



australian
nursing federation

Submission: Towards a possible Australia – Korea Free Trade Agreement

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1. Introduction

- 1.1 The Australian Nursing Federation (ANF) welcomes the opportunity to make a submission in relation to a possible Australia – Korea Free Trade Agreement.
- 1.2 The ANF was established in 1924. The ANF is the national union for nurses and midwives in Australia with Branches in each state and territory.¹ The ANF is also the largest professional organisation in Australia. The ANF's core business is the industrial and professional representation of nurses and midwives and nursing and midwifery in Australia.
- 1.3 The ANF's 170,000 members are employed in a wide range of enterprises in urban, rural and remote locations in the public, private and aged care sectors, including hospitals, health services, schools, universities, the armed forces, statutory authorities, local government, offshore territories and industries.
- 1.4 The ANF participates in the development of policy in nursing and midwifery, nursing and midwifery regulation, health, community services, veterans affairs, education, training, occupational health and safety, industrial relations, immigration and law reform.
- 1.5 The ANF represents Australian nursing internationally through links with other national and international nursing and midwifery organisations, professional associations and international labour organisations. The ANF is a member of the Commonwealth Nurses Federation and the South Pacific Nurses Forum, and is affiliated to the Australian Council of Trade Unions, The Australian Council of Social Services, the Public Health Association of Australia, the International Centre for Trade Union Rights and the Australian People for Health, Education and Development Abroad (APHEDA), which is the overseas aid agency of the trade union movement.
- 1.6 Trade agreements should not disempower governments, nor undermine public and social services; nor should they disadvantage local economies. Economic analysis of the benefits of bilateral free trade agreements has produced mixed results with disagreement on the benefits or otherwise for Australia, Australia's neighbours and poorer countries whose ability to trade may well be hampered by such agreements and who are often forced into accepting liberalised investment laws.

¹ ANF Victorian Branch, ANF Tasmanian Branch, ANF SA Branch, ANF WA Branch, ANF NT Branch, ANF ACT Branch, ANF Queensland Branch (Queensland Nurses Union), and ANF NSW Branch (NSW Nurses Association).



- 1.7 This submission will not address all of the terms of reference rather it will cover major issues of concern for the ANF and the nursing and midwifery professions. These include:
- the impact of the agreement on the provision and quality of health services;
 - the impact of the agreement on the nursing and midwifery professions;
 - the relationship between the agreement and labour conditions and human rights; and,
 - regional and demographic impact.

2. The impact of the agreement on the provision and quality of health services

- 2.1 The provision of health services is a public good and the responsibility of government. Governments provide public health services for social policy reasons that correct the failure of free markets to meet the broader community goal of universal and equitable access to health services. Consequently, the maintenance of a public health system as a publicly funded, fully accessible service is essential for the social benefit of all Australians. Any trade or investment agreement can potentially leave services currently regulated by the government open to foreign investment and control.
- 2.2 Australia's public health services are based on the principles of universal access at time of need and not on capacity to pay. The ANF supports these principles and contends that liberalising investment in public services such as health services, may lead to a range of problems including increased cost of services, decreased access to services, reduced conditions of employment and job security for workers and in the case of health, decreased quality of care for people requiring care. Essential social services may be compromised and must not be traded away in the name of free trade (eg. Pharmaceutical Benefits Scheme).

Recommendation:

Essential services such as health are excluded and unconditionally protected from any trade agreement.

3. The impact of the agreement on the nursing and midwifery professions

- 3.1 Nursing and midwifery in Australia are licensed professions. There are two levels of licensed nurse in Australia: registered nurses and midwives, who undertake a minimum of three years undergraduate preparation in the higher education sector at Bachelor degree level; and enrolled nurses,



who generally undertake their education in the vocational education sector at Certificate IV or Diploma level. Of the total number of regulated nurses, 81% are registered nurses and 19% are enrolled nurses.² There is also in Australia an unlicensed third level nursing support worker (assistant in nursing or personal care assistant) who are educated in the vocational education sector at Certificate III level and who work predominantly in the aged care sector.

- 3.2 It is a concern to the ANF that Australia's regulation of health professionals, such as nurses and midwives, can be seen as a barrier to free trade. The reason that nursing and midwifery is regulated is to ensure the safety and protect the public since in the provision of nursing and midwifery services there is the potential to do harm.
- 3.3 To work as a nurse or midwife in Australia, overseas nurses and midwives must meet immigration requirements, pass an English language test, and meet Australian standards of nursing and midwifery practice. These are the same standards; no more, no less, than those required of nurses and midwives educated in Australia. The standards are specified in the *National competency standards for the registered and enrolled nurse* (Australian Nursing and Midwifery Council). They are core competency standards, which all registered and enrolled nurses, local and overseas, must be able to demonstrate. The standards have been developed, reviewed and adjusted from time to time by the nursing and midwifery regulatory authorities in consultation with the profession, and are the foundation of modern nursing practice in Australia, which provides assurance to the public of a consistent, safe and effective standard of practice. These standards are not a barrier to trade, they ensure protection for people requiring and receiving nursing and midwifery services.
- 3.4 Any relaxation of the legislation regulating nurses and midwives and nursing and midwifery services will not be tolerated and inevitably have a negative impact on standards of patient care and will be detrimental to the ability of health services to provide quality care.
- 3.5 There are already adequate, accessible, fair and transparent processes in place in Australia to enable nurses and midwives, registered and enrolled overseas, to apply for registration in Australia. The nursing profession in Australia, through the nurse regulatory authorities, has done considerable work to develop and refine these processes, which are under constant evaluation. These processes ensure that common standards apply to nursing services in this country and safeguard the public in the provision of nursing services.

² Australian Institute of Health and Welfare. 2008. *Nursing and midwifery labour force 2005*. AIHW: Canberra.



- 3.6 An additional consideration is that developing countries need to be supported so that locally educated nurses remain available to serve their local population rather than seek work in other countries. At present there is little incentive for nurses in developing countries to stay, and consequently those countries struggle to retain their nurses, losing them to more affluent nations.
- 3.7 Inclusion of education services in FTAs also has an impact on nursing and midwifery. Australia is one of the few countries whose registered nurses are all prepared to the same educational standard – the Bachelor degree level, a standard to which most other countries are now aspiring. Nursing and midwifery services are essential to the health and well being of the Australian community and to the effective and efficient operation of Australia's health services. Any threat to the availability, high standard and national consistency of education in the higher education sector, is a threat to the viability of Australia's health system.

Recommendation:

Nursing and midwifery must remain regulated professions and in order to maintain standards and provide protection for the public, all nurses and midwives in Australia and all overseas nurses and midwives seeking to work in Australia must be required to meet the Australian Nursing and Midwifery Council's national competency standards. In addition, a minimum English language requirement is mandatory and no agreement should undermine that minimum requirement.

4. The relationship between the agreement and labour conditions and human rights

- 4.1 Any free trade agreement must not allow for weakening of internationally accepted labour laws and indeed should include conditions which raise standards to meet international Labour Organisation conventions. Within any FTA Australia and Korea must not engage in labour related activities that do not meet such conventions. This is unacceptable and cannot be condoned in the guise of a free trade agreement.
- 4.2 Within any FTA between Australia and Korea consideration must be given to any negative impact on employment, labour and environmental conditions.

Recommendation:

The FTA negotiations must examine how compliant Australia and Korea are with human rights and labour standards, including the core right of freedom of association and ensure compliance is currently or will be attained before an agreement is reached.



Recommendation:

The FTA negotiations must examine how recent trade developments have impacted on environmental conditions, particularly in Korea, and how an FTA with Australia will further impact on those conditions.

5. Conclusion

- 5.1 While recognising that trade with Korea is important for Australia's economy the ANF is not convinced that bilateral trade agreements necessarily provide the expected positive outcomes. The reality of bilateral agreements is often that one side, usually the bigger player, tends to win and the 'wins' are not related to trade ideals but to the weighted market objectives of that nation. In the current climate, wins for Australia may be hard to come by.
- 5.2 It is hoped that we can develop a nation building agenda capable of ensuring Australia can compete fairly and effectively in the international arena, an agenda based on industry development, job creation, skills and education, research and innovation. We urge that Australia's integrity, social assets and economy are not threatened by a view that 'free' trade must come at a cost.
- 5.3 It has been the ANF's experience that the level of understanding by Australian Government and Australian Government Departments about the nursing and midwifery profession in Australia is not high, which reinforces the need for regular and ongoing dialogue. It is imperative that the ANF continues to be consulted in relation to the FTA negotiations, particularly in relation to nursing and midwifery, but also in relation to other health services and issues, and education as it impacts on nursing. Decisions about nursing and health services could potentially have far reaching impact on the way these services are provided domestically and should only be made following extensive discussion and debate. The ANF is committed to positive and constructive dialogue.