Professional Mobility
Experiences of Mobile Medical Professionals

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Abstract

Health professionals move for various reasons and for various periods of time, which entails consequences at various levels, ranging from governmental decisions regarding the policy of health mobility to shifts in mobile medical professionals’ attitudes towards sojourning. The present paper looks into the self-perceptions of working and living abroad of mobile medical professionals. An online questionnaire was conducted in order to gain an insight into how mobile medical professionals experience living and working in a foreign environment and which factors make it easier or more difficult. The results suggest a close link exists between the perceived willingness to continue the sojourn and the degree of identification with the new culture, satisfaction with professional functioning and satisfaction with social networks. Even though the majority of the respondents feel well adjusted in their new working environment, they experience their social networks as inadequate, which sometimes provides mobile medical professionals with an impetus to abort their careers abroad.

Keywords: medical professional mobility, host institution, proactive individual initiative, motivation, cross-cultural adjustment

Introduction

Statistics show that the proportion of foreign mobile medical professionals, i.e. medical doctors and nurses, within health workforce are high in a number of Western European countries. Wismar et al. (2011) give an overview of the related statistics:

In 2008 the proportion of foreigners within all new health workforce entrants was particularly high for medical doctors in the United Kingdom (42.6%), Belgium (25.3%) and Austria (13.5%); for nurses in Italy (28%), the United Kingdom (14.7%) and Belgium (13.5%) (…) In Finland, 43.2% of newly licensed dentists from 2006 to 2008 were foreign trained.

This has political implications: according to Wismar et al., policy makers have to decide how to manage health professional mobility. Methods that may be employed include bi-lateral agreements, structured international recruitment, facilitated recognition of diplomas, joint training programmes and other initiatives (2011:4). This means that various governmental layers are involved in managing the mobility of medical professionals: according to Green Paper On the European Workforce for Health, the increasing mobility of health professionals ‘may require workforce managers at local and/or national level to review the adequacy of their recruitment and professional development measures’ (2008:9). It is further specified that, among other initiatives, this may include ‘promoting more social and ethnic diversity in recruitment’ and ‘developing possibilities for providing language training to assist in potential mobility’ (2008:7-8).

The above overview shows that medical professionals—sometimes only temporarily mobile and sometimes with long-lasting intervals of work abroad— are. This has political implications: according to Wismar et al., policy makers have to decide how to manage health professional mobility. Methods that may be employed include bi-lateral agreements, structured international recruitment, facilitated recognition of diplomas, joint training programmes and other initiatives (2011:4). This means that various governmental layers are involved in managing the mobility of medical professionals: according to Green Paper On the European Workforce for Health, the increasing mobility of health professionals ‘may require workforce managers at local and/or national level to review the adequacy of their recruitment and professional development measures’ (2008:9). It is further specified that, among other initiatives, this may include ‘promoting more social and ethnic diversity in recruitment’ and ‘developing possibilities for providing language training to assist in potential mobility’ (2008:7-8).

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a different linguistic and cultural profile, and how this affects their motivation to continue living in that environment.

The article will be divided into four parts. Part one deals with the stages of the stay abroad, i.e. the preparation stage and the stay abroad itself, as outlined in the literature. Aspects such as the support on the part of the host institution, individual initiative, motivation, cross-cultural adjustment and identification with the new culture will be taken into account (Black and Mendenhall 1990, Ricento 2005, Richardson et al. 2008, Templer et al. 2006). In order to present a holistic view on medical professional mobility, both the professional and private component of the stay abroad will be considered. In Part two, the findings of a small-scale European study will be presented, analysed and mapped onto the theoretical implications regarding professional mobility found in the literature. In this way, the article will provide a view on how the various aspects and stages of professional mobility within a medical context are experienced by mobile medical professionals. A discussion of the results will follow (Part three) and, finally, suggestions for further research (Part four) will be made.

**Theoretical Framework**

**Preparation: Host Institution Support**

Migrating to live and work in a foreign country, even if it is a short-term stay, can be a life-changing event. Therefore, throughout the academic literature, the preparatory stage of the stage abroad is discussed extensively. Some scholars (Black and Mendenhall 1990; Richardson et al. 2008) analyse preparation from a two-fold perspective, namely, the role of the host institution and that of the mobile medical professional were looked into. As far as institutional support is concerned, providing medical professionals with a realistic job and living condition preview and cross-cultural training are considered to play an important role in successful cross-cultural adjustment (Black and Mendenhall 1990; Richardson et al. 2008).

Drawing on previous research, Templer et al. (2006) provide substantial reasoning and guidelines for supporting mobile professionals. Providing a realistic job preview (RJP) and realistic living condition preview (RLCP), according to the authors, is considerable support before the start of the individual’s stay abroad:

> RJP provides the basic information specific to the work domain necessary in the process of adjusting to a new work setting in familiar or unfamiliar cultural settings. (...) RLCP provides specific information related to the general living conditions, lifestyle and daily routines in the new cultural setting (158-159).

Previews provide mobile professionals with an idea of what they should be expecting to find in the new environment once their stay abroad starts.

Cross-cultural training is one more type of host institution support that some scholars suggest to provide mobile professionals with. Its positive effects are reported extensively throughout the literature (Black and Mendenhall 1990; Templer et al. 2006).

Black and Mendenhall summarize the efficiency of cross-cultural training under the following dimensions:

> Skills related to the maintenance of self (mental health, psychological well-being, stress reduction, feelings of self-confidence), skills related to the fostering of relationships with host nationals, and cognitive skills that promote a correct perception of the host environment and its social systems (1990:117).

In other words, cross-cultural training facilitates developing the above listed skills in mobile professionals. Importantly, Black and Mendenhall take these three dimensions, namely, the self dimension, the relationship dimension and the perception dimension, and analyse how cross-cultural training improves the well-being of mobile professionals. As far as the self-dimension is concerned, cross-cultural training manages to raise the individuals’ levels of ‘confidence in themselves and their ability to act effectively in a cross-cultural setting’ (1990:123). The authors argue that cross-cultural training helps enhance the skills required to establish effective relationships with members of other cultures and therefore the relationship dimension is positively affected. Finally, cross-cultural training also carries important implications as far the perception dimension is concerned. Throughout cross-cultural training mobile professionals receive ‘information about how people of other cultures...
view the world as well as their cognitive tendencies’ (1990:123). Importantly, cross-cultural training provides mobile professionals with an opportunity to learn some culture- and communication-related patterns that they may use as the basis for acquiring an adequate perception of the host culture.

The importance of cross-cultural training is also discussed in Templer et al. (2006). Importantly, the direct links between effects of cross-cultural training and cross-cultural adjustment are established. Templer et al. suggest that ‘expatriates who received more relevant and tailored cross-cultural training prior to departure reported lower unmet expectations, which in turn facilitated cross-cultural adjustment’ (2006:159).

Despite the fact that the literature describes cross-cultural training as contributing to higher levels of success, the majority of international assignment managers nevertheless report that ‘such training is not thought to be effective’ and therefore do not encourage assignees to take it up (2006:159). The major reason for their unwillingness to support cross-cultural training is that managers tend to take for granted that a successful professional will be successful everywhere. This preconception on the part of American managers is quite illustrative: ‘American top managers believe that a good manager in New York or Los Angeles will be effective in Hong Kong or Tokyo’ (2006:159). However, this kind of logic sometimes turns out to be thoroughly false: it happens that so-called ‘good’ professionals cannot function optimally in a foreign environment. This is so not because their capacities or efficiency are overrated, but because they are immersed into a new working and living environment with no guidelines as to how they are supposed to deal with it.

Preparation: Individual Initiative and Motivation

It is important to realize that preparation for staying abroad is not only about receiving particular training and acquiring knowledge about the future stay abroad, but it is also about obtaining information. This is where the role of individual initiative comes in. Richardson et al. stress the importance of own initiative by noting that ‘the participants who reported receiving appropriate information about the nature of their position also said they had been proactive obtaining information for themselves’ (2008:499). Importantly, Richardson also establishes the link between proactive individual initiative and previous international experience the individual has: previously active mobile professionals are more proactive while obtaining necessary information (2008:499).

Another significant factor that influences both the individual’s initiative with regard to seeking related information and the entire period of preparation for the stay abroad itself is motivation. Steel and Konig report that ‘there is a superabundance of motivational theories’; ironically enough, the plethora of such theories hinders a better understanding of motivation (2006:889). For the purposes of the present article, Gardner and Lambert’s theory of motivation is employed. Even though it is an old theoretical model, it has been used in recent years. Considering second language acquisition, Gardner and Lambert distinguish between two different types of motivation: i.e. instrumental and integrative (Ricento 2005:897). The two researchers suggest that instrumental motivation emerges when a certain target has to be achieved (for instance, career advancement), whereas integrative motivation ‘is the desire to become an indistinguishable member of the target speech community’ (2005:897). As it will be discussed further on, the distinction between the two kinds of motivation, in turn, also has important implications for cross-cultural adjustment.

The echoes of Gardner and Lambert’s motivation theory can be found in the self-determination theory (SDT) of human motivation, defined by Deci and Ryan (2002). According to SDT, two levels of motivation need to be looked into, i.e. ‘the level of self-determination of people’s behavior and the content of the goals they strive for’ (Chirkov et al. 2007:202). Furthermore, the level of self-determination is further subdivided into ‘autonomous and volitional versus controlled and coerced’ (2007:202). Following this distinction, Chirkov et al. discuss further categories, where autonomous motivation becomes intrinsic motivation and controlled motivation can be seen as extrinsic motivation. The two types of motivation are represented through human behavior: if individuals’ behavior is driven by genuine enjoyment they gain by engaging in a certain activity and not the promise of a reward after the activity is completed, it can be claimed that intrinsic motivation is at work. However, it occurs that

individuals are engaging in the activity to attain outcomes that are external to the activity itself (i.e., achieving their self-selected goals via the activity), but they have internalized these initially external outcomes and made them personally relevant goals (2007:203).

In this case, even though the goal may be perceived as autonomous, the type of motivation that is at work is actually extrinsic.
The two aspects of motivation in SDT, i.e. intrinsic and extrinsic motivation, can be seen as reflecting the division made by Gardner and Lambert to some extent. Instrumental motivation can be seen as more or less adequately expressed through the category of extrinsic motivation. However, even though integrative motivation shows some characteristics of intrinsic motivation, the two types are not entirely overlapping as Gardner and Lambert’s integrative motivation includes the aspect of ‘internalised goal’ if looked at from the point of view of Chirkov et al.

In summary, the above-discussed aspects play a role in the stage before going abroad. The second part of the theoretical framework will therefore deal with cross-cultural adjustment which by some scholars is defined as a crucial element determining the success of the individual’s stay abroad (Templer et al. 2006).

Theoretical Framework: The Stay Abroad

Cross-Cultural Adjustment

Cross-cultural adjustment is the process that mobile professionals undergo once they actually start living and working abroad. Just as the preparation stage, cross-cultural adjustment has multiple dimensions. Throughout the literature dealing with the experiences of mobile professionals, cross-cultural adjustment is defined as ‘the degree of psychological comfort and familiarity an individual has for the new environment’ (Black 1990:123). Other authors see aspects such as ‘strain (Hechanova et al., 2003), job satisfaction (Takeuchi, Yun & Tesluk, 2002), completion of foreign assignment and intent to stay’ as factors constituting cross-cultural adjustment (Templer et al. 2006:157). Templer et al. see adjustment as a multidimensional concept and refer to it as existing in the following domains: work adjustment, general adjustment and interaction adjustment.

Black provides definitions for each type of adjustment: work adjustment is presented as ‘involv[ing] the adaptation to new job tasks, work roles, responsibilities, and the new work environment in a new cultural setting’ (123). General adjustment is seen by Black as ‘the overall adaptation to living in the foreign country’ and interaction adjustment as ‘the comfort achieved in interacting with host nationals in work and nonwork situations’ (Templer et al. 2006:159-160). It is important to note that interaction adjustment is reported to be the most difficult to achieve.

Identification with the New Culture

Two more aspects that are closely related to cross-cultural adjustment and may be seen as constitutive of it are those of cultural and social well-being. To some extent, the success of cross-cultural adjustment lies in how well a mobile professional will accept and adjust to the cultural changes. According to Allwood (1985), culture refers to ‘all the characteristics common to a particular group of people that are learned and are not given by nature’ (10). This definition of culture leads to what throughout literature is referred to as ‘cultural capital’. Norton and Toohey note that ‘Bourdieu and Passeron (1977) use the term ‘cultural capital’ to reference the knowledge, credentials, and modes of thoughts that characterize different classes and groups in relation to specific sets of social norms’ (122). What is instrumental in acquiring at least some parts of a certain cultural capital within oneself is an idea that this cultural capital can be useful in one way or another. Therefore, if the newcomer finds the constituents of a certain cultural capital worthwhile investing in, it is likely that he/she will be willing to put considerable effort into it. Norton and Toohey use learning a foreign language as an example to illustrate the concept of investment:

If learners “invest” in a second language, they do so with the understanding that they will acquire a wider range of symbolic and material resources, which will in turn increase the value of their cultural capital. As the value of their cultural capital increases, so learners’ sense of themselves and their desires for the future are reassessed (1977:122).

This closely relates to the previously discussed motivation theories: it appears that the success or failure to adjust to the new culture lies in how well a mobile professional perceives their motivation to adjust to the host culture and what goals they set for themselves. In other words, individuals’ behaviour with regard to the host culture may be modified depending upon what rewards they expect from adjusting to it.

However, a different perspective is adopted in the Acculturation Model proposed by John Schumann (1978). Ricento summarizes it by providing a language-learning related example and stating that the higher ‘the degree to which the learner identifies with another culture, the more motivated he or she will be to acquire that culture’s language’ (2005:897, Ricento’s emphasis). Even though the example illustrates the motivation to learn a foreign language, it may be easily transferred to adjusting to the host culture. It is not clear, however, how the aspect of
‘identification’ with another culture can actually be judged. A somewhat more tentative method to deal with attitudes towards different cultures is offered by Earley and Ang: the two scholars propose to take the concept of cultural intelligence (CQ as opposed to IQ) while discussing cross-cultural matters (2003). This theoretical construct is ‘defined as a person’s capability to deal effectively in situations characterized by cultural diversity’ (Templer et al. 2006). Given that the aspect of efficiency is brought out in the definition of cultural intelligence, it makes sense to think in terms of ‘a conscious willingness to identify with the new culture’. This attitude also relates to the type of motivation igniting certain behaviours in individuals.

It has been shown that various stages of professional mobility have been paid due attention by the academics. Different conceptual frameworks have been employed to explain the phenomenon and its related consequences. I use some of the theoretical constructs discussed in the article to analyse the case study presented below.

**A Case Study of Mobile Medical Professionals**

**Methodology**

In my study, I looked at how theoretical considerations regarding professional mobility are actually reflected in practice. More in particular, I was interested in how mobile medical professionals experience their life and work situation abroad. The aspect that interested me most was whether they feel adjusted to live and work in a foreign culture since this has an impact on their communicating and functioning. To this end, a small-scale study was conducted. The research population consisted of ten medical professionals working in five European countries, i.e. Belgium, Denmark, France, Germany and Sweden. The majority of the respondents (n=8) were contacted through the European project *Medics on the Move*. The national background of the medical professionals is diverse: two respondents came from Lithuania, one from each of the following countries Belarus, England, Italy, Iran, Iraq, Germany, Poland and the Netherlands.

The data were collected using an online questionnaire. The questionnaire consisted of twelve questions. Some of them were open-ended, whereas others were closed. Some use was made of ranking scales.

As far as the content of the questionnaire is concerned, the questions presented to the research population relied heavily on the structure of the theoretical framework discussed in the first part of the present article. Namely, the focus of the study concentrated on instrumental motivation, international experience and initiative on the individual mobile medical professional on the one hand and support provided by the host institution and effect of cross-cultural training on the other. Therefore, it was expected that the combination of these aspects would lead to successful cross-cultural adjustment. The figure below represents the interrelations between the different factors leading to cross-cultural adjustment.

![Figure 1: A combination of factors leading to cross-cultural adjustment](image)
The questionnaire reflected the same structure. First, I included questions looking into how the mobile medical professionals experienced the preparation stage, i.e. I wanted to know if they received any support from the host institution (Templer et al. 2006); what type of motivation they had (Richardson et al. 2008); whether they had any international experience before (Richardson et al. 2008); how their individual initiative was played out (Ricento 2005). The questions included were as follows:

1. Have you received any of the following?
   A. Cross-cultural training
   B. Language training
   C. Job preview
   D. Living condition preview
   E. Other

2. What were your reasons for going abroad?
   A. To advance my career
   B. To find out about a new environment
   C. To become a full member of this society
   D. Personal reasons
   E. Other

3. During your preparation period, were you actively seeking information regarding your working and living conditions?
   A. Yes
   B. No

4. Before your present position abroad, did you have any international experience that lasted at least three months?
   A. Yes
   B. No

Secondly, I wanted to see how the combination of the various factors affected their stay abroad. To this end, I asked the respondents to indicate their level of cross-cultural adjustment (Black and Mendenhall 1990); their level of identification with the host culture (Ricento 2005) and the dynamics of their motivation to stay in the foreign country. The questions that were included in the questionnaire were as follows:

5. Evaluate your adjustment on a scale from ‘very good’ to ‘not good at all’:
   A. Professional functioning on the workfloor
   B. Relations with colleagues and other staff
   C. Social networks of friends/acquaintances
   D. Living conditions
   E. Family-related matters

6. To what extent do you identify with the new culture?
   A. Very strongly
   B. Strongly
   C. Moderately
   D. Hardly
   E. Not at all

7. After living and working abroad, has your motivation to stay in the foreign country increased or decreased?
   A. Increased
After the data were collected, the data were analysed and the analysis of the data relied upon linking back the findings to the literature.

Discussion of the Results

The responses of the mobile medical professionals produced some illuminating results. The various factors will be discussed in turn.

Host Institution Support

The results of the study showed that the only support that nine out of ten respondents received was language training. Few respondents indicated having received a job and living condition preview. None received cross-cultural training. One person claimed to have received none of the listed support. The replies show that in principle the only aspect that the host institution arranges for mobile professionals is language support. In the context of the present study, the results can be explained by the fact that the vast majority of the respondents (n=8) were using the language-learning tool provided by the European project Medics on the Move. The project ‘aims to provide medical professionals working abroad (‘medics on the move’) with language tools and support to help them function effectively in their new workplace.’ (www.medicsmove.eu). Not only does the tool help mobile medical professionals develop their competences in a foreign language, but it also facilitates cross-cultural functioning of mobile medical professionals. Namely, the MoM materials can be seen as a cultural awareness-raising tool that facilitates the adaptation of communication patterns in the foreign environment.

However, aside from language training, the numbers show that host institutions do very little to ensure an (emotionally) comfortable exchange for mobile professionals as far as the practicalities of working and living in the new country are concerned. Strikingly, none of the professionals was provided with cross-cultural training. Such responses carry important implications with regard to international assignment management. To some extent, this may also be seen as relating to language training: the fact that most professionals were involved in a language training programme indicates that international assignment managers consider the ability to communicate in the language of the host country as the most important factor influencing the success of an individual working and living abroad.

The fact that none of the respondents received any cross-cultural training may be seen as strikingly surprising in the era of increased internationalisation and, by extension, ‘greater interpersonal cross-cultural contact’ (Black and Mendenhall 113). The crucial importance of successful intercultural communication has been extensively discussed throughout the literature (Black and Mendenhall 1990; Larkey 1996). Even though the positive effects of successful intercultural communication have been established as crucial, the researchers’ suggestion to incorporate cross-cultural training into international assignment management seems to fall on deaf ears.

Motivation

The mobile medical professionals demonstrated the general tendency to want to work abroad for career advancement reasons: seven out of ten respondents indicated coming to work abroad in order to advance their career. This points to the conclusion that the respondents demonstrate a high degree of instrumental rather than integrative motivation. What also corroborates this conclusion is the fact that none of the respondents indicated willingness to become an ‘indistinguishable member’ of a particular society as one of the reasons for going abroad (Ricento 897). The degree of integrative motivation in these individuals can therefore be expected to be rather low. However, those respondents who indicated personal reasons (n=3) as the main motivation to go to live abroad probably have a higher degree of integrative motivation. Also, these participants were the ones to report an increased motivation to continue living abroad. This may be seen as very important in terms of longitudinal self-evaluation: when asked how their motivation to stay abroad had changed throughout the course of time, they focused on quite different aspects. A Dutch respondent whose motivation to go to live abroad probably have a higher degree of integrative motivation. Also, these participants were the ones to report an increased motivation to continue living abroad. This may be seen as very important in terms of longitudinal self-evaluation: when asked how their motivation to stay abroad had changed throughout the course of time, they focused on quite different aspects. A Dutch respondent whose motivation to go to live abroad partly consisted of personal reasons, described her increased motivation to stay abroad in Swedish: ‘vi trivs, that is, we enjoy our lives.’ However, an increase in the motivation to stay in a foreign country may be influenced not only by personal feelings and preferences, but also by other more practical factors. This can be seen in one of the respondent’s comments as to why her motivation to stay abroad has increased over time: ‘I would like my children to finish their schooling in Belgium’. Interestingly, some important changes in attitudes can be observed as well: one of the two respondents who indicated personal reasons as the only factor stimulating her moving abroad, commented that she expected to stay abroad because she preferred the ‘culture at work [abroad] better’.
**Previous International Experience and Individual Initiative**

As discussed in the theoretical framework, Richardson et al. claim that the mobile professionals who are proactive in obtaining work- and living conditions-related information usually have (more) international experience (2008). In the present study, these theoretical observations seem reflected to some extent; however, they cannot be seen as entirely true. One third of the respondents answered that they had actively sought information regarding their stay abroad; however, they had no previous international experience. Another third of the mobile professionals indicated they were actively seeking information and they also did have international experience. The final third of the research population said they were neither seeking any information actively nor had they had any previous international experience. Only one person answered that, even though he had international experience, he had not actively sought any further information related to his new position abroad.

The link between international experience and proactive individual initiative is represented in the following table:

<table>
<thead>
<tr>
<th>Professionals with</th>
<th>Proactive individual initiative to seek information</th>
<th>No proactive individual initiative to seek information</th>
</tr>
</thead>
<tbody>
<tr>
<td>No international experience</td>
<td>n=3</td>
<td>n=3</td>
</tr>
<tr>
<td>International experience</td>
<td>n=3</td>
<td>n=1</td>
</tr>
</tbody>
</table>

*Table 1. The effect of professionals' previous international experience on initiative taking*

These findings seem to suggest that there are no direct connections between the international experience that the mobile professionals have and how they decide to deal with seeking information regarding their new position: an equal number of the mobile professionals with and without previous international experience actively sought information about their new position. The results of the present study suggest that the link between the two as reported by Richardson et al. (2008) is not necessarily true. In the present study private initiative and international experience are not interconnected.

**Cross-Cultural Adjustment and Individual Initiative**

Templer et al. (2006) provide a systematic classification of adjustment. Their holistic approach provides a good basis for an analysis of adjustment by mobile medical professionals in the present study. Templer et al.’s guideline to think of adjustment in terms of work, general and interaction adjustment was reflected in the outcome of the questionnaire: the questions on ‘professional functioning on the work floor’ and ‘relations with colleagues and other staff’ covered the aspect of work adjustment, the aspects of ‘living conditions’ and ‘family-related matters’ were associated with general adjustment and ‘social network of friends/acquaintances’ was considered as dealing with interaction adjustment. In this section, the results of cross-cultural adjustment are also mapped onto the role of individual initiative.

The chart below illustrates how the mobile medical professionals perceive their cross-cultural adjustment:
As far as work and general adjustment is concerned, it is important to establish the link between obtaining a job and living condition preview. The relationship between receiving realistic job and living condition previews and the professional’s successful adjustment in the new working and living environment is stressed in the literature concerning aspects of professional mobility (Templer et al.). In the case of the present questionnaire, this relationship seems to be overrated: despite the low rate of the respondents who received any of these previews, the satisfaction with functioning on the work floor and living conditions was generally very high. Eight out of ten people described their professional satisfaction at work as either ‘good’ (n=4) or ‘very good’ (n=4). Importantly, five out of eight of the participants who perceived their professional functioning either as ‘good’ or ‘very good’ also said to have taken initiative to find out more information about their position abroad. Two individuals defined it in terms of ‘relatively good’.

As far as living conditions are concerned, seven mobile professionals said they were ‘good’, two people indicated that they were ‘very good’ and one respondent described them as ‘relatively good’. These findings may be perceived as pointing to the possibility that relating work adjustment to a job preview and the satisfaction with general living conditions to a living condition preview at least in this case is overestimated. In fact, the present study shows that it is hardly possible to establish a correlation between receiving a job preview and/or living condition preview with the degree of the actual satisfaction with the satisfaction on the work floor and/or living conditions: those respondents who indicated that they had received either one or both previews, reported their professional satisfaction and living conditions to be ‘good’ and ‘relatively good’. However, some of those who received neither of the previews specified their professional functioning and living conditions as ‘very good’. While this may be seen as an indication that the actual importance of realistic job and living condition previews is not very high in practice, there is another interpretation that cannot be totally excluded. Namely, it is possible that the correlation between receiving these previews and their effects on the professionals’ adjustment in the present questionnaire may be of a coincidental nature.
As far as the mobile professionals’ relations with colleagues are concerned, the results showed that most respondents (n=6) had ‘good’ work-related relations. One person described them as ‘very good’. Four out of the seven participants who perceived their relations with colleagues to be either ‘very good’ or ‘good’ also said that they showed initiative in finding out more about their position abroad. Three respondents said their relations with colleagues were ‘relatively good’. One of the respondents who said so, did not take any initiative in finding out about his/her future work position. The general tendency of a relatively high degree of satisfaction with relations with colleagues can be seen as a component adding to the high satisfaction with professional functioning on the work floor.

Despite the professional satisfaction that mobile medical professionals report, a poignant tendency of dissatisfaction with their social networks can be observed in the findings of the present study. It stands in sharp contrast with overall satisfaction with professional functioning: strikingly, four out of ten professionals said their social networks were either ‘not good’ (n=3) or ‘not good at all’ (n=1). Two more respondents perceived their social networks as ‘relatively good’, which means that, in total, about two thirds (n=6) of the study population report their social networks to be problematic. Importantly, the category of social networks was the only domain where respondents expressed such negative perceptions. These findings corroborate Templer et al.’s claim that interaction adjustment is indeed the most complicated aspect to achieve in a new culture.

Even though this may be due to a variety of reasons, the results of the present study present an underlying connection. It is important to underscore that three out of four respondents who indicated perceiving their social networks as ‘not good’ or ‘not good at all’ also said that they had not taken any initiative to find out more about their new position abroad. Moreover, there is also a correlation between initiative taking and an increased motivation to stay abroad: four out of seven respondents who took initiative to find out about their new position abroad also indicated an increased motivation to continue their careers abroad. Although the number of participants in the present study is too small to draw any substantial conclusions, this tendency may imply that the personal willingness and/or ability to take initiative may have significant implications for the ability to socialise outside work settings.

Table 2 below summarizes the findings with regard to cross-cultural adjustment and individual initiative. The figures express that most of the participants who expressed a high degree of satisfaction with cross-cultural adjustment (i.e. reported their self-perceptions to be either ‘good’ or ‘very good’) also showed proactive initiative before coming to work to the new country. The number of participants who reported a perceived high degree of satisfaction with their cross-cultural adjustment but showed no proactive initiative before moving abroad was lower:

<table>
<thead>
<tr>
<th>A high degree of satisfaction with</th>
<th>Proactive individual initiative</th>
<th>Noproactive individual initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional functioning</td>
<td>n=6</td>
<td>n=4</td>
</tr>
<tr>
<td>Relations with colleagues</td>
<td>n=6</td>
<td>n=4</td>
</tr>
<tr>
<td>Social networks of friends and acquaintances</td>
<td>n=7</td>
<td>n=3</td>
</tr>
</tbody>
</table>

Table 2. Relationship between cross-cultural adjustment and proactive individual initiative.

Identification with the New Culture and Motivation to Stay Abroad

As far as the degrees to which mobile professionals identify with the new culture are concerned, most respondents (n=6) chose the middle option and described their identification as ‘moderate’. The remaining four participants said they identified with the new culture either ‘strongly’ (n=2) or ‘hardly’ (n=2).

Importantly, no one chose the two extreme options, i.e. ‘very strongly’ or ‘not at all’. The respondents who answered that they ‘strongly’ identified with the new culture were a British and an Italian mobile professional living and working in Belgium and in Germany respectively. Interestingly, the respondents who specified that they hardly related to their new environments were two Eastern European mobile professionals (a Lithuanian and a Pole who work in France and Denmark respectively). At first glance, this may come across as somewhat surprising given that the two respondents coming from the Middle East indicated a higher, i.e. moderate, degree
of relating to the European culture. This observation subverts the intuitive assumption that it should be easier to relate to the cultures within one’s own continent. It also draws attention to the almost identical lines of reasoning that the two Eastern Europeans provide: their living and working abroad, they note, enabled them to develop a stronger appreciation of their own culture and pride of origins. Such reasoning does not lend itself to straightforward interpretation: possibly these are just individual perceptions of cultures, but it is also possible that the two participants’ comment points to the fact that cultural differences within Europe may be perceived as profound in quite an acute way.

Importantly, there is a strong correlation between the mobile professionals’ identification with the new culture and their motivation to stay abroad. The two participants who indicated that their motivation to stay abroad was decreasing over time were the only ones who specified that they hardly related to their new cultures. The same holds true for the contrary as well: seven respondents who indicated an increased motivation to stay abroad, expressed either a ‘strong’ (n=2) or ‘moderate’ (n=5) identification with the new culture. This reflects a high correspondence with Templer et al.’s interpretation of John Schumman’s Acculturation Model.

**Conclusion**

As presented and discussed in the previous section, the present study aimed at looking into the self-perceptions regarding working and living abroad as experienced by mobile medical professionals. The results suggest that there is a close link between the individuals’ motivation to continue living and working abroad and the degree of identification with the new culture, and satisfaction with professional functioning and social networks. This finding can be seen as reflecting Ricento’s interpretation of Shumann’s Accultural Model where the learner who identifies with a particular culture is willing to learn its language (2005:897). The same holds true for willing to continue the sojourn: the individuals who identify with the culture better, show more motivation to continue living abroad. Therefore, the perceived motivation to stay abroad can be observed as a factor that is very dynamic and changes in response to interaction between factors such as satisfaction with professional functioning and satisfaction with social networks outside the work floor. The graph below represents the dynamics between the various factors:

![Graph showing the factors leading to a higher motivation to stay abroad](image)

**Figure 2. The factors leading to a higher motivation to stay abroad.**

First of all, satisfaction with professional functioning plays an important role. As discussed in the previous section, the results revealed that the vast majority of the respondents perceived their performance on the work-floor as highly satisfying. The same degree of satisfaction was reported as far as their relations with colleagues are concerned. Therefore, the situation of mobile medical professionals on the work floor points to the fact that they do not have any difficulties adjusting cross-culturally at work. Importantly, six of the participants who indicated their professional functioning as either ‘very good’ or ‘good’ also perceived their motivation to stay abroad as increased.
The results of the study also point to an acute dissatisfaction with social networks of friends and acquaintances that the study population perceive. However, it is important to note that the consequences of this perceived dissatisfaction with social networks are not entirely straightforward. There are two kinds of reasoning attached to this dissatisfaction. A comment from one of the mobile medical professionals’ comments who is highly dissatisfied with his social networks represents one tendency. Namely, the comment illustrates the view that the dissatisfaction with social life abroad can become the reason why the mobile medical professionals decide to go back to their homelands instead of continuing building a career abroad. The above-mentioned participant notes that ‘money is not everything, I have to find a way of combining living in Poland and working in Denmark.’ The implication is that the person sees his life as split into two, i.e. the components that constitute what he considers to be ‘life’ in Poland and ‘work’ in Denmark. It appears that throughout the years working as a mobile professional he comes to the conclusion that the financial aspect does not outweigh what he misses out on due to the inability to combine living in Poland and working in Denmark. In his case, the motivation to stay abroad has decreased over years.

However, there is also another line of thought regarding dissatisfaction with social networks that can be illustrated by another participant commenting upon her increased motivation to stay abroad: ‘Despite the lack of human relationship I am really happy with my professional growth.’ In this case, the realization that social networks are not as functional as they should be is voiced, but this aspect of life is outweighed by the importance of professional development. This participant indicates an increased motivation to continue working abroad.

A previously mentioned female participant, who describes her social networks as ‘relatively good’, reports her increased motivation being not only the product of her own wishes, but also of some of her practical aspects of life. She explains her increased motivation to continue living and working abroad in terms of her family situation. She says her motivation to continue her career abroad has increased because she ‘would like [her] children to finish their schooling in Belgium.’ It would be interesting to see whether the fluctuations in the levels of motivation would be the same should the family situations in such cases be different.

Finally, the results of the study provide evidence that the mobile professionals’ identification with the new culture is interconnected with their motivation to stay abroad. Importantly, the two participants who indicated that their motivation to stay abroad was decreasing over time were the only ones who specified that they hardly related to their new cultures. The same logical pattern of reasoning applies to the opposite: the seven respondents who indicated an increased motivation to stay abroad, indicated either a ‘strong’ (n=2) or ‘moderate’ (n=5) degree of identification with the new culture.

The findings of the study are based on too small a study population to be taken as exhaustive; however, they do represent some tendencies. The data suggest that ensuring that mobile medical professionals continue working abroad and feel cross-culturally adjusted to the new environment lies not solely in their functioning as professionals in the new working environment. This is a very common simplistic stance that is often taken when international experiences of mobile professionals are considered and that is proved wrong by the findings of the study. Rather, sometimes the social functioning outside the work settings of the mobile professionals influences their decision to either continue working and living abroad or leave. Namely, as the present study has revealed, if a mobile medical professional identifies with the new culture enough and manages to find a balance between work satisfaction and satisfaction with his/her social networks, this translates into a higher motivation to stay abroad.

Implications for Further Research

The results of the present article, although based on a small-scale study, can be seen as providing valuable insights into first-hand experiences of mobile medical professionals.

The present study has contributed to the literature regarding medical professional mobility in a number of ways. The results of the study provide insight into how mobile medical professionals present their self-perceptions of the various aspects of their sojourns. Some important tendencies such as the reasons for going abroad and initiative-taking patterns of mobile medical professionals have been established. It has also been revealed that being a mobile professional entails not only searching for a more rewarding professional functioning, but also looking for general well-being on a social and personal level. Even though the study focused on the medical profession, it may be applicable to a wider variety of professions. These results may therefore serve as guidelines for conducting further research into aspects related not exclusively to medical professional mobility. A follow-up study in a different field would allow us to see if similar conclusions are reached.
The results of the present study point at the complexity of the experiences of mobile medical professionals and show that the motivation of mobile professionals to continue their careers abroad is determined by a variety of factors, the most important of which seem to be satisfaction with professional functioning, satisfaction with social networks outside the work setting and identification with the new culture.

Since the literature (Black and Mendenhall 1990; Templer et al. 2006) focuses on the importance of institutional support provided to mobile individuals, I expected that the levels of cross-cultural adjustment and the intention of mobile medical professionals to continue their careers abroad to a great extent would rely on the various types of support they receive from the host institution. However, the results reveal that this is not the case as institutionalised support is very limited. Cross-cultural training was not provided to any of the respondents participating in the study. Even though numerous scholars study and develop cross-cultural training, this study has shown that in practice international assignment managers do not take suggestions offered by academics into account. Also, the other kinds of support (provision of realistic job and living condition previews and cross-cultural training) on the part of the host institution were scarce.

The only type of support that nine out of ten respondents received was language training. The high number of participants who received this particular type of support may have to do with the fact that the majority of the respondents were using the language-learning tool provided by the Medics on the Move (MoM) project while the research data was collected. Since the data have shown that no cross-cultural training support was provided to the participants, the MoM language-learning tool can be seen as partly replacing such training. Namely, MoM as a language-learning tool has a strong focus on tailoring communicative competences of mobile medical professionals with regard to the foreign cultures in which they function professionally and socially. It may be interesting to investigate further the extent to which language-learning tools facilitate effective cross-cultural functioning of mobile professionals.

Self-perceptions that surround communication are a crucial factor in any interaction, and in professional mobility they can make the whole experience either easier or more challenging. Therefore, it may be useful to further investigate what role the self-perceptions of mobile medical professionals play as far as their actual communicative competences are concerned.

One more aspect that has been revealed in the study, i.e. the role of proactive individual initiative, could be worth looking into in greater detail. Participants who showed active individual initiative were more satisfied with their social networks, which eventually led to a higher motivation to continue working and living abroad. It may be interesting to investigate what effects proactive individual initiative (or the lack of it) has on cross-cultural adjustment and motivation in larger scale studies dealing with professional mobility.

In conclusion, the present study emphasises a number of significant aspects give insights into cross-cultural adjustment of mobile medical professionals. With increasing rates of professional mobility in general and medical mobility in particular, the research in the field is crucial for better mobility and diversity management, development of language, cross-cultural training and related programmes.

References


http://www.medicsmove.eu/project.html

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