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SOS: SEND NURSES URGENTLY TO GERMANY

According to the article column written by Patrick Bauer in the Stern Magazine, a big demand of nurses are needed to fill the personal employment vacancy in most hospitals in Germany. Can the Philippines with its over supply of trained nurses help solve the problem?

Reference:

www.stern.de/gesundheits/pflegnotstand-in-deutschland--schwester--bitte-kommen-7554240.html



Since February 2017, Irene Brady started her nursing care training at the Uniklinik Tübingen. Standing beside Brady is Friedhelm Chmell assisting as her tandem partner.

On February 2, 2017, Airbus A321 landed 21 minutes earlier than the estimated time of arrival at Stuttgart Airport. On board is Irene Brady to start her foreign career. Still uncertain of her future, however, she is assured to be collected at the arrival area by Sibylle Jerger holding in one hand a heart-shaped balloon and in the other a welcome placard with *Mabuhay* written on it.

As Irene entered slowly through the glass door, Jerger greeted *Herzlich willkommen* and took her into her arms. Later, Irene joined Jerger in a rented bus waiting to bring her to her new home.

Until now, they know each other only via Skype. Irene speaks very limited German and talks mostly in English. Irene said on the day she met Jerger that she felt great as if she won a luxury jackpot in her life. Hardly, she knows that being a nurse in Germany is not a dream job.

In Germany there is a need for nursing care

According to Verdi Labor Union, nursing care has become presently an unattractive career due to shift work, stress and low salary. The job vacancy is estimate at 100,000. Alone, the Universitätsklinikum Tübingen requires yearly 170 new personnel, but could only train 100.

To cope up with the demand situation, the Deutsche Gesellschaft für Internationale Zusammenarbeit and Auslandsvermittlung der Arbeitsagentur developed the "Triple-Win-Program". It's a job offer program aimed to invite nurses from other countries to work in Germany. However, looking at the differences in culture, language, and social security system, will it function?

Tübingen hospital, has its own nurses' home. Every guest worker is provided with a private room big enough to accommodate a comfortable bed, a table with a chair, and a dress cabinet. But for Irene, the reason for coming to Tübingen is the 2308€ monthly compensation, high enough starting just as a trainee. It's why she applied for the overseas work and left her friends and family. From what she earns, 350€ monthly is set aside for remittance to support her parents back home.

Irene, 31 years old and physically well-built, has never been in Germany. All her information about Germany were taken from the internet. How do modern and historical buildings look? Why is the social health system working excellently? She has six months time to experience and know her new environment: the corridors of the hospital, the streets, and bureaucratic rules and regulations. In August, she has to take a language and state examination in order for her profession to be recognized in Germany. Then she can stay.

Sibylle Jerger (58) has never been in the Philippines. She lives in a town within the Schwäbischen Alb. She is given the assignment to help Irene understand how things are done rightly in the hospital and in Germany.

The next day, 7:45 A.M., Irene is joined with three other Filipinas standing in front of the nurses' home. Jerger is with them and asked if they all slept well and all heads nodded. She asked also if she can get them extra blankets and pillows. Again, all heads nodded.

Irene has been awake since four hours: jet-lag, weather, the stillness of the night. Her father wrote in Facebook in Visayan - Gimigaw ko nimo.

Together, they went to the hospital for their first-day orientation. There are 17 clinics with 41 departments and 1559 beds. Every year almost 9,000 medical staff takes care of 72,900 in-house patients und 355,000 outpatients. It's the biggest employer in the region and the most prestigious hospital in the country.

Jerger led them through long hallways, in elevators, and in a labyrinth full of initials: UKT, GZ, HNO, CRONA. Along the way, Jerger would stop to explain the initials like CRONA for Chirurgie, Radiologie, Orthopädie, Neurologie and Anästhesie. She would ask if everyone understood. Again, all heads would nod. Once in awhile she would talk in English and the group would answer, "ahh okay." Sometimes just to be sure, Jerger would say if you are lost and do not understand, simply call her attention.

Next on the program is an orientation of the *Altstadt*. The leisure walk on the cobblestone streets led them to the centrum passing *Gasthaus Bären* and an Asian store. Between the roofs, they could see the tower spire of *Schloss Hohentübingen*.

At the Schlossmuseum, Jerger pointed out that the oldest artwork of mankind is kept here. She said: "Das Pferde. Es bindet mich in die Welt. Und es erinnert mich daran, dass wir alle miteinander verwandt sind."

Jerger showed the group the botanic garden because she thought the tropical plants would recall a memory of the Philippines. Jerger showed also the grocery store where they could shop oatmeal at a good price and how to buy a bus ticket. Meanwhile, she explained the difference between a tax number and a pension insurance number.

What Jerger does is called by the organizers of the GIZ "Kümmerer-Strukturen." Jerger explained: "Without this kind of support the program does not work. I was once an intensive care giver. Now I care for the nurses."

The following day, Irene had her ID card pinned on her work uniform. Written on the ID card: Irene Brady, Gesundheits- und Krankenpflegerin in Ausbildung. Neurologie. Proudly she said, "That was fast, really very fast."

Actually, Irene wanted to study Fine Arts after her high school. But, her parents were against it. Her father, a minister of an evangelical church, and mother, a school teacher, wanted her to learn something sensible. So not to disappoint them, she took up nursing, a 5-year bachelor's and master's degree, at the University of Cebu.

Nursing is a major field of study in the Philippines where there are more graduates than jobs. A registered and experienced nurse is paid a maximum 400€ monthly salary by hospitals.

After finishing her studies, Irene volunteered at the provincial hospital to earn her nursing work experience. Early mornings, her father brings her to work and picks her up in the afternoons. There are 50 beds and the patients must provide their own dressing material. It was only there, she said, that she began to get excited about the profession. "I developed a passion for helping patients."

After two years, she was earning a measly 4000 Pesos monthly, ca. 70€ but her parents supported her even more when her circumstances were frustrating.

One day, a friend told her about Europe looking for nurses. In 2013 Irene applied for the first time for the Triple-Win-Program and was refused due to lack of work experience. She prayed daily and as if by miracle, she was invited to an interview in August 2016. Finally, a call from Sibylle Jerger: "Frau Brady, Sie sind dabei."



Cobblestone streets of Altstadt Tübingen

Erlebnisse Tübingen

By end of February 2017, Irene is almost four weeks in Tübingen. At the end of every German course she attended, she said, "Headaches, all the time. Every German word has its rule."

Seven weeks later, mid-April, at 6:00 A.M., Irene is given a practical exercise. Friedhelm Chmell is assigned as her tandem partner. Together, they took over the shift work of handling patients and must go through every step in detail. "Luxury has nothing to do with everyday life here, but Irene must learn how procedures are done," commented Chmell.

Back to German course. Groups, all in the nursing care training, have been set in circle to practice using *Artikel*.

*„Ich bin das Pflegekraft. Und du?“ sagt Brady.
 „Es heißt die Pflegekraft,“ korrigiert die Lehrerin.
 „Ich bin die Infusion,“ sagt eine Kollegin.
 „Fällt Ihnen noch etwas anderes ein?“
 „Ich bin die Desinfektion.“*

Irene has made every effort to understand as much as possible the instructions on the must-do-list during a shift change in 25 minutes. The night shift nurse has written and explained about Medis, Ibu and Dopa, gerötete augen, halluzinierende Patienten, AvD, ZVK, and DK. At this moment, Chmell is gone to get his coffee. Irene, left alone inside the station, looked at the list which seemed empty. Nano, Nana, a block out!

Friedhelm Chmell (40), a slender man whose baldness makes him feel friendly, loves his job. For 18 years he has been working as a nurse and has been supervising new recruits.

Carefully, he explained, "Brady calls him tandem master. When I have the time, supervision is important. But the stress is often too much. The new ones are both an enrichment and a relief."

The biggest problem, however, can not be solved by the new recruits. Its station has ten rooms, a total of 20 beds. Two trainees share the station and each is

assisted by an experienced person. An unplanned task like washing a body would take a little too long and the rest of the day is stressed. "We have long demanded an additional nursing per shift," says Chmell.

Brady and Chmell are in room 424 where Sieglinde Kugel, born in 1944, has been stationed for three weeks due to Parkinson's disease. An infection triggered an acute crisis, meaning a life-threatening condition. "She could not move and it looked terrible. Fortunately, the antibiotics have cured it. And today she will be released," says Chmell.

"Entschuldigung, guten Morgen, Frau Kugel," says Irene. Together with Chmell, she washes the patient, changes the catheter, places her in the wheelchair and helps with breakfast. Irene cuts a jam bread into small pieces and puts it into her mouth.

"Mögen Sie das?" Irene asks. "Schleckig bin ich ned," says Kugel. Brady nods as if she understood and feeds her.

In the hallway, she asked Chmell the meaning of "schlägich." Chmell simply replied that she is doing just fine.

At 9:00 A.M. Frauenkogel was picked up by DRK. On her way, out she remarked that she liked Mrs. Brady from day one.

In the Philippines, Irene has acquired the language level B1, a high grade by German standard. But still she has to understand the regional dialect also: what is "Ich will hoam?" What does a patient need when he asks for Gsälz? What is a Schwänzle? Irene feels safer in English, but she has to talk to old Swabian and Baden patients. She must understand exactly how they have slept, describe how the fever develops and how mobile a patient is. Language determines about medication, about releasing of patients, and in the end, about life and death.

"Language is my biggest fight," says Irene Brady.

Editorial