Healing and Wholeness for Biological Bodies and the Body Politic

The Case for Advancing Gender Equality and Economic Empowerment Through Health Worker Migration and the Role of Civil Society and Nurses in Advancing Health and Other Global Public Goods at the UN and Worldwide

A Presentation by Liberato C. Bautista

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Excellencies, distinguished representatives from the UN System, esteemed NGO colleagues, ladies, and gentlemen:

1. Thank you, Dr. Peter Preziosi—President and CEO of CGFNS International—for this singular honor to speak at this CSW68 parallel event on such an essential topic as advancing gender equality and economic empowerment through health worker migration. I treasure this occasion as CoNGO President. CGFNS is the Secretary, and thus an officer, of the Board of CoNGO—the Conference of NGOs in Consultative Relationship with the United Nations. The participation of CGFNS in the life of CoNGO is a prime example of the power and importance of consultation, collaboration, and cooperation in our interlocutory role vis-a-vis the United Nations System.

2. At the outset, I also want to say that holding this event at the Salvation Army Auditorium—part of the building that houses the International Social Justice Commission of the Salvation Army—evokes special meaning and emotion. Sixteen years ago, 2008 to be exact, this building was inaugurated, and I was invited to deliver an inaugural speech—both in my capacity as CoNGO President and as the Main Representative at the UN for the General Board of Church and Society of The United Methodist Church. You may not know that the Methodist family and the Salvation Army


2 Liberato Bautista is the President of the Conference of NGOs in Consultative Relationship with the United Nations and Main Representative to the UN of the General Board of Church and Society of The United Methodist Church.
trace their roots to John Wesley and the holiness movement. Why do I mention this at a CGFNS event? This shared Wesleyan ethos is steeped in the “joining of mercy and justice, of heart and hand, and witness and service.” Thank you, Salvation Army, for making this facility available as an extension of NGOs' physical access to the UN’s thematic agenda.

3. I refer to the joining of works of mercy and works of justice because it provides a theoretical handle to place the role of healthcare in achieving health, healing, and wholeness and advancing gender equality and economic empowerment. I put this framework up front to say that the healing and wellness of the biological body and the body politic are critical discourses in sustainable development, if not healthcare. This is why I welcome the complexity of your theme. The health sector, especially nursing, is a predominantly women’s profession and, therefore, must be naturally concerned about achieving gender equality and economic empowerment. This is crucial to attaining women’s human dignity and rights, if also for everyone.

4. Last week, I was in Jakarta, Indonesia, where I keynoted an international consultation of a tripartite gathering of migrants, refugees, asylum seekers, domestic workers, and people caught in the many forms of trafficking (human, labor, sex, drug, and trafficking in human organs), accompanied by migrant and refugee service agencies and several religious institutions from around the world. This group has met regularly for the last 12 years. They offer a viable formulation to address migration and its attendant challenges and advance gender equality and economic empowerment. This tripartite gathering in Indonesia has been developing this framework over the lifetime of its work, which refers to building infrastructures of welcome and hospitality and creating an architecture of protection and solidarity. The infrastructure refers to immediate acts of mercy or the need to attend to the immediate healing of the human body. Architecture refers to the need to develop, institute, and systematize legislation and public policy to ensure social justice, including gender justice, economic justice, labor and migration justice, climate justice, and so much more.

5. I submit that advancing gender equality and economic empowerment through health worker migration cannot be addressed in isolation from the more significant political and economic empowerment issues for all people. I say this as someone from the Philippines, where many of the world’s healthcare workers—nurses, doctors, and medical technologists come from. In my discussion with Dr. Preziosi and his CGFNS teams, I have mentioned the dual challenge of brain drain from migrant-sending countries and brain gain in the receiving countries. Alas, brain gain is not the dominant vision of health worker migration, but rather, in the general public’s view, it is just one more instance of local employment grabbed by a foreign worker. Education about migrant justice must form part of our advocacy for gender equality.
6. I am especially pleased with the number of NGOs in the health profession, especially nurses who are members of CoNGO. Aside from CGFNS, there is the ICN, SONSIEL (Society of Nurse Scientists, Innovators, Entrepreneurs, and Leaders), the Katharine J. Densford Center for International Nursing Leadership at the University of Minnesota School of Nursing, and NIGH (Nightingale Initiative for Global Health). The nursing profession can genuinely be on the mission to “heal bodies” as much as to “heal nations”—the body politic and the citizenry, if you will. A healthy people make for a healthy nation. However, healthcare must benefit from robust public funding. Otherwise, this health, which should be a commonwealth, is imperiled, unraveling inequalities in health care and access to the necessities that make for just, resilient, and inclusive health for all, not to mention health as a human right.

7. Consider this: migration today is mainly about labor chasing significant capital and capital chasing cheap labor. In this dynamic, it is crucial not to commodify the human body and commoditize their labor and services. Academic studies have shown that in the globalization of labor, migration has been gendered and sexualized, racialized and ethnicized, 3) even militarized and securitized. Migrating nurses and all people in situations of mobility must be spared and protected from this exploitative and oppressive dynamic. This is a matter of concern not just in migration and labor justice but also in the framework of “brain drain, brain gain.” Consider, too, that the labor export policies of certain countries are critical in ensuring the steady flow of hard currency, which is crucial, for example, to a country like the Philippines. The massive movement of labor across borders, including forced movement—requires a just, durable, and sustainable solution, especially under conditions of uneven development of economies and structural inequalities within and among countries. The demographics of migration—which countries are the biggest nurse-sending and nurse-receiving—give us a pretty good idea about the politics and economics of labor migration today. Just the remittances of healthcare workers to their countries of origin is an economic narrative one cannot ignore just because of the sheer amount they contribute to national economies.

8. Consider this larger picture borrowed from another keynote speech in the Jakarta meeting I attended. Joanna Concepcion, the Chairperson of Migrante International, said, “Around 60% of developing countries are in debt or high risk. The latest data in 2021 shows that 39 countries paid more in principal and interest than the new loans they received. The United States has even raised interest rates, and indebted countries will have to pay more to borrow and pay off their debts. Sixty-two countries in the world are now spending more on foreign debt than on healthcare. While public debt continues to rise, budgets for critical, vital social services, education, healthcare, support for farmers and local agricultural production, and support for workers and laborers are cut,
severely impacting the poorest communities. We have been hearing the phrase “post-pandemic recovery.” Still, for the world’s working people, it has only meant that the inequalities they have already faced before the pandemic are only worsening daily. While big businesses continue to reap higher profits, billions of workers are paid slave wages. The wages of billions of workers cannot keep up with inflation, rising energy costs, and essential goods. In 2022, the average global inflation reached its highest level in two decades. More and more people do not have long-term job security or are underemployed. The number of unemployed globally rose to 207 million in 2022, increasing by 21 million compared to 2019. At least 435 million more women and girls have been pushed to extreme poverty. Women and girls in the global South particularly bear the worst impacts of the rising living costs, and the majority of them are forced into informal employment. (IBON) This is the context in which economic empowerment and gender equality must be seen—for the healthcare worker as much as any other migrant worker. Their hard-earned dollars are crucial in the uneven development of economies. This is why achieving the 17 SDGs is vital, even as they are not the entirety of what needs to be done.”

9. Nurses and nurse practitioners are prime deliverers of an infrastructure of healing and wholeness, which you excel in doing in your workplaces. But you are essential interlocutors in the development at the UN of international norms and standards that compose the architecture of solidarity and protections, which are the legal frameworks and arrangements that protect and promote all human rights for all, including health rights, women’s rights, and worker’s rights, including the ones that protect you in the workplace, in the recruitment process, and the migration route from origin to destination. This is why I am continually encouraged and impressed with the work of CGFNS in developing and flourishing ethical recruitment policies for healthcare workers.

10. I am also excited at the launch today of CGFNS Insights Brief – Advancing Gender Equality and Economic Empowerment Through Nurse Migration, which, among others, highlights the following:

a. As the most significant profession within healthcare, nursing is pivotal to a country’s ability to provide essential and comprehensive care. As a female-dominated profession, it offers unique economic opportunities to women, and nurses are often seen as beacons of female empowerment within their communities.

b. As a female-dominated profession, the status of women and nurses are closely intertwined. Nurse migration enables women to bring their expertise across borders, benefiting individuals, families, and economies in both source and destination countries.
c. Although gender disparities, discrimination, and lack of leadership positions persist for women in the nursing profession, recognizing the pivotal role of nursing in advancing gender equality and economic empowerment for women and girls worldwide underscores the need for concerted efforts to support and empower this profession.

*Friends and colleagues,*

11. I want to repeat what I said to you in 2022. The nursing profession is in a strategic place to address the social inequalities, not just in health but in other aspects of society. This is to say that the biological body’s health, healing, and wholeness are equally dependent on the health, healing, and wholeness of the body politic and the planet Earth. I have in mind nurses being crucial partners in building back better and justly from the ravages of intersecting pandemics in health, the economy, and our environment, including from the pandemic of violence and gender inequality. This, even as I also hasten to add that nurse and health worker migration is part of that transborder and transnational movement of peoples, which should be protected within the framework that the freedom of movement is a protected human right.

12. Justice is at the heart of health for all. Health for all is a principle underlying the more excellent principle that health is a global public good and that all those who work to protect and promote health play crucial roles in the public’s overall health. Today, I want to thank the nurses who chose to move. Human mobility is more than just a biological function. Where we stay, as much as why we leave places of meaning and memory in our lives and relations, are decisions of geopolitical import. For every migrant nurse attending to your care and well-being, please always thank them. They left places of meaning and people they love so that they can earn with dignity and respect and remit some of their earnings to their families and loved ones. In the same vein, I want to thank CGFNS International again for its work of flourishing the voice and agency of nurses in achieving gender equality and economic empowerment so that they can do and do best what their profession has trained them for—helping people and their relations heal, including their relation to the planet, for themselves, their families, and their communities.

Thank you for your indulgence.