblings are the reasons why I decided to come home and stay. I want to spend quality time with them, even if life is difficult, as long as I'm with my mother. Despite the perks of working abroad, there are times when you would really feel lonely. Days when you are stressed with your



work, and you also have to deal with homesickness, that's what's difficult (laughs). I missed my life back in the Philippines despite the hardships that we experience in our country."

Interview Transcript (Translated) Informant 6

DATE & TIME OF THE INTERVIEW: 4/28/2025 at 7PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

MSG/ 44/ 6 years/ Came back 2022

INTERVIEWER: Can you tell me more about the circumstances that led you to decide to work abroad?

INFORMANT 6: "It was for our son's medical expenses and schooling fees. Working overseas was the biggest decision I had to make at that time. My husband and I had to think it through many times. There was resistance from my parents because they thought my husband should be the one to leave, not me. My husband had just been promoted to junior partner at a law firm, so he couldn't easily decide to leave. I was the one who insisted on leaving because I had a younger sibling working in the UAE. He sponsored me to take the DHA exam, and I passed. I wanted my parents to see the bigger picture—I needed to think of my son's future. I was haunted by the thought of what if we didn't try? My son needs special education because he was behind his age in development; at 4 years old, he still wasn't speaking clearly.

We noticed this delay in milestones when he was 2 years old, and we consulted a neuro-developmental doctor who recommended that our son undergo speech therapy. The cost of the therapy was a bit expensive, and he was in preschool, so my husband's salary wasn't enough to cover all the expenses. Now that Sean is ten and doing so well, I feel comfortable returning home. My husband's career has also progressed to the point where he's a senior partner, and his income sufficiently covers Sean's education. We're happy he's thriving in his progressive school (laughs)."

INTERVIEWER: "It's wonderful to hear that things are going well. You mentioned the DHA exam; does that mean you were working in Dubai? Could you also share some of your experiences working there?"

INFORMANT 6: "Life in Dubai offers a lot of opportunities and a high quality of life. For nurses, in particular, the benefits can be quite attractive – free accommodation, car service, and a food allowance are common. In the hospital setting, meals are typically provided. I found the Emiratis to be very pleasant, kind, and easy to approach. There's a strong emphasis on education for women, and I appreciated the respect that locals showed towards people of all nationalities."

INTERVIEWER: "What was it like being a nurse in Dubai from a work perspective? Can you also describe a typical day or a particularly memorable experience?"

INFORMANT 6: "Working as a nurse in Dubai was a significant step in my career. I was able to expand my skills and knowledge in a supportive environment. The hospitals there are often well-equipped, and there's a strong emphasis on evidence-based practice. A typical day involved a mix of direct patient care, documentation, and participation in quality improvement initiatives. The biggest challenges were definitely the cultural differences, being in an Arab community, and the weather (laughs). You know, things like religion, food, customs, and public behavior are quite different. While Dubai is very modern, within the hospital environment, we had to learn and adapt to many traditional practices. And of course, the intense heat was a constant struggle (laughs)! Professionally, the multicultural environment presented its own set of challenges. The Middle East is known for its progressive approach to healthcare, which is often on par with European standards. They have a well-established healthcare system, so as an overseas nurse, you have to adjust to their methods and learn to navigate those challenges. As a Filipino nurse working abroad for the first time, I definitely experienced some culture shock as I tried to fit in. But after a year, I found my footing (laughs)."

INTERVIEWER: "That's a really insightful overview. Building on that, how would you generally describe your practice as a nurse while you were working abroad in Dubai?"

INFORMANT 6: "I was assigned to the OB-Gynecology ward. Most of the local Emirati patients know how to speak English, so the language wasn't too much of a barrier, although we were obliged to learn Arabic for those patients who didn't speak English. In Dubai, ultrasounds are more frequent than in the Philippines, whether the pregnancy is normal or not. They also choose doulas as their support system – because they can choose if they want a birth doula or a postpartum doula. It's like a midwife, in our terms? Some doctors even recommend this to their patients. My bedside experience was difficult at first, but my seniors were supportive, so after a year, I was able to adjust."

INTERVIEWER: "So, earlier you mentioned that you came back because your husband's salary was enough to cover your son's medical and school expenses. Was that the main reason for your return?"

INFORMANT 6: "Yes, absolutely, after six long years of being away from my son, I decided it was time to come home. My son was my biggest motivation. We made sure to have video calls every single day, so I was always up to date on how he was doing and improving. I remember when they finally started allowing travel again in December 2022. Things were still pretty strict with the COVID pandemic, but I really pushed to come home because I missed my son so much. I couldn't get home at all during the pandemic, so in those six years, I only managed to visit three times. I just missed Sean so much."

INTERVIEWER: "So, after you returned home, did you take some time to rest and focus on Sean, or did you go back to work immediately?"

INFORMANT 6: "I took a year-long break when I first got back because the pandemic was still ongoing. Then, in January 2023, I applied to Calamba Medical Center because they had a job opening. I've been working at CMC ever since, although I've moved to the OR-DR – that's the Operating Room and Delivery Room. The working environment is better in some ways, but it can still be pretty toxic. We have a high volume of patients, but at least I'm not doing bedside care anymore."

INTERVIEWER: "Given everything you've shared about adjusting back to life in the Philippines and starting at CMC, what's one personal experience that really stands out in your mind from that reintegration period?"

INFORMANT 6: "The biggest thing that stood out was the difference in the healthcare system. Working in OR-DR was a bit of a shock. Resources were limited, and the workload was intense. I remember one particular shift when we were so short-staffed that it felt like we were constantly running. It was a stark reminder of the challenges our healthcare workers face here. It's still the lack of provisions for decent wages, a safe nurse-patient ratio, and employment benefit packages. Nothing has changed. Currently, at CMC, we have a high patient census in the OR-DR and a lot of overtime, but often it's offset by off days when it's not busy. I'm just enduring it

because I'm a senior nurse, and I'm here for Sean. Our benefits aren't that great either. I experienced dental, optical, and even wart removal being covered for free on our cards in Dubai, so I've become a bit spoiled, and I'm looking for that now (laughs). But seriously, there are few opportunities for nurses here in the Philippines, and there's still a lot of room for improvement in working conditions. It's ironic that we're the top producer of top-quality nursing professionals for other countries, yet we're severely lacking at the bedside."

INTERVIEWER: You've touched on some of the challenges you're facing at CMC, particularly regarding wages and benefits. Could you elaborate on some of the other professional challenges and opportunities you've encountered since returning to the Philippines?

INFORMANT 6: "The challenges include things like limited resources, heavy workloads, understaffing, low salary, and the need to constantly update our skills. On the other hand, there are opportunities to take on leadership roles, participate in research, and advocate for better working conditions. There's also a growing recognition of the importance of mental health and well-being for nurses, which I think is a positive step. Personally, one of the biggest challenges has been adapting to a different working culture. In Dubai, things were often more structured and standardized. Here, there's more flexibility, but it can sometimes lead to inconsistencies. One of the opportunities I've found is the chance to use my experience from abroad to help improve processes and protocols in the OR-DR, and to share best practices I learned in Dubai."

INTERVIEWER: Considering both the challenges and opportunities you've encountered, how has this whole experience influenced your capacity to function as a nurse and to adapt to the demands of your role at CMC?

INFORMANT 6: "It's been a mixed bag. On one hand, the challenges have definitely pushed me to my limits at times. The heavy workload and limited resources can make it difficult to provide the level of care I'd ideally like to give. It's forced me to be more resourceful, to prioritize effectively, and to rely on my colleagues for support. On the other hand, the opportunities to mentor younger nurses and contributing to process improvements have been really empowering. It's given me a sense of purpose and has helped me stay motivated despite the difficulties. I am one of the senior nurses who gives feedback during meetings with the administration. I'm practically a liaison office now (laughs). If there is a need for training to supplement lacking skills, we propose it to the administration so a slot can be made and a budget allocated."

Providing free training to hone our skills adds a boost, so no matter where you're floated, you know something. Because sometimes, we're also floated to special areas like the ICU and NICU. So, we are able to function fully with these scenarios."

INTERVIEWER: Reflecting on your experience of adapting to the working conditions at CMC and taking on a leadership role, what significant insights can you draw from this journey?

INFORMANT 6: "I've realized that even small contributions can make a big difference. By providing feedback to the administration, proposing training programs, and mentoring younger nurses, I've helped improve the quality of care and the overall work experience. Also, I've learned that leadership isn't about having all the answers, but about empowering others to reach their full potential. This experience has reinforced my belief in the importance of continuous learning and professional development. Healthcare is constantly evolving, and it's crucial to stay up to date on the latest advancements and best practices. Also, I've learned the value of seeking out opportunities for growth, whether it's through formal training or informal mentorship."

INTERVIEWER: After reflecting on your journey at CMC and the various challenges and opportunities you've encountered, what are your overall sentiments about your experience?"

INFORMANT 6: "I feel a sense of pride and accomplishment. I'm proud of the way I've adapted to the working conditions at CMC and the contributions I've made to improving patient care. I've also learned a lot about myself and my capabilities, and I'm excited to continue growing and developing as a nurse."

INTERVIEWER: Looking back at the obstacles you've overcome and the contributions you've made at CMC, how has this experience molded your approach to nursing and your overall perspective on life?"



INFORMANT 6: "This experience has instilled in me a stronger sense of advocacy. Seeing the challenges firsthand has made me more determined to speak up for my patients and my colleagues. I've also learned the importance of continuous learning and seeking out opportunities for growth, both personally and professionally, as that ultimately benefits those we serve."

INTERVIEWER: Given your experiences adapting to the challenges and contributing to improvements at CMC, what ultimately solidified your decision to stay there permanently?

INFORMANT 6: "Well, on a personal level, wanting to be close to my son was definitely a driving force in my decision to come back, and it remains a very important reason for me to stay. But beyond that, there are several work-related factors that have solidified my commitment to CMC. I've found a real sense of purpose in contributing to the improvements we've made in our unit. Seeing the positive impact of our efforts on patient care and the work environment has been incredibly rewarding. I also appreciate the professional growth opportunities CMC offers. I am an advocate for improving our skills, and I think CMC offers possibilities for this."

Interview Transcript (Translated) Informant 7

DATE & TIME OF THE INTERVIEW: 5/10/2025 at 9PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

FMB/ 36/ 8 years/ Came back 2020

INTERVIEWER: Can you share why you decided to work abroad? INFORMANT 7: "Working abroad has always been my goal—even when

I was in college. At first, I thought I'd be heading to Saudi Arabia because I have many relatives there, but after graduating, I met my boyfriend and decided to stay. I hopped from one job to another, all of which were unrelated to my degree. My boyfriend then asked me to live with him, and we were planning to start a family, but my mother was against it. She wanted me to save first before I decided to settle down. She was right, so I talked to my boyfriend about saving up first, even just for a down payment on a house, so we could secure our future. I volunteered for 2 years at a provincial hospital near us, but I worked hard without pay. So, when I passed the HAAD, I applied to an agency, and that's how I ended up going abroad."

INTERVIEWER: Could you also share your experiences working in Abu Dhabi? What was life like for you there?"



INFORMANT 7: "Working in Abu Dhabi was a really unique experience. Professionally, I found the healthcare system to be quite advanced in some ways, with access to cutting-edge technology. However, it also came with its own set of challenges, like adapting to different cultural norms and communication styles in the workplace. The compensation was good, which allowed me to save money and send some back home. However, the work environment could be quite demanding, and the cost of living was relatively high. On a personal level, being away from my family and friends was tough at times. I had to learn to do things on my own. I cook my own food and do my own laundry even when I'm exhausted because no one will do it for me. I try my best to stay healthy to avoid getting sick. I've also made peace with the fact that, sometimes, I have to spend holidays alone. It took some time to adjust, but overall, I'm grateful for the experience."

INTERVIEWER: "Where were you assigned in the hospital? Was it a ward or a special area? How would you describe your practice abroad?"

INFORMANT 7: "My practice abroad in the NICU was characterized by a high level of specialized care for newborns. We used advanced technology to manage critical cases, and the one-to-one patient ratio allowed for focused attention. The 24/7 pediatrician support also made the adjustment period smoother. I'd say my practice abroad was progressive and collaborative. The emphasis on teamwork and continuous learning created a dynamic environment. I was able to enhance my skills and knowledge while contributing to the well-being of vulnerable newborns. Now I am happy to teach my co-nurses what I learned. I also had the opportunity to apply evidence-based practices and see positive outcomes in newborn care. The supportive work environment where everyone was treated equally regardless of their nationality, making it a positive and inclusive experience."

INTERVIEWER: "Considering how much you enjoyed your work in Abu Dhabi and the positive aspects of your practice, what circumstances led you to come back?"

INFORMANT 7: "My motivation was to save enough money before I got married, and the main reason why I also left was homesickness. I know most of you will agree with me if I say that homesickness is the number one struggle for OFW nurses. Especially for those who have never been away from their family, friends, and loved ones. It's not easy to start living and working in a foreign country for the first time. I know some people who tried their best to work abroad, but once they were living the dream, they decided to go back to the Philippines because they couldn't handle the loneliness of being away from their loved ones. Working overseas is not for the faint of heart. It requires a lot of courage to overcome the strong urge to be with your family during holidays and important events. But sometimes you can't just fly back home because you might not have any vacation leave available, or the airline ticket is too expensive. It's a constant struggle, and the feeling of homesickness is always there, reminding you of the sacrifices you made for a better future."

INTERVIEWER: "After coming back, how long were you in the Philippines before you decided to start working again?"

INFORMANT 7: "After a year, because I was busy being a wifey (laughs), I learned that there was a NICU opening at Westlake Medical Center."

The head nurse was someone I knew from before. I immediately applied, and luckily, I was accepted, so I think I'll really stay here for a long time."

INTERVIEWER: "What's a personal highlight or key experience that you remember most from your reintegration back into the Philippines after working abroad?"

INFORMANT 7: "Well, of course, I felt the difference in salary coming back to the Philippines, although I expected it to be lower compared to what I was earning abroad. But I can adjust! I'm actually pursuing my Master's degree right now, hoping it will boost my salary. At Westlake, we have a one-to-two nurse-to-patient ratio in the NICU, which is manageable, but we often have to float to other areas when the patient load is light. It's okay, though, because there's always someone to endorse you and give you the lowdown on the patients. The hardest part for me is definitely the benefits. Since Westlake is a private hospital, the benefit packages aren't that

great. Especially now that I have a toddler, it feels like all the benefits from our medical card get used up just on vaccines! So, a lot of the other expenses end up being out of pocket."

INTERVIEWER: So, you've shared some insights into the adjustments you've made returning to work. What specific professional challenges have you encountered since starting at Westlake, and have you seen any opportunities for growth or advancement there?"

INFORMANT 7: Well, one of the biggest challenges has been adjusting to the resource limitations. Here, we sometimes have to make do with less equipment or supplies, and that can be frustrating when you're trying to provide the best possible care. Another challenge is the heavier workload, especially when we're short-staffed. It can be physically and emotionally draining. Add to that the lower salary and benefits, and sometimes it can be difficult to deal with the bureaucratic side of things. But there are also opportunities; one of the great things about Westlake is that they really encourage professional development. I'm currently pursuing my Master's degree, and they've been very supportive of that. There are also opportunities to attend seminars and training programs to update our skills. I'm hoping to eventually specialize in a particular area of neonatal care."

INTERVIEWER: With the adjustments you've made returning to work in the Philippines, how have these professional challenges and opportunities affected your capacity to function effectively as a nurse in your current role?"

INFORMANT 7: "Honestly, the biggest impact has been on my time management and prioritization skills. With the heavier workload and occasional resource constraints, I've had to become much more efficient in planning and executing my nursing duties. I've learned to quickly assess what's most critical for each patient and focus my energy there. Additionally, the limited benefits package definitely adds a layer of stress. Knowing that unexpected medical expenses for my toddler could strain our finances makes me more cautious. It's also made me much more proactive about preventive care. I'm diligent about scheduling check-ups and vaccinations to try and avoid more serious and costly health issues down the road."

INTERVIEWER: Having navigated the challenges of working in different healthcare systems, what valuable insights have you gained about the importance of mentorship, support, and collaboration among nurses?"

INFORMANT 7: "Insights? (pause) Well, one of the biggest insights for me is that as a nurse, I have the opportunity to make a really positive impact on people's lives. But it's not just about the patients; it's also about supporting my colleagues. We build connections so that we can lean on each other. You know, having that strong support system is so helpful because if you're working with colleagues that you consider family, it reduces negative outcomes related to work like anxiety, burnout, and even depression. And ultimately, the patients benefit when the nurses have a happy and supportive working relationship."

INTERVIEWER: As you reflect on your experiences back in the Philippines, what are your overall sentiments about your career as a nurse and the path you've taken?

INFORMANT 7: After nearly four years here, it's my impression that Westlake nurses don't feel adequately supported by the administration. This is particularly concerning when advocating for fair wages, reasonable workloads, and safe staffing levels. While these are common struggles in the healthcare industry, I hope Westlake will prioritize these issues. To be honest, there's a part of me that sometimes wonders 'what if?' What if I had stayed abroad? Would I have a better quality of life? But at the end of the day, I know I made the right decision to come back home. There's something special about serving your own community and giving back to the people who need it most."

INTERVIEWER: With this in mind, how did this experience shape you?

INFORMANT 7: I'd say it's given me a stronger sense of purpose. I know that even though the challenges are real, I'm making a difference in people's lives. That keeps me going, even when I'm feeling burnt out or frustrated. I became more involved in meetings with the administration. I plan to stay here for good, so I need to know if



this hospital cares for me, right? So far, they've been doing some things to give us a voice, and that's all we really need – to be heard when we raise our concerns."

INTERVIEWER: I truly appreciate you sharing your point of view, and I've learned a lot from your insights. For my final question, considering your career and family aspirations, have you decided to stay for good?

INFORMANT 7: "It's a tough decision, to be honest. There are definitely things I miss about working abroad, but ultimately, my heart is here. I want to be close to my family and contribute to the healthcare system in the Philippines. So, yes, I think I'm here to stay."

Interview Transcript (Translated) Informant 8

DATE & TIME OF THE INTERVIEW: 5/11/2025 at 9PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

MNS/ 46/ 10 years/ Came back 2020

INTERVIEWER: Can you share the motivations that led you to seek employment overseas?

INFORMANT 8: Well, it wasn't an easy decision, but the main reason I decided to work abroad was financial. As a new graduate in the Philippines, I earned a very low salary – barely enough to cover basic expenses, let alone support my family. I have younger siblings who were still in school, and my parents were struggling to make ends meet. I heard stories from other nurses who had gone abroad and were earning significantly more. They were able to send money home, buy houses for their families, and provide better opportunities for their children. I wanted that for my family, too. I saw it as a way to lift them out of poverty and give them a better future. Of course, there was also the appeal of gaining international experience and expanding my skills. I knew that working in a modern hospital in Saudi Arabia would expose me to a range of medical technologies and practices. I thought it would be a valuable learning experience that would benefit my career in the long run. But honestly, the biggest driver was financial. I felt a sense of responsibility to provide for my family, and working abroad seemed like the most viable option at the time. It was a sacrifice, of course, being away from them. But I believed it was a sacrifice worth making."

INTERVIEWER: Could you describe your experiences while working in Saudi Arabia?

INFORMANT 8: Oh, working in Saudi Arabia was definitely a rollercoaster! I think the biggest thing was the culture shock. As a Filipina nurse, I had to quickly adapt to a completely different way of life, different customs, and a different healthcare system. That alone was incredibly nerve-wracking.

Simple things like going to the grocery store or even just understanding the dress code could be stressful. I remember feeling isolated and homesick at times, especially in the beginning. The hospital where I worked was very modern, with state-of-the-art equipment and facilities. I gained a lot of experience working with different types of patients and medical cases. I also had the opportunity to learn new skills and techniques, which definitely helped me grow as a nurse.

The pay was also significantly better than what I could earn in the Philippines. I was able to send a good portion of my salary home to my family, which made me feel good about supporting them. I was also able to save some money for my future.

INTERVIEWER: Could you describe some of the difficulties you faced both in your personal life and at work?

INFORMANT 8: Adapting to the culture was one of the biggest challenges. Saudi Arabia is a very conservative country, and I had to adjust to their customs and traditions. For example, women are expected to dress modestly and to be accompanied by a male guardian in public. It took some getting used to. The language barrier was also a challenge, especially at first. Although I had some training in Arabic, it wasn't enough to fully communicate with patients and colleagues. I had to learn on the job, which was sometimes frustrating. And of course, being away from my family was the hardest part. I missed them terribly, especially during holidays and special occasions. I tried to stay in touch with them through video calls, but it wasn't the same as being there in person. There were also times when I felt lonely and isolated. It was difficult to make friends, especially with the cultural differences. I spent a lot of time in my apartment, reading books or watching movies. Overall, working in Saudi Arabia was challenging but also rewarding. I gained a lot of valuable skills and experiences, but it also came at a personal cost. The homesickness and the cultural adjustments were difficult to deal with. But I'm grateful for the opportunity, and I wouldn't trade it for anything."

INTERVIEWER: How would you describe your practice abroad?

INFORMANT 8: Well, it was a different world compared to nursing in the Philippines. The hospital in Riyadh was well-equipped, and we had access to the latest medical technologies. This meant I was able to learn and practice skills that I might not have had the opportunity to develop back home. The patient population was also very diverse, with people coming from all over the world for treatment. This exposed me to a wide range of medical conditions and cultural backgrounds, which broadened my understanding of healthcare. One thing that stood out was the emphasis on specialized care. Nurses were often assigned to specific units or departments, allowing them to develop expertise in a particular area. I worked in the cardiac unit and gained extensive experience managing patients with heart conditions. The work environment was also more structured and hierarchical than what I was used to. There were clear lines of authority, and protocols were strictly followed. This ensured a high level of patient safety and quality of care. However, some aspects of the practice were also challenging. The workload could be very demanding, especially during peak seasons. We often worked long hours and had to deal with high levels of stress. Communication was also a key aspect. Due to the diverse patient and staff population, communicating effectively with both was crucial for the quality of practice."

INTERVIEWER: What circumstances led you to come back?

INFORMANT 8: "There wasn't one single event, but a combination of things that led me to come back home. As I mentioned before, homesickness was a constant struggle. Over time, it just became harder and harder to bear. No matter how much I earned or how many new things I experienced, there was always this gnawing feeling of being incomplete, of missing something essential. I missed my family terribly. Video calls and occasional visits weren't enough to fill the void. I wanted to be there for my siblings' graduations, for family celebrations, for the everyday moments that I was missing out on. I felt like I was watching their lives unfold from a distance, and it was breaking my heart. Then there were the cultural differences. As much as I tried to adapt, I never truly felt like I belonged there. I missed the warmth and familiarity of Filipino culture, the sense of community, the way people connected with each other. I also started to question my priorities. Was money really the most important thing? Was it worth sacrificing my happiness and well-being for a higher salary? I realized that it wasn't. I wanted to be happy, to be surrounded by my loved ones, to live a life that was meaningful to me. So, it was a gradual realization, a slow accumulation of longing and discontent. Eventually, I reached a

point where I knew that I couldn't stay away any longer. I had to go home, even if it meant sacrificing some financial security. My heart was telling me that it was the right thing to do.”

INTERVIEWER: What personal experience stood out during your reintegration?

INFORMANT 8: One of the biggest adjustments was the difference in resources. The hospital in Riyadh had state-of-the-art equipment and ample supplies, while the local hospital I joined back home was more constrained. I had to learn to be resourceful and creative in providing care with limited resources. It definitely tested my skills and pushed me to think outside the box. Another difference was the patient-nurse ratio. In Saudi Arabia, we typically have fewer patients per nurse, allowing for more individualized attention. Back home, in the Medical Ward, the workload was heavier, and I had to prioritize and manage my time more efficiently.

INTERVIEWER: Are there any professional challenges or opportunities you encountered in your job that you also want to share?

INFORMANT 8: Definitely! One of the biggest professional challenges I faced was the disparity in standards of care. Despite my best efforts to implement what I learned abroad, the lack of resources and systemic issues sometimes made it difficult to provide the level of care I wanted. For instance, advocating for more patient education or specialized equipment often met with bureaucratic hurdles. On the flip side, there were opportunities for leadership and innovation. Because of my international experience, I was sometimes asked to lead training sessions for other nurses, sharing best practices and new techniques. I also got involved in quality improvement initiatives, working with the hospital administration to address gaps in patient care.

Another challenge was dealing with the emotional toll of nursing in a resource-constrained environment. Seeing patients suffer due to a lack of access to basic medications or diagnostic tests was heartbreaking. It required a lot of emotional resilience and the ability to find creative solutions within the given constraints. However, amidst these challenges, there were also moments of immense satisfaction. Seeing a patient recover against all odds, knowing that I had made a difference in their life, made all the struggles worthwhile. These experiences reaffirmed my passion for nursing and my commitment to serving my community.”

INTERVIEWER: So, with these challenges and opportunities you mentioned, how did this influence your capacity to function as a nurse?

INFORMANT 8: "The challenges and opportunities I encountered definitely had a profound influence on my capacity to function as a nurse. I think it pushed me to become more adaptable, resourceful, and resilient. The limited resources forced me to think creatively and find innovative solutions. I learned to prioritize and make the most of what was available. It also made me appreciate the importance of basic nursing skills, such as assessment, communication, and patient education. The opportunity to share my knowledge and lead training sessions helped me develop my leadership and communication skills. I learned how to teach and mentor other nurses effectively and advocate for better patient care. The emotional toll of nursing in a resource-constrained environment also strengthened my emotional resilience. I learned how to cope with stress, maintain a positive attitude, and find meaning and purpose in my work, even in the face of adversity. These experiences also made me more compassionate and empathetic. I gained a deeper understanding of the challenges faced by patients and families, and learned how to provide culturally sensitive, patient-centered care. Overall, the challenges and opportunities I encountered transformed me into a more well-rounded and capable nurse. I became more adaptable, resourceful, resilient, and compassionate. I also developed valuable leadership and communication skills. I feel better prepared to face any challenge that comes my way, and I am more committed than ever to providing quality care to my patients."

INTERVIEWER: With this in mind, what insights can you draw from this experience?

INFORMANT 8: My experience as a nurse has taught me the importance of being adaptable and resourceful, especially when working with limited resources or in unfamiliar healthcare systems. Good communication is key to building trust with patients and collaborating with colleagues, while leadership and advocacy are vital for



improving patient care. Nursing can be emotionally demanding, so it is essential to develop resilience and seek support.

Understanding different cultures and continuously learning are also crucial for providing the best possible care. I also learnt that while you can be professionally satisfied away from home, being away from family can make you feel incomplete.

INTERVIEWER: Ma'am, I really feel that you enjoy your job and you are generous in sharing your knowledge and skills with our new nurses. Do you have any sentiments?

INFORMANT 8: "Looking back, my sentiments are a mix of gratitude, contentment, and a touch of wistfulness.

INTERVIEWER: Would you like to elaborate?

INFORMANT 8: I am incredibly grateful for the experiences and opportunities I had abroad. Working in Saudi Arabia allowed me to grow both personally and professionally. I gained valuable skills, met people from diverse backgrounds, and learned to appreciate different cultures. I am also content with my decision to return home. Being closer to my family and contributing to my community has brought me a sense of fulfillment that I could not find elsewhere. I am happy with the choices I have made and the path I am on. There is a touch of wistfulness, too. I sometimes wonder what my life would be like if I had stayed abroad. Would I have achieved greater financial success? Would I have had more opportunities for advancement? However, I quickly remind myself that money is not everything, and that true happiness comes from being surrounded by loved ones and living a life with purpose. Overall, my sentiments are positive. I am grateful for the past, content with the present, and hopeful for the future. I believe that everything happens for a reason, and that my experiences have shaped me into the person I am today."

INTERVIEWER: With this in mind, how did this experience shape you?

INFORMANT 8: This journey significantly shaped me by enhancing my adaptability and resilience, which are crucial for navigating diverse healthcare settings and resource limitations. It taught me the value of resourcefulness, inspiring creative problem-solving under limited-resource conditions. My communication skills sharpened through interactions with diverse populations, enabling effective patient care and team collaboration. I embraced leadership and advocacy, actively contributing to healthcare improvements. Emotionally, I grew stronger, learning to cope with work's demands while practicing self-care.

INTERVIEWER: Listening to your perspective is inspiring, and I have learned a lot from your insights. For my final question, you mentioned that you returned to be close to your family. Have you decided to stay permanently?

INFORMANT 8: "That is a very thoughtful question. For now, yes, I have decided to stay permanently. Being close to my family has become my top priority, and I cannot imagine living far away from them again. Of course, life is unpredictable, and things can change. However, as of now, I am committed to building my life here in the Philippines, surrounded by my loved ones. I want to be there for my parents as they get older, and I want to be an active part of my nieces' and nephews' lives. I have also found a sense of purpose and fulfillment in serving my community. I believe that I can make a positive impact here, and I am excited to see what the future holds."

Interview Transcript (Translated) Informant 9

DATE & TIME OF THE INTERVIEW: 5/15/2025 at 8PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.



To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

CKG, is 42 y/o with over 8 years of experience in Saudi Arabia. I came back 2024.

INTERVIEW PROPER

INTERVIEWER: Can you share the motivations that led you to seek employment overseas?

INFORMANT 9: "Well, there were a few key factors that led me to seek work abroad. Initially, the primary motivation was financial. The compensation packages offered overseas, particularly in Saudi Arabia, were significantly more attractive than what I could earn at home. The opportunity to save money and provide a better future for my family was a major draw. Beyond the financial aspect, I was also eager to broaden my professional horizons. I wanted to experience a different healthcare system, learn new skills, and work with diverse patient populations. I believed that working abroad would challenge me, help me grow as a nurse, and make me more adaptable and resourceful. Finally, I was also driven by a sense of adventure and a desire to see the world. I saw working abroad as an opportunity to immerse myself in a new culture, explore different countries, and meet people from all walks of life. It was a chance to step outside of my comfort zone and experience something completely different."

INTERVIEWER: Could you describe your experiences while working in Saudi Arabia?

INFORMANT 9: "Working in Saudi Arabia was a truly unique and transformative experience for me. The healthcare system there is quite different from what I was used to at home, and I had to adapt to new protocols, technologies, and cultural norms. The patient population was incredibly diverse, with people from all over the world seeking medical care. This allowed me to learn about different cultures and healthcare practices. One of the biggest challenges was adapting to the cultural differences. Saudi Arabia has a very conservative culture, and I had to be mindful of my behavior, dress, and interactions with others. I learned a lot about Islam and the local customs, and I developed a deep respect for the Saudi people and their traditions. On the professional side, I had the opportunity to work with some incredibly talented and dedicated healthcare professionals. I learned a great deal from my colleagues, and I was impressed by their commitment to providing high-quality care despite the challenges they faced. I also had access to state-of-the-art medical equipment and resources, which allowed me to expand my skills and knowledge. Overall, my time in Saudi Arabia was both challenging and rewarding. I grew both personally and professionally, and gained a new appreciation for the world's diversity. While it was not always easy, I would not trade the experience for anything."

INTERVIEWER: Could you describe some of the difficulties you faced both in your personal life and at work?

INFORMANT 9: Professionally, there were several difficulties. The language barrier was a challenge, especially when communicating with patients and colleagues who did not speak English fluently. This sometimes led to misunderstandings and communication breakdowns. Another challenge was dealing with the different healthcare systems. The protocols, procedures, and resources were not always the same as what I was used to, and it took time to learn the ropes and adapt to the new environment. There were also times when I felt frustrated by the lack of resources or the bureaucratic processes. Finally, there were times when I felt like an outsider. Despite my best efforts to integrate and learn about the local culture, I was always aware that I was a foreigner. This could

be isolating at times, and it required a lot of resilience and a strong sense of self. Adapting to a new culture was my personal challenge. Saudi Arabia has a very different culture from my home country, and it took time to adjust to the local customs, traditions, and social norms. Things like the dress code, the restrictions on women's activities, and the language barrier could be isolating at times. It required a lot of patience, understanding, and a willingness to learn and adapt.

INTERVIEWER: How would you describe your practice abroad?

INFORMANT 9: I would describe it as transformative and diverse. I was exposed to a wide range of medical cases and patient populations from various cultural backgrounds, which broadened my clinical knowledge and enhanced my cultural sensitivity. It was also adaptable and resourceful, as I learned to adapt to different healthcare systems, protocols, and resource limitations, which made me a more resourceful and flexible practitioner. Moreover, my practice was collaborative and interdisciplinary; I had the opportunity to work with a diverse team of healthcare professionals from different specialties and nationalities, fostering a collaborative and interdisciplinary approach to patient care. Ultimately, my practice was challenging yet rewarding. Despite the difficulties and cultural adjustments, my practice abroad pushed me out of my comfort zone, fostered my professional growth, and provided a unique sense of fulfillment. In essence, my practice abroad was a defining chapter in my career, shaping me into a more well-rounded, culturally competent, and adaptable nurse."

INTERVIEWER: What circumstances led you to come back?

INFORMANT 9: "I began to feel that I had reached a plateau in my professional growth. While I gained experience in a different healthcare system,

I realized that the opportunities for advancement and specialization were limited. I longed for new challenges and the chance to further develop my skills.

Mentoring nurses from different countries was a highlight of my time abroad. However, it also brought to light my desire to connect with and mentor nurses from my own nation, sharing my experiences and contributing more directly to their professional growth. I felt a growing desire to give back to the community that had supported me throughout my education and early career. I wanted to use my skills and experience to make a difference in my home country and help improve healthcare in my community. While I am grateful for my experiences in Saudi Arabia, I felt that the time had come to return home and pursue new challenges and opportunities."

INTERVIEWER: What personal experience stood out during your reintegration?

INFORMANT 9: One personal experience that truly stood out during my reintegration was the sense of belonging and connection I felt upon returning home. While I had gained invaluable experiences and expanded my horizons abroad, I realized how much I had missed the familiarity of my own culture, the warmth of my family and friends, and the sense of community that I had always taken for granted.

INTERVIEWER: Are there any professional challenges or opportunities you encountered in your job that you also want to share?

INFORMANT 9: "One significant challenge I faced was adapting my skills and knowledge to the specific needs of the local healthcare system. While

I had gained valuable experience abroad and realized that some of the protocols, procedures, and technologies differed in my home country. It took time and effort to re-familiarize myself with the local practices and adapt my approach to patient care accordingly. Another challenge was building trust and credibility with my new colleagues. Having worked abroad, I was sometimes perceived as an outsider or someone with different priorities. It took time to demonstrate my commitment to the team, to share my knowledge and experiences constructively, and to build strong working relationships based on mutual respect and understanding. However, I also encountered several exciting opportunities. I had the chance to share my international experiences and insights with my colleagues, which led to valuable discussions about best practices and innovative approaches

to patient care. I also contributed to developing new programs and initiatives to improve the quality of care and promote cultural sensitivity within the healthcare system. Overall, my return home presented both challenges and opportunities. By embracing the challenges and leveraging the opportunities, I was able to grow as a professional and make a meaningful contribution to my community."

INTERVIEWER: So, with these challenges and opportunities you mentioned, how did this influence your capacity to function as a nurse?

INFORMANT 9: The initial reintegration presented some challenges that temporarily impacted my efficiency. However, in the long run, the effect was a significant enhancement of my overall capacity as a nurse. I became more skilled, resourceful, and adaptable. Integrating diverse experiences sharpened my critical thinking and problem-solving skills. Sharing my international perspectives fostered more open communication and collaboration within the team. Navigating these challenges and opportunities made me a more adaptable and resilient nurse. Ultimately, this improved the quality of care I provided to my patients.

INTERVIEWER: With this in mind, what insights can you draw from this experience?

INFORMANT 9: I have learned that cultural humility is essential, even when returning to a familiar environment, as systems and practices may have changed. Adaptability is also a key strength, as the ability to be flexible and resourceful is invaluable when facing new challenges. Furthermore, I have come to realize the importance of mentorship and guidance, and I now prioritize sharing my knowledge and experiences with others. The sense of community I felt upon returning home reinforced the idea that my work as a nurse is not just about providing care but also about contributing to my community's well-being. My diverse experiences have enhanced my problem-solving skills and taught me to think critically and creatively. Continuous learning is also necessary, as the healthcare landscape is constantly evolving. Finally, personal reflection is valuable, allowing me to gain a deeper understanding of myself and my values and make informed decisions about my career path."

INTERVIEWER: Looking back, what are your sentiments?

INFORMANT 9: "Looking back, I feel a deep sense of gratitude for the opportunities I have had, both abroad and at home. While there were challenges along the way, I would not trade those experiences for anything. My time abroad broadened my perspective, enhanced my skills, and exposed me to diverse cultures and healthcare systems. Returning home allowed me to reconnect with my roots, contribute to my community, and share my knowledge and experiences with others. I am proud of the work I have done as a nurse, and I am excited about the future. I believe that my international experiences have made me a more well-rounded, compassionate, and effective healthcare provider. I am committed to continuing to learn, grow, and make a positive impact on my patients' and my community's lives. Overall, I feel a sense of fulfillment, purpose, and optimism as I look back on my journey and look forward to what lies ahead."

INTERVIEWER: With this in mind, how did this experience shape you? INFORMANT 9: Returning home has reinforced my sense of purpose, and I am committed to giving back to my community. It expanded my professional network, and I have become a better communicator and collaborator. My time away from home has given me a deeper appreciation for my own culture and a desire to contribute to its improvement. Overall, this experience has made me a more well-rounded, compassionate, and effective nurse, shaping my values and strengthening my commitment to providing the best possible care to my patients.

INTERVIEWER: Listening to your perspective is inspiring, and I have learned a lot from your insights. For my final question, you mentioned that the reason you returned is to be close to your family. Have you decided to stay permanently?

INFORMANT 9: I felt a strong desire to use my skills and experiences to give back to my community. I wanted to provide care to those in need, mentor other nurses, and advocate for better healthcare policies. Being close to my family has given me a deeper sense of purpose and fulfillment. I now feel more committed to staying in the Philippines permanently, knowing that I can make a meaningful difference both in my profession and for my loved ones.



INTERVIEWER: Thank you for sharing your journey. As you look ahead, what hopes or goals do you have for your continued work and impact here in the Philippines?

INFORMANT 9: Looking ahead, I hope to continue growing as a nurse and to take on more leadership and mentoring roles. I want to inspire other nurses to stay and serve in the Philippines, and to help create a supportive environment where we can all thrive. I also hope to be involved in initiatives that improve patient care and advocate for better healthcare policies. Ultimately, my goal is to make a lasting, positive impact on my community and to contribute to the advancement of nursing in the country.

Interview Transcript (Translated) Informant 10

DATE & TIME OF THE INTERVIEW: 5/20/2025 at 8PM

Briefing And Introduction:

In our interview, we will discuss your experiences abroad, your challenges, and your opportunities to return to work in the Philippines. We will discuss both your positive and negative experiences of reintegration and how these shaped your decision to stay for good.

To ensure the quality of this research and provide additional support, Ma'am M, a qualified psychologist, will observe this interview. Her role is to monitor the interview process and ensure your well-being, but she will not directly participate in the interview unless it appears necessary. Your responses will be kept confidential, and the psychologist will adhere to the same standards.

This research is an interview, and I will ask open-ended questions. If you feel uncomfortable and decide to withdraw, do not hesitate to let me know.

Do you agree to be a participant in my research? May I record this interview?

Interview Proper:

INTERVIEWER: Ma'am, please state your full name/Age/Years working abroad? When did you come back?

JCO, is 40 y/o with over 8 years of experience in Ireland.

I came back 2024.

INTERVIEWER: Can you share the motivations that led you to seek employment overseas?

INFORMANT 10: I saw working abroad as an opportunity to challenge myself, step outside of my comfort zone, and become more independent and self-reliant. I wanted to prove to myself that I could adapt to new environments, overcome challenges, and succeed in a foreign land.

INTERVIEWER: You mentioned wanting to overcome challenges. Could you describe your experiences while working in Ireland and share some of the specific challenges you encountered and how you addressed them?

INFORMANT 10: I gained exposure to a well-established healthcare system with advanced technologies and evidence-based practices. I had opportunities to specialize in areas like critical care and cardiology, and I participated in continuous professional development programs that enhanced my skills and knowledge. While Ireland is a multicultural society, I still had to navigate cultural differences, including communication styles, workplace etiquette, and social customs. The HSE often faces staffing shortages, which can lead to heavy workloads and increased pressure on nurses. This could be physically and emotionally demanding.

INTERVIEWER: It sounds like it was a mixed experience with both positives and negatives. Could you describe some of the difficulties you faced, both in your personal life and at work, during your time in Ireland?"

INFORMANT 10: Yes, while Ireland is an English-speaking country, certain aspects of the culture took some getting used to. The humor, for example, is unique, and I occasionally missed the mark in social situations early on. Also, understanding some of the local slang took a small quantity of effort. Finding suitable and affordable accommodation, particularly in Dublin, was a real challenge. The rental market is competitive, and I spent a lot of time searching before I found a place that met my needs. Setting up a bank account, getting a driver's license, and understanding the Irish tax system all took time and effort. There was a fair bit of bureaucracy involved. While most patients spoke English, some had very strong regional accents or used local idioms that I did not immediately understand. It took time to develop my ear and learn to communicate effectively with everyone. At times, there were constraints on certain resources, which required me to be creative and resourceful in finding solutions to meet my patients' needs."

INTERVIEWER: Considering the unique communication styles and occasional resource constraints, how would you describe your practice abroad overall? Did these factors influence your approach to patient care?

INFORMANT 10: I would describe my practice abroad as a transformative experience that significantly broadened my perspective and skill set. The unique communication styles definitely influenced my approach to patient care. I learned to be more attentive to non-verbal cues, to actively listen and seek clarification, and to tailor my language to each patient. It forced me to slow down, be more patient, and really focus on building rapport to ensure effective communication. It reinforced my commitment to patient-centered care and equipped me with valuable skills that I continue to use in my practice today.

INTERVIEWER: It sounds like you gained a lot from your time abroad, but you ultimately chose to come back to the Philippines. What led you to make that decision?

INFORMANT 10: It was not a decision I took lightly, and I carefully weighed the pros and cons before making the move. Ultimately, I felt that returning home was the best choice for my long-term personal and professional well-being, especially considering the demanding workload and the impact it had on achieving a healthy work-life balance."

INTERVIEWER: What personal experience stood out during your reintegration?

INFORMANT 10: "One personal experience that really stood out during my reintegration was the realization of how much I had changed while I was away. It was not just that my surroundings were familiar, but that I was seeing them with new eyes. For example, I remember being struck by the slower pace

of life in my hometown compared to the bustling city where I had been living in Ireland. Initially, I felt impatient and struggled to adjust back to that rhythm. However, over time, I came to appreciate the value of slowing down and reconnecting with the simple things in life. I also noticed a shift in my perspective on certain issues. Living and working in a different culture had broadened my understanding of the world, and I found myself engaging in conversations with friends and family with a newfound sense of empathy and open-mindedness. It was a humbling experience to realize that, even though I was 'back home,' I was not quite the same person I had been when I left. Reintegration was not just about readjusting to my old life, but also about integrating the new perspectives and experiences I had gained abroad into my sense of self."

INTERVIEWER: Are there any professional challenges or opportunities you encountered in your job that you also want to share?

INFORMANT 10: I was not fully prepared for the possibility of experiencing a kind of 'reverse culture shock' in the workplace. Even though I was back in a familiar setting, some of the practices, technologies, or organizational structures had evolved while I was away. It took some time to get back up to speed. However, it also presented opportunities to share new perspectives and leverage my enhanced skillset. My time abroad allowed me to expand my international professional network. This opened up opportunities for collaboration, knowledge sharing, and potentially even future research or exchange programs. Overall, reintegrating into the professional world was a dynamic process. While there were some adjustments to be made, the experience ultimately enriched my practice and opened up new avenues for professional growth."

INTERVIEWER: So, with these challenges and opportunities you mentioned, how did this influence your capacity to function as a nurse?

INFORMANT 10: The skills and knowledge I gained abroad, such as proficiency in a different language, experience with alternative healthcare models, or expertise in a specific clinical area, have definitely enriched my practice and made me a more valuable asset to my team. The experience of living and working in a different culture enhanced my empathy and cultural sensitivity, leading to improved patient interactions and a more holistic approach to care. The experience ultimately enhanced my skills, broadened my perspective, and made me a more well-rounded and effective healthcare professional."

INTERVIEWER: With this in mind, what insights can you draw from this experience?

INFORMANT 10: "From my time abroad, I can say that being able to adapt to different cultural norms is crucial. It is not enough to know the medical protocols; you have to be sensitive to how people from different backgrounds perceive healthcare. This adaptability has helped me build stronger relationships with patients and provide more culturally appropriate care."

INTERVIEWER: Looking back, what are your sentiments?

INFORMANT 10: I have fond memories of the people I met, the places I explored, and the experiences I shared during my time abroad. While I am happy to be back home, I will always cherish those memories. I have a deeper understanding and appreciation for the challenges faced by immigrants and those who are navigating cultural transitions. This has made me a more compassionate and empathetic healthcare provider. Overall, my sentiments are overwhelmingly positive. While there were certainly challenges along the way, the experience was ultimately enriching and transformative. I would encourage anyone considering working abroad to take the leap and embrace the adventure. The lessons you learn and the memories you make will last a lifetime."

INTERVIEWER: With this in mind, how did this experience shape you?

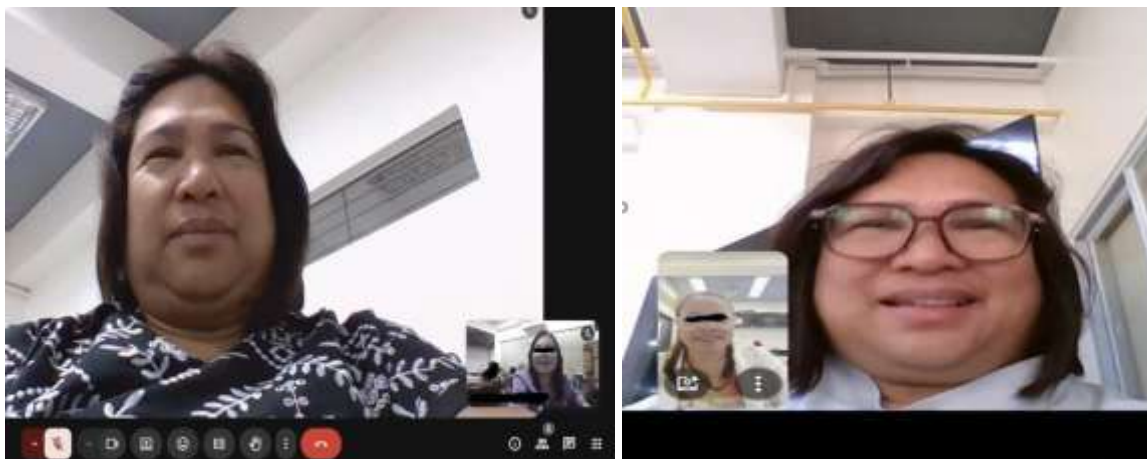
INFORMANT 10: "That experience transformed me into a more adaptable, empathetic, and globally-minded individual. It broadened my perspective, strengthened my character, and enriched my life in countless ways. I learned to embrace change and thrive in unfamiliar environments. This adaptability has become a core part of my identity and has made me more resilient in the face of challenges. Distance made me appreciate the things I had taken for granted back home, such as my family, friends, and cultural traditions. I returned with a renewed sense of gratitude and a commitment to cherishing those connections."

INTERVIEWER: Listening to your perspective is inspiring, and I have learned a lot from your insights. For my final question, you mentioned that you returned to be close to your family. Have you decided to stay permanently?

INFORMANT 10: "I came back home with the specific goal of creating a more balanced life. While I enjoyed my time abroad, I realized that my personal needs and priorities were better served by returning to a more familiar environment where I could establish clearer boundaries between work and personal life. I am making a conscious effort to spend time with family and friends, whether going out to dinner, playing games, or simply having meaningful conversations. These were the things I missed working overseas. For example, last weekend I went hiking with my siblings, and it was so refreshing to reconnect with them in nature. I am also dedicating time to activities that bring joy and relaxation, such as reading, painting, or playing music. At work, I politely decline requests to pick up extra shifts if it would compromise personal time. As the charge nurse, I am learning to delegate tasks to colleagues, when possible, rather than taking on too much responsibility."

INTERVIEWER: Thank you for sharing that, and for being so open about your journey and the choices you've made. It's inspiring to hear how you are prioritizing your well-being and making space for the things and people that matter most. Your story shows how returning home can be both a professional and a deeply personal decision, and I'm sure it will resonate with many others. I wish you continued fulfillment and success in both your career and your life here in the Philippines.

Proof of Interview Process





MARITES FOURIE

Avida Village Cerise Calamba Laguna, Philippines
tesbfourie@gmail.com · +639176730030

Hard-working, dedicated registered nurse eager to utilize previous clinical experience to expand role while helping improve patient and professional outcomes. Patient-focused, able to demonstrate care, clinical knowledge, and experience to become a practical part of the interdisciplinary team.

PROFESSIONAL EXPERIENCE

NOVEMBER 2018 – PRESENT

OCCUPATIONAL HEALTH NURSE, ACTIVE ONE, INC. PHILIPPINES

- Promotes and maintains health and wellness of workers and coordinate the delivery of comprehensive and quality occupational health services.
- Administer treatments and care to patients following policies and following consultant protocols.
- Meet legal and statutory requirements, e.g., Health and Safety, COSHH Regulations, Manual Handling, and the control of drugs.
- Participate in the implementation and evaluation of standards of care within the department.
- Provide support and training to other staff members, such as staff orientation, procedures, and equipment handling.

JAN 2013– JAN 2018

DISASTER PROGRAM NURSE, DEPARTMENT OF HEALTH (DOH) ABU DHABI

- Assisted doctors in the delivery of medical procedures and provided essential life support in cases of emergency.
- Mobilized the local community to prepare for, respond to, and recover from emergencies.
- Developed human and material resources (volunteers, partners, community agencies, shelter, and vendor agreements) to ensure the entire cycle of disaster services is delivered.
- Led and managed a primarily volunteer team responsible for implementing disaster preparedness, response, and recovery programs in the local area.

AUG 2009– AUG 2012

TRAUMA CARE UNIT (TCU) CHARGE NURSE, KING ABDULLAH UNIVERSITY SCIENCE & TECHNOLOGY SAUDI ARABIA

- Fulfilled charge nurse role for an 18-bed Trauma Care Unit catering to varied and complex patients that require a high level of organization to function.

- Implemented RN clinical skills and judgment, patient and family teaching, interdisciplinary communication and collaboration, order transcription, and processing admission and discharge.
- Implemented conflict resolution skills following Charge nurse responsibilities.
- Served on the Strategic Planning committee.

DECEMBER 2004– JAN 2007

INTENSIVE CARE UNIT NURSE, KING FAHAD ARMED FORCES HOSPITAL SAUDI ARABIA

- Provided patient care in a 24-bed ICU unit serving trauma patients and inpatient surgeries.
- Monitored patient vital signs and notified attending physicians of changes. Assisted physicians with emergent situations.
- Administered IV, oral, and injections of medications as directed.
- Educated family members on patient conditions in a compassionate way.
- Assisted with conflict resolution in tense situations.
- Documented procedures, patient conditions, and medication administration with 100% accuracy.
- Participated in a team project to review and improve ICU process guidelines. Result: 25% drop in medical errors.
- Received Nurse of the Year award as voted by peers.
- Consistently scored at 98%+ by charge nurse for efficiency, collaboration, communication, and interpersonal skills.

NOV 2001– NOV 2008

INTENSIVE CARE UNIT NURSE, DR ERFAN AND BAGEDO HOSPITAL SAUDI ARABIA

- Provided high-quality care for acute patients with diversified needs in a 24-bed ICU department.
- Effectively communicated and collaborated with interdisciplinary team members to ensure desired patient outcomes.
- Monitored vital signs and notified physicians of any clinical changes.
- Performed assessments and appropriate medical interventions as needed.
- Complied with rigorous standards of patient care service, maintaining a 95% compliance rate, and achieving some of the highest levels of patient satisfaction in the department.
- Assessed and monitored patients' neurological statuses and pain levels.
- Continually maintained medical knowledge and competence to ensure the ability to fulfill responsibilities.

EDUCATION

(THESIS UNDERGOING)

MASTER OF SCIENCE IN NURSING (MSN) ADVENTIST UNIVERSITY OF THE PHILIPPINES

MARCH 1992

BACHELOR OF SCIENCE IN NURSING (BSN) UNIVERSITY OF SANTO TOMAS, PHILIPPINES