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Migration Skill Corridor Report PHILIPPINES – GERMANY

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The global race for Filipino nurses – How much is in it for Germany?

Abstract

This working paper analyses the Philippines–Germany migration skill corridor, focusing on nurse mobility and the mechanisms of and interplay between state-led and private recruitment channels. Drawing on expert and practitioner interviews in both countries, documentary and statistical sources, as well as interviews and focus group discussions with Filipino nurses in Germany, it traces how the 2013 Triple Win bilateral labour agreement, subsequent memoranda of understanding, and the Global Skills Partnerships (GSPs) have institutionalised cooperation on skilled worker recruitment, language and preparatory training, and skills recognition while linking migration to investments in nursing education and technical-vocational training. The report shows that, despite a long-standing, protection-oriented labour-migration framework in the Philippines and dense bilateral arrangements with Germany, nurse deployment to Germany remains modest relative to demand, with private recruitment numerically dominant at present and state-led programmes facing high attrition and long timelines. It identifies three central bottlenecks—German language requirements, slow and deficit-oriented recognition procedures, and complex administrative processes on both sides—as key reasons why Germany competes unevenly with English-speaking destinations. The paper concludes by outlining policy options to deepen and rebalance the corridor, including streamlining recognition (especially for GSP graduates), expanding support during language training, raising ethical standards for private recruitment, and scaling up destination-led financial investments in training capacity and health-system resilience in the Philippines.

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1 Legal, political, and institutional frameworks

The Philippines–Germany migration skill corridor is embedded in long-standing bilateral relations that can be traced to the establishment of diplomatic ties with the Federal Republic of Germany in 1954 and the German Democratic Republic in 1973. Economic links are strong, with Germany being the leading EU partner for the Philippines in trade and investment, and with the mobility of workers becoming an important and formalized dimension of this relationship (Federal Foreign Office, 2025).

Migration from the Philippines to Germany began in the early 1960s with the small-scale recruitment of nurses by German hospitals – primarily facilitated through missionary channels, then taken over by the state –, followed by a larger wave of nurses and seafarers between 1971 and 1978 (Salazar, 1987). After a halt in formal recruitment, other flows – students, marriage migrants, tourists and irregular migrants – maintained and diversified the Filipino presence in Germany (Salazar, 1987). Nurse shortages resurfaced in the 2000s, and Germany again turned to the Philippines as a key international partner to fill gaps in its health workforce.

The regulatory cornerstone of the contemporary migration skill corridor is the 2013 government-to-government Triple Win bilateral labour agreement (BLA) for nurse recruitment, signed by the Philippine Overseas Employment Administration (POEA, now under the Department of Migrant Workers, DMW)¹ and Germany's Federal Employment Agency (BA) through its International Placement Services (BA-ZAV). The Philippines – together with Serbia and Bosnia-Herzegovina – was one of the first origin countries to sign the Triple Win agreement (recently, several agreements followed, including with Tunisia, India (see: <https://link4skills.eu/index.php/2026/07/10/india-germany/>)², Indonesia (see: <https://link4skills.eu/index.php/2026/08/06/indonesia-germany/>)³, and Jordan). The agreement frames recruitment as a "triple win": The aim is that Germany's economy gains needed nursing staff; the Philippine government increases its remittances inflow and strengthened worker protection abroad; and Filipino nurses benefit from equal treatment and protection comparable to German nationals. The agreement was renegotiated in 2025 and expanded through additional programmes.

The corridor is underpinned by a robust Philippine labour emigration framework built over more than fifty years of state-supported overseas employment, which has earned recognition as the "gold standard" in deployment and protection of overseas Filipino workers (OFWs) (Rother, 2022; Opiniano and Ang, 2024). The 1974 Labour Code provides the foundational legal basis of the subsequent laws, policies and regulations formulated through the years, to promote the protection and welfare of OFWs. The Migrant Workers and Overseas Filipinos Act of 1995 (RA 8042, amended by RA 10022 in 2010)

¹ The Department of Migrant Workers (DMW) was created by Republic Act 11641; it was signed into law on December 30, 2021, was established on February 2, 2022, and became fully operational in 2023. The functions of the POEA were subsumed under the DMW from 2022; before 2022, references to the regulatory functions of the DMW are attributed to POEA. The Pre-Employment Government Placement Branch (PEGPB) is the specific office in the DMW which handles the Triple Win program.

² Joshi, Varsha, Johanna Ullmann, Helen Schwenken & S. Irudaya Rajan (2026): India-Germany. Migration skill corridor brief. *Working Paper. Link4Skills*. https://link4skills.eu/wp-content/uploads/2026/07/L4S_MSCbrief_-India-Germany.pdf

³ Sarajwati, Mar'a Kamila Ardani, Johanna Ullmann, Evita Hanie Pangaribowo, Muhammad Arif Fahrudin Alfana, Bernadet Lioni Andri Damayani, Sukamdi Sukamdi & Helen Schwenken (2026): Indonesia-Germany. Migration skill corridor brief. *Working Paper. Link4Skills*. https://link4skills.eu/wp-content/uploads/2026/08/L4S_MSK-Brief_-Indonesia-Germany.pdf

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provides landmark comprehensive protection and the Department of Migrant Workers Act of 2021 (RA 11641) consolidates migration governance under a single agency, the DMW.

The Philippines has transnational tools in its efforts to promote the protection of OFWs by engaging destination countries, actively participating in multilateral discussions on migration, and forging BLAs and memoranda of understanding (MOUs). Following the directive of President Ferdinand Marcos Jr. to strengthen labour diplomacy, the DMW is currently reviewing or negotiating around 70 BLAs and MoUs, including 43 specifically concerning health workers, addressing brain drain, ethical recruitment and mutual benefits (DMW, 2025). The BLA with Germany, signed in 2013, is one of the few legally binding G2G agreements on nurse recruitment; it entails both governments sharing responsibilities for pre-migration preparations (language training and cultural orientation) and integration support upon arrival. Under the 2013 BLA, private recruitment agencies (PRAs) were initially excluded; the BLA also explicitly calls for both parties to "explore projects to sustain and promote human development in the Philippines" (Article IV).

The bilateral cooperation evolved in subsequent years: In February 2016, the POEA Governing Board allowed licensed PRAs to recruit nurses for Germany under GB Resolution No. 4, under which PRAs may not collect placement fees from applicants but may charge service fees from employers; other employer-borne costs include language preparation, visa fees, POEA processing fees, OWWA contributions, and airfare. This decision was grounded in Germany's 2013 Employment Ordinance, which allowed the immigration of recognised occupations — including nurses — through the private sector under the "White List" of the German Employment Regulation. In 2022, two further MoUs were signed: one with Germany's Federal Health Ministry (BMG) to facilitate the recruitment of additional health professionals, and another with the German Federal Employment Agency (BA) to extend recruitment to other skilled workers, including electrical mechanics and fitters, electronics servicers, cooks, hotel receptionists, waiters, and plumbers and pipe fitters (Deveza-Grau, 2024; Doctor, 2022).

In 2019, the Triple Win programme added the Global Skills Partnership (GSP), a dual-track training pilot scheme designed to strengthen health workforce development in the Philippines and to prevent nurse migration from leading to brain drain in the origin country. It includes a "home track" (in April 2025: 200 nurses) and an "abroad track" (in April 2025: 100 nurses) (GSP 2026). The GSP currently involves nursing schools at three Philippine universities (Northwestern University, Baliuag University, University of Baguio), non-hospital elderly and long-term care facilities (such as Milagros Elderly Home Care Services and Rippling River) in the Philippines, German language providers (Berlitz and Tandem), and German hospital partners (such as the University Hospital of Bonn, Klinikum Frankfurt-Oder), with GIZ-Philippines overseeing the implementation. The GSP in the Philippines was the first implementation of this approach globally and has since been (or will be) replicated in Ghana, India, Uzbekistan and Mexico (Rodriguez et al., 2025).

In 2017, a comprehensive Framework Agreement of Partnership and Cooperation between the EU and its member states and the Philippines was signed, including cooperation on migration and development. Beyond healthcare, Germany renewed cooperation with the Technical Education and Skills Development Authority (TESDA) – a Filipino government agency – in 2024 to strengthen technical vocational education and training (TVET), building on earlier collaboration in the 1970s when Germany shared its dual training model. In June–September 2025, TESDA undertook a capacity-building programme with Germany's Federal Institute for Vocational Education and Training (BIBB) to strengthen TESDA's research culture and promote innovation and internationalisation of TVET in the Philippines (L4S_PH_pol_08).

The relationship between the Philippines and Germany in terms of skilled migration governance is characterised as co-governed and established: German authorities are familiar with Philippine institutional structures and the Filipino nursing curriculum; the Philippine government has

representatives in the Philippines and in Germany to protect OFWs; and the German government has proactively reached out to renew agreements, recognising the Philippines as a reliable, experienced and professionalized international partner. The Philippines has been a priority country for healthcare recruitment for Germany for many years and only recently Germany has initiated new partnerships for healthcare recruitment with other origins, including with Indonesia. From the Philippines side, the German newly-formulated political agenda of fair and ethical skill migration partnership is perceived with interest.

Socio-economic drivers on the Philippine side are important for understanding the continued high level of migration, including opting for the Philippine-German corridor. As one practitioner put it:

"They say: We would of course stay in our home country if [...] there wouldn't be a need like economic pressure to leave — then we would stay of course with our families."
(L4S_PH-DE_prac_03)

Young Filipino women have the highest migration rate, reflecting the high degree of feminisation of nursing migration from the Philippines. On a broader view, this raises important ethical questions of health recruitment regarding care migration chains and their impact on the care and nursing sector in the Philippines as well as the conditions and constellations among left behind families and communities.

2 Implementation: Recruiting

As already mentioned, the Philippines was among the first three origin countries — together with Bosnia-Herzegovina and Serbia — to sign a Triple Win agreement with Germany in 2013. Nurse recruitment now operates through a dual system: the high standard government-to-government (G2G) Triple Win and GSP channels, and a large – and unevenly monitored – private recruitment industry.

The government-led recruitment channel (Triple Win and GSP)

Under the 2013 BLA, the DMW advertises vacancies, registers applicants, and facilitates employer interviews. Selected applicants undergo structured German language training (A1, A2, B1, B2), funded by the German employer. Upon completion, they process documentation and contracts with DMW, and receive pre-departure support and orientation from both DMW and the German Organization for International Cooperation (GIZ). For the GSP track, GIZ manages the recruitment process directly through information events at partner colleges in the Philippines, sometimes with the German employer present.

The private-led recruitment channel

Private recruitment agencies (PRAs), licensed and registered under the Filipino DMW rules, mirror much of the G2G process but assume operational responsibility independently. They advertise positions, screen candidates, organise employer interviews, manage language training — often providing allowances to recruits during training — and handle all documentation. Private recruiting plays a numerically dominant role: larger agencies aim to recruit up to 600 Filipino workers per year, compared to state-led programmes that reach approximately 50 — despite the high costs that are spent for it by the state agency.

Attrition and declining Triple Win numbers

After more than a decade, Filipino nurse recruitment to Germany remains modest relative to demand, and attrition within the Triple Win pipeline is substantial. Table 1 below shows declining applicant numbers and high drop-out rates before language training begins:

Table 1. Number of applicants in the Triple Win programme, 2019-2023.

Year	No. of applicants endorsed to GIZ	No. of shortlisted applicants	No. of selected applicants
2019	2,053	1,432	1,023
2020	403	387	210
2021	773	730	528
2022	509	439	340
2023	380	341	196

Source: DMW.

Deployment growth led by private recruitment

Deployment figures further illustrate a shift toward private recruitment channels. Between 2013 and 2015, the number of nurses deployed to Germany was minimal; after PRAs were officially authorised in 2016, totals rose sharply, suggesting that private recruitment accounts for the larger share of flows at present:

Table 2. Deployed nurses (new hires), all destinations and Germany, 2013-2022.

Year	Annual deployment (all destinations)	Annual deployment (Germany)	% deployed to Germany to total
2013	16,404	4	0.0
2014	19,815	52	0.3
2015	22,175	68	0.3
2016	19,551	157	0.8
2017	14,867	246	1.7
2018	15,028	507	3.4
2019	17,872	971	5.4
2020	5,787	668	11.5
2021	10,610	1,604	15.1
2022	9,060	1,173	12.9
Total	151,169	5,450	3.6

Source: Abstracted from Table 5 in Deveza-Grau (2024: 29).

Competing destinations and the language barrier

Germany faces significant competition from more traditional destinations, primarily English-speaking countries (such as the US, UK, Australia, Canada) and Gulf countries, which attract Filipino nurses without additional language requirements and with shorter timelines. The Philippines is described by German recruiters as a "booming market" for nurses and a highly contested one:

"The Philippines, it's really a booming market of nurses. And I think mainly really nurses, like, they are really flooded by countries that are interested in getting nurses. And particularly the ministry itself is, like, there's a lot of interest to cooperate in any way with Philippines and getting Filipino nurses."

(German private recruiting agency, L4S_PH-DE_prac_01)

At the same time, the language barrier is a serious locational disadvantage for Germany. American and Canadian recruiters have been reported to actively target candidates in Philippine German language courses:

"I always hear that in the Philippines, American and Canadian recruiters come to German language courses and poach people, saying, 'Hey, why are you learning German, it's really complicated, why don't you come and work for us instead?' I hear that in some language courses in the Philippines, there is a 30 percent dropout rate... a well-qualified nurse can work anywhere, why should she come to Germany of all places? We have the language, we have the mentality, we have an understanding of nursing, which is also a little different from elsewhere, so we really have a lot of locational disadvantages and we can't afford to behave like that."

(L4S_DE_prac_04)

The policy environment in Germany itself explains the emergence of the dual system with government-to-government (G2G) and private recruitment:

"It's actually the policy environment in Germany itself that triggered the dual track. In the beginning they said they wanted to get workers through the Triple Win, no other track. But then they came up with a whitelist of priority needs, priority sector, and that also included nurses. So aside from the GIZ-managed Triple Win project, they also authorised employers and recruitment agencies, foreign recruitment agencies in Germany, to get all types of workers, including nurses. That's when the dual track started. But up to this day, there really isn't much German-speaking engineers, or German-speaking accountants going to Germany. So, it's still mainly nurses, both in the Triple Win project and in the private recruitment track."

(Philippine policymaker, L4S_PH_pol_02)

From the German perspective, Philippine regulations are perceived as highly complex and demanding, particularly for new recruiting actors:

"In the Philippines, the legislation is really very, very complex in this area. There are also requirements for employers, who have to be accredited. And this actually starts with the job advertisement. They are obliged to report back regularly. [...] Well, it's quite complex. There is us as a service company, then there is the AHK [German Chambers of Commerce Abroad], then there is the Federal Employment Agency, and then there are usually also local partners with whom we work. And setting the whole thing up in such a way that the processes remain manageable and feasible is not always easy."

(L4S_IN-DE_prac_05)

Universities, churches, social networks, and welfare organisations play important roles in disseminating information about skilled migration programmes and opening up new partnerships and pathways. Personal connections and individuals function as important gatekeepers and transnational linkages.

3 Implementation: Skilling

Skilling is central to the Philippine–Germany corridor and is predominantly origin-country based, with an increasingly joint character through GSP initiatives.

Professional nurse recruitment via Triple Win and private agencies

For licensed nurses recruited after graduation, the main pre-departure requirement is acquiring B2-level German language proficiency, often complemented by orientation on German culture and healthcare norms. Many candidates already have work experience in the Philippines or overseas. Language training is employer-funded under Triple Win; an allowance is not provided

during the language training which poses a financial burden for less affluent candidates. Private agencies increasingly include allowances during training to attract and retain candidates.

Joint skilling and nurse graduate recruitment via the Global Skills Partnership (GSP) approach

Typically, GSP programs consist of regular degree courses in the origin country that are supplemented by opportunities for skilled worker mobility. In the case of the Philippines, the GSP is integrated into the regular nursing curriculum from the third year of study. Students can apply for the program and choose between a 'home track' and an 'abroad track'. The 'abroad track' provides targeted training tailored to the specific skills requirements at the destination and the partner employer; this includes, in particular, language training (often with a vocational focus), intercultural training, and specific professional course content (in the case of nursing in Germany, in particular tasks related to 'basic' care). The 'home track' generally omits the language component but provides supplementary vocational training that aims to address local skills demand at the origin. At a participating university, for example, the College of Nursing committed to building a laboratory to German partner specifications, including a high-fidelity mannequin for demonstration and training:

"That was explained to them very well after the interview and they signed the participation declaration. We have a ceremony after the orientation... I tell the students that this is a service of the university for your future. We're not getting anything from the program. We are not getting anything except the opportunity that we are giving to our students, that's the only thing. The equipment, the honorarium, the three faculty we sent there for training, these are from them [German partners]. They do not pay the school, but the [GSP] program uses our facilities. We assigned a room, a laboratory — that is the support from the university."

(Participating university, L4S_PH-DE_prac_10)

The GSP is implemented for selected third-year nurse students who undergo an exam and interview with Baliuag University and the University Hospital Bonn (UKB). Accepted students follow the Filipino standard nursing curriculum plus mandatory Saturday German language classes and receive two weeks each of theory and case presentation from visiting German faculty. Baliuag University monitors and supports GSP participants for 2–2.5 years. From the 2024 cohort onwards, participants must work as health professionals at least one year in the Philippines after graduation – instead of directly migrating abroad for work –, to comply with Department of Health (DOH) directives on domestic nursing shortages.⁴ As of the writing of this report, two batches of GSP participants from Baliuag University are now working in Germany — 18 in batch 1 and 40 in batch 2.

The standardised, US-oriented national nursing curriculum of the Philippines is a major asset making the Philippines attractive as a global skill mobility partner, reducing administrative burden or professional skills mismatch for German authorities:

"The advantage in the Philippines is that they have a standardized curriculum. Nursing training is standardized across the entire country. That makes the Philippines very attractive... only one sample report needed to be written for the Philippines. And the Philippine curriculum is already quite similar to the German one."

(German hospital, international recruitment manager, L4S_DE_prac_18)

However, the GSP approach of co-creating a skilled workforce is resource-intensive and most feasible for larger healthcare institutions:

⁴ <https://www.pna.gov.ph/articles/1198519>

"If I am a small business, perhaps without my own nursing school, then this is almost impossible to manage [the GSP program]. Simply because this expertise is often not available. You have to imagine that the lessons are mainly held in English. It was a huge hurdle for us to find suitable lecturers who felt confident enough to teach their profession in English, because English technical terminology is simply not standard in Germany."

(German hospital, international recruitment manager, L4S_DE_prac_18)

The workload for GSP participants is substantial and challenging. This refers to pre-arrival and post-arrival (see below) phases of the program. In the Philippines, "[t]heir [regular] studies continue. So, they are pretty busy during this time. They have language classes and then get additional lessons" (GIZ, L4S_PH-DE_prac_02).

Geriatric care gap

In Germany, hospitals as well as elderly-care homes recruit professionals from the Philippines. A challenge is the recognised curriculum gap for geriatric care in the Philippines. To address this, GSP students undergo specific training in elderly care facilities. Filipino stakeholders (policy-makers and education and training institutions) showed high interest in this aspect, partly in anticipation of the Philippines' own demographic ageing and elderly care demand.

For regular nursing students who are not on the GSP program, the laboratory equipment and high-fidelity mannequin donated by University Hospital Bonn remains available, demonstrating a broader spillover effect on domestic nursing training. Yet, we also heard of cases, where training equipment and technology has been moved from partner institution to partner institution. In this case sustainable skills development support for the local population remains limited. Stakeholders also reported about the valuable institutional and knowledge exchange between German and Filipino partners, where Filipino education organizations seem to benefit from insights into international training pedagogy and content.

4 Implementation: Recognition

Recognition, alongside the language requirements, is a central bottleneck in the corridor and a key reason why Germany is less attractive than other destinations, where both requirements are easier to meet.

Recognition tracks in Germany

Two main pathways exist for Filipino nurses after arrival:

- **Attending adaptation measures:** Entry as nurse assistant, typically with B1 German language; alternating work and training under §16d of the German Residence Act. After having completed these, including the B2 level in German, this path can be continued towards full certification.
- **Obtaining recognition and knowledge test:** Entry as nurse assistant, typically with B2 German language; oral and practical exams that lead to recognition and employment as certified nurse.

Stakeholders generally regard the adaptation measures track as less stressful, and it is reported to be the more commonly used pathway. The duration of both pathways varies considerably and is frequently prolonged by administrative delays (see below).

Language and recognition as compound barriers

The combination of pre-departure language demands and post-arrival work accreditation and recognition creates what one key informant describes as a multi-stage hurdle:

"Yes, it's the language and the recognition that is making the German labor market less appealing. Because learning the German language is difficult already but you have to go through several proficiency levels before you are even able to go to Germany ... And once you're there, you still need to go through an accreditation process for you to be able to practice as an entry-level nurse ... It takes a resolute candidate to go to Germany, the one who's really determined to go there and stay there [...]. I hear that those who are nearing qualification of permanent residency are only trying to get it for the purpose of being able to go elsewhere in the EU area."

(Philippine policy-maker, L4S_PH_pol_02)

Comparisons with other G2G programmes underline Germany's relative disadvantage as skilled migration destination:

"For example, if you enter JPEPA [Japan-Philippines Economic Partnership Agreement⁵], there is Japanese language training here in the Philippines. You can stop your work as a nurse once you enter the JPEPA programme because you have allowances. Whereas here [Triple Win] in the current set-up, it takes a lot of sacrifice for an already working registered nurse. Study German language and pass three or four exams — A1, A2, B1 and B2."

(Philippine policy-maker, L4S_PH_pol_02)

The comparison should not be read as an endorsement of the JPEPA model overall, since the pass rates of nurse candidates under the program in Japan's national nursing examination have remained low, so only a minority of candidates have been able to stay and work as registered nurses in Japan (Nagaya et al., 2024). The interviewee makes the narrower point that financial support during language training lowers the opportunity cost of preparation for already-employed nurses.

Bureaucratic delays in the recognition process itself compound frustration and dropout:

"If you have this application process where the paperwork takes so long to be approved, and the nurses are waiting... We've had some that took more than one year. Like, imagine waiting just for that one piece. Because after that, then we have to file the work permit. And then you also have to wait four or five months for that. And then you go to the visa appointment, and then you wait for your visa to be approved. So, it's just a very long, long, complicated process."

(German private recruiting agency, L4S_PH-DE_prac_01)

Filipino nurses typically arrive at B1 or B2 language level and continue language training while working as nursing assistants pending recognition, creating a dual work-study burden:

⁵ The JPEPA is a free-trade and investment agreement that includes the opportunity for healthcare workers to get access to the Japanese labour market that is usually relatively closed to foreign nationals. Given shortages for healthcare workers and an ageing society, the JPEPA-embedded Global Skill Partnership provides this employment path (see: <https://gsp.cgdev.org/legalpathway/japan-philippines-economic-partnership-agreement-jpepa/>).

"It's not easy for them. You know, the work-study thing is very stressful and having this pressure of passing the exam is also not great."

(German private recruiting agency, L4S_PH-DE_prac_01)

The GSP's recognition advantage and systemic critiques

The GSP is specifically designed to facilitate and accelerate the recognition procedure. Because curricula are jointly aligned and based on the bilateral agreement's sample report, candidates may be able to waive standard recognition or knowledge test procedures, making direct or full recognition before or shortly after arrival more likely. A formal recognition procedure still needs to be initiated, but GSP candidates can indicate in their visa application that standard procedures are not required.

Critically, the German recognition system systematically downgrades the Filipino Bachelor of Nursing degree to a vocational training qualification, reflecting a mismatch in educational systems rather than a genuine skills deficit:

"The biggest difference in this recognition process is mostly the 'basic care'. It's not because the nurses have a 'deficit'. It's because there's something in the German healthcare system that's different from the healthcare system in other countries. And the responsibilities of the nurse are different. But it makes it seem like the nurses from other countries are less."

(L4S_PH-DE_prac_01)

This illustrates how global power hierarchies and colonial legacies are embedded in professional recognition systems, with consequences for the sense of professional worth and the long-term retention of skilled migrants.

5 Implementation: Matching

Under Triple Win, matching is coordinated by the German Federal Employment Agency (BA) and its local Philippine counterpart, in cooperation with GIZ, which organises and coordinates interviews. For private recruitment, individual agencies manage the matching process according to their own standards and criteria.

Intersectionality and expectations mismatch

A persistent matching challenge relates to divergences between the task profiles of nurses in the Philippines and in Germany. As we mentioned earlier, Filipino nurses, trained within a more medically-oriented curriculum, may be unprepared for the heavier emphasis on basic care in German nursing practice. This not only means a downgrading of their qualification, but creates frustration on both sides:

"They're being enticed by high salaries in Germany, for instance, without them knowing how high the taxes are here, which need to be paid, how high the living costs are. And then also how different the tasks are or the work profile... 'Basic care' is not a part of the tasks in the Philippines while it is in Germany. So, everyone really should have this information on both sides because the frustration is getting bigger if this information is not shared... The German side is also getting frustrated because they're happy that they're finally getting some support or some new colleagues. But then they don't know how to wash the patients or do the beddings, because it's not part of the education in the Philippines or Indonesia."

(L4S_PH-DE_prac_03)

Barriers and ethical concerns

Unethical recruiters withhold essential information on conditions, procedures and regulations to bind candidates through involuntary dependency, exploiting vulnerable situations. Ethical matching under Triple Win and GSP contrasts with this: the lengthy pre-migration timeline in these programmes, while frustrating, strengthens the employer-employee relationship and trust before arrival. Positive employer experiences underscore the importance of adequate institutional support:

"That employer is really good about working with international nurses... It just depends on the facility and the resources they have to really build a program that is supporting the nurses."
(German private recruiting agency, L4S_PH-DE_prac_01)

6 Implementation: Migration/Mobility

As an origin country with a long-established migration management system, the Philippines regulates worker exit closely, which includes provisions to safeguard minimum standards and safe migration channels. Direct hiring by foreign employers is generally banned; Filipino workers are deployed through licensed PRAs or via DMW under G2G schemes. Around 90 percent of legally deployed OFWs annually are hired through recruitment agencies, with the remaining 10 percent comprising direct and government hires.⁶

Workers who complete the DMW process receive the Overseas Employment Certificate (OEC), which must be presented at immigration. Without an OEC, departure is barred. At the point of exit, immigration officers may "offload" departing workers — i.e. prevent departure of those suspected of irregular migration or trafficking — a measure that, despite good intentions, has been shown to affect large numbers of legitimate travelers and to raise civil rights concerns.⁷

Still, this approach and its infrastructure has been perceived as insufficient:

"Our impression is sometimes that the Philippines is overwhelmed with requests from all over the world and that they can barely keep up with responding to partner requests. And that also presents us with the problem of response times, in that it sometimes takes weeks or even months to get a reply because they are simply overloaded."
(L4S_DE_pol_11)

The Philippines has also used labor mobility-restricting policies to protect its domestic health system. During COVID-19, the Philippines initially banned nurse deployment, later replacing the ban with a numerical cap (initially 5,000, then 7,500 per year). This illustrates how migration governance for an emigration state encompasses both facilitating and regulating immobility (Ortiga, 2025).

The German migration process is broadly perceived as equally complex and time-consuming:

⁶ Although there is a ban on direct hiring, some employers, such as high officials and heads of international organizations, are exempted from the ban. Employers can apply to be exempted from the ban, but overall, the number of direct hires in relation to total deployment remains small. DMW also has some room for government hires.

⁷ According to the civil society organization Right Across Nations (RAN), the protection-motivated practice of 'offloading' has produced a high number of wrongful acts. Alone in 2022 more than 32,000 Filipinos were offloaded from their flights. From these, only 1.4 percent were victims of illegal recruitment or trafficking, <https://rightsacrossnations.org/current-projects/offloading-in-the-philippines-a-civil-rights-concern/>.

"The only other thing is just [...] how long it takes for all of the, the bureaucracy, the paperwork. Because I think that's really the only other bottleneck."
(German private recruiting agency, L4S_PH-DE_prac_01)

"People who leave our program are the ones who get promised that they will get to Germany faster. Because it's a very long journey... If it's taking one year to get your qualification recognition application approved, you get impatient and you think that we're lying to you or something... I was like, how are you doing that [getting a nurse there in six months]? Because I think that is impossible."
(German private recruiting agency, L4S_PH-DE_prac_01)

7 Implementation: Integration, retention, circulation, return

The broad picture from both Filipino and German informants is that welfare problems for Filipino nurses in Germany are not the primary concern. The challenges are seen to revolve around professional recognition, retention, and the adequacy of support during and after the transition.

GIZ's onboarding role and the coach-motivator model

Upon arrival, GIZ continues to provide onboarding support and orientation. The employer may assist with housing, with nurses shouldering partial or full accommodation costs. A notable Philippine-side innovation is the GIZ coach-motivator role, illustrated by the experience of a returned nurse who now supports new Triple Win recruits, so far, a rare case:

"We have a colleague in the Philippines whom I hold in high regard. She worked with [a healthcare company] and Triple Win in Germany for an extended period of time. She is now back in the Philippines and helps me with teaching nursing assistants... I think that should be the future: enabling exchange and supporting each other. And of course, this also helps, especially for our Filipino colleagues, because she is a kind of role model, as she can really tell them what it feels like when you arrive."
(GIZ, L4S_PH-DE_prac_02)

Retention, poaching and contract breaches

A significant challenge for ethical employers is that nurses sometimes change employers before completing their contract or are "poached" by other hospitals, creating financial losses for those employers who have invested in employer-pays recruitment and language training:

"This practice is regrettable, especially for ethical employers who adhere to the employer-pays-all principle... Recently, one employer asked our company to shoulder 50 percent of the loss in case of breach of contract. Since the employer has a good record, our company agreed to this arrangement and will try it for a year."
(Recruitment agency, L4S_PH_prac_07)

On the other hand, the strong investment by ethical recruiters pays off in long-term retention:

"Through all of the other hardships and the challenges, I think it makes it worth it for the nurses. Because there's not many people, at least I've seen in our program, leave once they're here. Like, you asked me the question, right? Who leaves? Like, not many leave. Because I do think at the end of the day, maybe they leave the employer and go somewhere else, but

they're still in Germany."

(German private recruiting agency, L4S_PH-DE_prac_01)

Circularity and return

The hoped-for circularity and return migration under Triple Win and the BLAs has not materialised strongly. Filipino nurses predominantly opt to remain in Germany or move onward within Europe. Stakeholders report that proximity to permanent residency may actually incentivise remaining — or using Germany as a gateway to mobility elsewhere in the EU. However, as discussed above, the case of a returned Triple Win nurse now mentoring new cohorts is a promising, if isolated, form of "skills circulation." Knowledge transfer by Germany-based nurses, for example in geriatric care, may offer a more realistic channel.

The language-training allowance gap under Triple Win remains a significant structural barrier to retention within the G2G programme. Triple Win applicants do not receive allowances during language training. For nurses supporting families, especially those outside Metro Manila who also bear living costs, this is prohibitive and drives them toward private recruitment channels.

Key informants acknowledged that language training is extremely challenging for Filipino applicants. Language training is provided free under both Triple Win and private recruitment. However, Triple Win applicants are not provided with allowances — a major reason for the smaller number of applicants.

Racial discrimination and experiences of exclusion and exploitation in Germany remain relevant barriers to well-being and full integration (see, OECD, 2024; Can et al., 2022).

8 The role of technologies

Technological factors did not emerge as a dominant theme in Philippine-side interviews. AI-driven matching platforms and remote credentialing were not prominent themes in the corridor data; where technology was mentioned, it mainly concerned language courses and recruitment.

During the COVID-19 pandemic, GSP classes and German language training for Triple Win and private recruitment agencies moved online, demonstrating the viability of digital skilling. Online delivery has continued in some contexts, offering advantages for learners across the dispersed Philippine archipelago. However, the infrastructure of Philippine educational partners does not always meet the standards required for high-quality online delivery, and geographical challenges — including hard-to-reach islands and climate-related disruptions — add complexity. German stakeholders note that digitalization of origin-country skilling requires significant financial investment, typically from the German employer side, making it dependent on business-management logics.

Online recruiting platforms for employers and candidates and online job interviews have become standard for matching. These are saving costs on both sides. On-site employer visits by German hospitals are occurring only occasionally — often combined with networking and partnership-building events.

9 Partnership/Program monitoring evaluation

Under Article V of the Triple Win BLA, the agreement is monitored by a joint committee or technical working group (TWG) comprising representatives headed by senior officials from both parties. The TWG is tasked with adopting implementing guidelines, monitoring and evaluating programme outcomes, making recommendations and proposing amendments, and convening regular alternating

meetings in the Philippines and Germany. The deliberations and findings of the TWG are not widely shared outside of its members, limiting broader stakeholder insight and accountability.

Those directly involved in Triple Win view the programme as broadly successful:

"We think the Triple Win program is very successful. It has been established since 2013, we have upgraded it now with the Global Skill Partnership... We see this as the gold standard and because we have this principle of fair recruitment... the nurses will be paid the same as a German nurse, of course, they also have the same work obligations. Equal treatment is the standard and what's very important is, the contracts are concluded indefinitely, so the nurse can decide to work as long or she wants to work in the company. In case he or she quits the job, she or he can find another job in Germany. Germany as a country also has reformed the immigration law and we offer to all skilled workers to take their family along."
(L4S_PH-DE_exp_04)

For Germany, the demographic rationale is equally clear:

"Triple Win is focusing on areas where we have a shortage of labour. So, our gain is we reduce the shortage of labour. I think the average age in Germany is above 40 by now, in the Philippines, I think it's 25 and we have fewer young people and more old people. And if you continue like this, we will face a massive shortage of labour."
(L4S_PH-DE_exp_04)

Rodriguez et al. (2025) conclude that GSP have contributed to the training of nurses, many of whom presumably remain in the Philippines through the 'home track'. Further studies are needed to examine the medium- and long-term impact of GSP on origin and destination countries, including comparing the professional trajectories of 'home track' and 'abroad track' professionals.

10 Consequences and effects

The corridor produces differentiated consequences for different actors and raises broader questions about the distribution of costs and benefits of skilled labor mobility.

For Germany: The corridor helps address acute labour shortages and demographic pressures without requiring fundamental reform of domestic healthcare training. The German labor market gains motivated, qualified nurses on indefinite contracts with equal-treatment provisions. However, German dependence on foreign labour raises ethical questions about shifting the costs of training and care-workforce reproduction to origin societies.

For the Philippines: Nurse migration contributes substantially to remittances and household welfare and has become embedded in the national development and economic strategy. At the same time, domestic health services suffer from under-investment, poor working conditions and salaries, and nursing shortages — with the Department of Health (DoH) and the Department of Migrant Workers (DMW) holding contradictory positions on deployment:

"There is a paradox in the government in the Philippines because, for example, the Department of Health would like to retain the nurses, but at the same time the Department of Migrant Workers is very open to send workers abroad."
(L4S_PH-DE_prac_03)

For employers and recruitment agencies: Government-led programmes such as Triple Win and GSP, and private recruitment, open pathways to reliable, motivated nurses. Because German regulations do not allow fees to be charged to nurses, and because the employer-pays standard set under Triple Win was extended to licensed PRAs in 2016, recruitment, language-training and processing costs are borne by employers. Per-recruit costs are therefore high, and employers face ongoing attrition and poaching risks. Ethical employers who invest most face the greatest financial exposure when contracts are breached.

For nurses and their families and communities: Migration to Germany offers significantly improved earnings and life opportunities. Triple Win and GSP participants in particular stand to gain higher earnings and can enhance the welfare of their families. Yet, the journey is demanding, with language hurdles, recognition barriers, professional downgrading, high taxes, high living costs, adaptation to a different care model, and potential discrimination all weighing against the decision. Nurses who are "resolute" and "really determined" succeed; others drop out.

The question of whether ethical recruitment is only fully assured under G2G arrangements — and whether G2G channels can ever meet the volume of skilled worker demand and supply — remains open and is a productive tension within the corridor. The GSP gains — high-tech equipment and professional knowledge shared with non-GSP students, faculty exchanges, and updated curricula — represent partial but genuine co-development benefits for the Philippine side, yet on patchy and on small scale.

11 Summary of key points

1. **An established, nurse-centred corridor with a dual system of public and private recruitment:** Since the 2013 Triple Win agreement between Germany and the Philippines, the corridor has become one of the most institutionalised nurse migration pathways worldwide, with cooperation now extending to GSPs and new memoranda of understanding covering skilled occupations beyond nursing. These bilateral efforts have contributed to making the Philippines currently the fourth largest origin country among skilled labor migrants in Germany.
2. **State-to-state agreements raise ethical standards, although most nurses migrate via private channels:** While Triple Win and GSPs set high benchmarks for ethical, state-led recruitment, most Filipino nurses in Germany still arrive via private recruitment, where practices vary widely and regulation and oversight remain limited. G-to-G arrangements alone cannot meet the demand for nurses, which makes corridor-wide standards and enforcement across both channels increasingly important.
3. **Triple Win and other G2G programmes are contested and negotiated:** While the governments of both Germany and the Philippines frame the corridor as a prime example and win for multiple stakeholders, including employers and migrants themselves, ongoing debates about continuous brain drain, health care system sustainability in the Philippines, cost sharing, programme access, and discrimination show that mutual benefits cannot be taken for granted and require continued negotiation, monitoring, and greater investments into skills development particularly in the Philippines.
4. **Language and recognition bottlenecks make Germany less attractive than English-speaking destinations:** German language requirements and demanding recognition procedures raise quality but also cause high attrition and perceived downgrading of Filipino qualifications, making Germany less attractive than some English-speaking destinations.

5. **GSPs link migration to training investments but remain small relative to outflows:** GSPs channel part of the demand for Filipino nurses into concrete investments in labs, curriculum adaptation, language training and faculty exchange, strengthening local training capacity in Filipino healthcare training institutions. Yet, the number of students and institutions reached so far is modest compared to the scale of nurse emigration, so the benefits remain concentrated in a few pilot sites. The programme is implemented so far by well-equipped, larger health facilities with respective resources, knowledge, and long-term planning.
6. **Filipino diaspora in Germany is a key actor in integration and advocacy:** Well-organised Filipino nurse associations and, in isolated cases, returnees influence recruitment norms, give integration support and program design, offering feedback to both government and employers and highlighting gaps in fairness, recognition and everyday working conditions.

12 Good practices

1. Sustained bilateral state cooperation

Philippines–Germany cooperation on migration is a notable example of governments working together to set shared principles, maximise the benefits of migration, and minimise costs for both parties. The 2013 BLA established the standards for ethical recruitment — no placement fee for applicants, employer-funded language training, equal treatment of Filipino nurses with German counterparts — and these standards were extended to authorized private recruitment agencies in 2016. The joint committee/TWG provides a mechanism for monitoring, review and amendment. The BLA has shown flexibility: it was supplemented by MoUs, GSPs, and TESDA–BIBB cooperation as needs evolved.

2. The Global Skills Partnership Model

The GSP is the first implementation of the GSP approach globally, and integrates skilling, language training and curriculum alignment into the nursing education process. Key features include (a) Selection of nursing students from the third year for a 2–2.5 year tracked programme, (b) Saturday German language classes and visiting German faculty teaching theory and case management, (c) Training in elderly care facilities to address a recognised curriculum gap, (d) Employer-donated laboratory equipment that benefits all students, and (e) Faculty exchanges that enhance domestic teaching capacity. Rodriguez et al. (2025) confirm that GSP has trained hundreds of nurses, many of whom remain in the Philippines. The GSP also serves as a model for bilateral investment in origin-country health system strengthening, not merely as a channel for outward flows. The skill development investments are essential to realize the positive impact on the workforce development at the origin.

3. The GIZ as corridor-spanning implementation partner

GIZ's presence in both the Philippines and Germany is a distinctive feature of this corridor. In the Philippines, GIZ handles cultural orientation, monitoring of nurse applicants, and, through the coach-motivator role, peer motivation drawing on a returned nurse's experience. In Germany, GIZ provides onboarding, integration and orientation support upon arrival. This dual-country presence facilitates coordination between origin and destination, maintains communication lines, and bridges the gap between policy commitments and on-the-ground implementation.

4. Diaspora and returnee involvement: The corridor offers examples of Filipino nurses and diaspora organisations in Germany becoming important and increasingly recognized voices on integration, rights, and programme design and evaluation. The engagement of a returned Triple Win nurse as a GIZ coach-mentor for new cohorts is a promising example of how migrants' experience can improve orientation and the management of expectations. Such returns remain rare, however. A more realistic and scalable avenue may be knowledge transfer by Germany-based Filipino nurses to nursing schools

and practicing nurses in the Philippines, for instance in geriatric care, where the Philippine curriculum has a recognized gap and domestic demand is expected to grow.

13 Policy recommendations

1. Promote the signing and strengthening of BLAs and MoUs with robust co-development components

Bilateral labor migration agreements are essential tools for establishing shared principles of ethical recruitment and mutual benefit. Based on the Philippines–Germany experience, BLAs and MoUs should not only facilitate recruitment but also embed commitments to invest in origin-country health and skills systems, address brain drain concerns, and ensure ethical recruitment throughout the supply chain — including in the private sector. The Philippine government’s experience of actively negotiating 70 BLAs and MoUs across health and non-health sectors provides a model for other origin countries. Agreements should include provisions for regular joint monitoring, transparency of TWG discussions, and meaningful participation by migrant workers and diaspora organisations in programme design, implementation, and review.

2. Reduce friction in language and recognition pathways while maintaining worker-protection standards

The compound burden of multi-level language certification (A1–B2 in the Philippines) and post-arrival recognition procedures is the primary structural barrier to Germany’s attractiveness relative to competing destination countries. Philippine and German authorities should jointly explore: (a) Financial support or allowances for Triple Win candidates during language training, comparable to the allowances provided under JPEPA; (b) Streamlined, partially automated recognition pathways for nurses trained under GSP-aligned curricula, building on the existing sample-report mechanism; (c) Transparent, proactive information campaigns that give prospective migrants full and accurate information about taxes, living costs, housing, task profiles, and recognition timelines — reducing expectations mismatches and drop-outs; and (d) Expanded German consular and administrative infrastructure to reduce visa-processing backlogs.

3. Strengthen fair and ethical recruitment by including migrant workers as stakeholders with shared responsibilities

Both the Philippines and Germany are strongly committed to ethical recruitment, as demonstrated by the employer-pays principle, licensing requirements, and the voluntary healthcare professional quality seal (BMG, n.d.)⁸. Yet, we observe that ethical recruitment frameworks are largely silent on migrant workers’ responsibilities to abide by contract terms, creating leeway for contract-breaking that impose costs on ethical employers and may ultimately undermine fair-recruitment sustainability. There is a need to expand the ethical recruitment discussion to treat migrant workers as active stakeholders with both rights and commensurate responsibilities — without eroding labor, social and human rights — so that the burden and risk of ethical recruitment is shared more equitably.

⁸ <https://www.faire-anwerbung-pflege-deutschland.de/>

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List of interviews

This corridor report is based on expert interviews conducted between February and October 2025 by the Link4Skills Philippines-Germany research team: 10 corridor-specific interviews, 8 country-specific interviews in the Philippines and 19 country-specific interviews in Germany. Interviewees included policy-makers at various governmental levels, and practitioners and experts at the implementation level (public or private recruitment agencies, language and professional training providers, implementing organisations, professional chambers, trade unions, civil society and faith-based organizations, migrant communities and returnee associations, and employers). In addition, interviews and focus group discussions were conducted with nine Filipino nurses in Germany, some of them jointly with the Indonesia-Germany corridor team. Research in the Philippines was carried out by the Scalabrini Migration Center; research in Germany by the Institute for Migration Research and Intercultural Studies (IMIS) at University of Osnabrück. Interviews are referenced by anonymized transcript codes.

Corridor-specific interviews

L4S_PH-DE_prac_01
 L4S_PH-DE_prac_02
 L4S_PH-DE_prac_03
 L4S_PH-DE_exp_04
 L4S_PH-DE_exp_05
 L4S_PH-DE_exp_06
 L4S_PH-DE_prac_07
 L4S_PH-DE_pol_08
 L4S_PH-DE_exp_09
 L4S_PH-DE_prac_10

Country-specific interviews: Philippines

L4S_PH_pol_01
 L4S_PH_pol_02
 L4S_PH_exp_03
 L4S_PH_pol_04
 L4S_PH_pol_05
 L4S_PH_pol_06
 L4S_PH_prac_07

L4S_PH_pol_08

Country-specific interviews: Germany

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L4S_DE_prac_10
L4S_DE_pol_11
L4S_DE_prac_12
L4S_DE_pol_13
L4S_DE_prac_14
L4S_DE_pol_15
L4S_DE_prac_16
L4S_DE_pol_17
L4S_DE_prac_18
L4S_DE_prac_19

Non-corridor specific interviews

L4S_IN-DE_prac_05

Interviews with Filipino migrants

L4S_PH+ID_migrant_01
L4S_PH_migrant_03
L4S_ID+PH_migrant_01
L4S_PH_migrant_05

Key information

General characteristics of the corridor in size and timing	The Philippines-Germany MSC can be described as an established one that dates back to the recruitment of a small number of nurses in the 1960s and 1970s; renewed by a formal expression of interest on the part of Germany to recruit healthcare workers through the signing of the Triple Win program in 2013. The Triple Win program was supplemented by the participation of private recruitment agencies in nurse recruitment, which resulted in the increase in nurse recruitment. The Global Skills Partnership (GSP) program was added in 2019 to start language training and theory and case management in the regular Filipino nursing curriculum.
Relevance of formal, state-led skill partnerships and agreements?	The government-to-government agreement of the Triple Win program played an important role in setting the standards for ethical recruitment – no placement fee for applicants, language training costs are shouldered by the employer, equal treatment of Filipino nurses vis-à-vis German counterparts. When private recruitment agencies were allowed to recruit nurses, these same standards were applied to them as well on the side of the Filipino emigration governance. The communication lines between the two countries are open.
Key driving forces of skilled migration flows	The key driver is the demand for nurses in Germany as well as the nurse supply in the Philippines. To address the domestic labour shortage, the German government, employers and the GIZ have turned to foreign nurse recruitment. There is a global competition in the recruitment of healthcare workers from the Philippines. The corridor is shaped by state-led institutionalization and governance of skilled mobility, particularly in the healthcare sector. Private and civil actors play a minor, but increasing role. The private recruiting field is mixed, with engaged German recruiters eager to follow ethical standards, but also ‘black sheep’.
Degree of dynamism within the corridor	The Philippines-Germany MSC is an established sector-/occupation-specific corridor. It shows signs of flexibility in making adjustments, if necessary. When nurse recruitment under the Triple Win program was lagging, recruitment was extended to the private sector. The joint committee or technical working group established under Triple Win is a mechanism to jointly monitor and assess the implementation of the agreement and recommend changes and amendments. However, the discussions of the committee are known only to the members and not publicly and transparently shared. This makes it difficult to have a more comprehensive understanding of the design, implementation and outcomes of the government-led/initiated programs. While the numbers are significant (from the German perspective), the dynamism is from the Philippine side low in comparison to other destinations.
What perceptions do actors have about (to-be/skilled) migration? Is it a controversial topic?	In the Philippines, the issue of nurse migration is complicated – for the Department of Health, there is a nursing shortage in the country. In terms of supply, the Philippines ‘produces’ many nursing graduates, who prefer to work in urban areas, and after gaining experience, set their sights to working abroad. The huge salary differentials between the Philippines and other global labor markets cannot be narrowed down. From the German side, the Filipino nurse migration is generally perceived as rather positive, imbued with cultural stereotypes (catholic, friendly,

	hard-working, feminized, high qualified). This representation depicts Filipino nurses as 'ideal' for the German healthcare sector. Government-led programs do not substantially address the loss of trained nurses for the Philippines. The Triple Win GSP program is promising in terms of skills development investment, but so far remains small scale. The 'wins' are clearer for the destination country and the nurses. From the Filipino nurse side, programs such as Triple-Win and GSP are often perceived positive. Germany seems to remain an interesting destination country for Filipino nurses, yet, it remains open if Filipino nurses also want to stay or move on to other European countries in search of better skill recognition, less bureaucracy, better salary and easier language requirements.
Dominant skilled migration type	Germany is recruiting mostly nurses from the Philippines – and with the signing of an MOU, other healthcare workers in the future. There is also an MOU to recruit other skilled workers, but according to a DMW key informant, the volume remains small.
Location of skilling	Skilling in terms of education or training takes place primarily in the Philippines. In terms of work experience, nurses may not only have work experience in the Philippines but also in other countries. German language training is also carried out mainly in the Philippines, prior to migration. The GSP is an interesting scheme as language training and preparation to the German nursing context takes place during the regular nursing training, with the expectation that those who go through the 'abroad track' have facilitated/accelerated recognition. A critical factor remains German language proficiency. Ideally, it should be B2; B1 level is allowed for deployment to Germany and nurses are expected to continue the language training upon arrival. However, the costs of language training in Germany will have to be borne by the nurses, if employers do not provide support.
Skill sectors/occupations that shape the corridor, including new(er)/emerging occupations	Nurse and elderly care migration is the main characteristic of this corridor, and this dates back to the 1960s and 1970s. Although gender disaggregated data is not available, the predominance of women nurses renders this as feminized migration. Based on the MOUs signed between the Philippines and Germany, healthcare professionals and skilled workers in other sectors may be recruited to Germany too.
Skill levels that shape the corridor	Presently, with nurse migration, highly skilled; in the coming years, this may be supplemented by medium skilled workers in other sectors, such as hospitality. There is the problem of skills mismatch, as nursing is vocational training in Germany (so-called 'apprenticeship'), while it is academic training in the Philippines ('Bachelor of nursing'). Due to the high-level standardization of the profession, however, the mismatch can be leveled out via additional training. Risk of deskilling remains.
How do dynamics in one corridor affect other corridors?	Germany as destination has the disadvantage of the German language requirement – in contrast to traditional English-speaking destinations. As the Philippines is increasingly 'overrun' by global requests, Germany is also looking for 'alternative' or 'additional' partnerships, including with Indonesia.