

# **Summer Internship Programme 2020**

## **International Migration of Kerala Students for Medicine Course**

Internship Report

by

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## **Abstract**

The number of students from Kerala who seek admissions for medicine course in foreign countries is increasing over the years. The destination countries are very diverse, and the selection of a particular country depends on many factors. In this study, we will be looking into the decision making the process of Kerala students who are migrating to foreign countries for a medicine degree course, their migration processes, their experiences and expectations from migration. The study relies on case studies of Kerala students studying in different countries (China, Ukraine, Philippines, Moldova and Saint Lucia), and those students who have completed the course abroad and returned. As part of the study recruiting agencies who facilitate migration and medical experts were also interviewed. Snowball sampling method was adopted to select the respondents.

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## **1. Introduction**

According to the Ministry of External Affairs, the estimated number of students pursuing higher education abroad is nearly 10.9 lakhs (Ministry of External Affairs, 2020). Indian students are present in 90 countries based on the inputs received from the Indian Mission/Posts abroad (Ministry of External Affairs, 2018). There is an increase in the number of students who migrate to studying medical-related courses in India. The rise in the number of students migrating to countries like Russia, China, Ukraine, Philippines, and other Eastern European countries like Armenia, Moldova, Georgia, Romania, Kyrgyzstan, etc., clearly indicates this (United Nations, 2020). An RTI reply reveals that the number of eligibility certificates that the Medical Council of India is issuing to the students who want to study medicine abroad is increasing ever since January 2014. The number of applications received was 18,383 in 2017-18 as against 10,555 in 2016-17 (Mariswamy, 2020).

In recent years, the state of Kerala is also witnessing a similar trend in the international migration of students. The number of Kerala students who seek higher education in the field of medicine in foreign countries has peaked in the last five years. The number of 'new educational agencies' that act as a bridge between the students and the universities have boomed during the last few years. Since this trend in international student migration for medical courses is a recent phenomenon, there has not been much studies and literature on the topic. There is no accurate data available on students migrating to other countries for education purpose.

There is a void in the migration literature on Indian students who migrate to foreign countries for medical courses. Education decisions are one of the most important decisions that an individual makes in his life. The time and money invested in education are so much that students arrive at these decisions with the utmost care and research. The students who decide to pursue medicine course is investing their five years and an enormous amount of money for this purpose.

Migration process of a student who seeks admission in a foreign university involves a serious of steps. From deciding to migrate to choosing the destination country to select the agency, it involves many decisions and actions. The most crucial step in the

migration process of a student is the decision making process of choosing the destination country and University. The options for a medical aspirant student is so diverse, and he or she considers a wide range of factors in deciding the program and the country. In our study, we will be looking at the trends in student migration from Kerala for medical courses through two questions. The first question is related to the pre-migration decision, and the second one is on the post-migration decision. Pre-decision is the first phase of the migration process, where the student considers his or her options and decides about migrating and selects the destination country. Post-decision covers all migration processes, which includes admission procedures and life after migrating.

### **1.1 Objectives of the study**

1. To find out how the students make their decision to migrate and choose the host country.
  - i. What are the factors that influence a student in making the decision?
  - ii. What peculiar features of the destination country and the course attracted the student?
  - iii. What are the information channels that a student use?
2. To understand the emigration processes and life after migration.
  - i. What are the admission procedures, and what is the role of agency in it?
  - ii. What are the differences when compared to Medical colleges in India?
  - iii. What are the problems faced by the students after migrating?
  - iv. What is the scope of the course after completion?

### **1.2 Methodology**

The study is qualitative and builds on case studies. Students pursuing their medical studies abroad and who have returned after completing their course were covered in the survey. Detailed interviews with students in four countries—China, Ukraine, Philippines, Moldova and Saint Lucia, were conducted as part of the study. The criteria for choosing these five countries is based on their geographic location (Continents),

native language, number of Kerala students, fee and program structure. Chinese, Russian and Ukrainian medical universities receive the maximum number of Kerala students. Low tuition fees and English as the native language is an attraction for the Philippines. Moldova medical university has ties with the Kerala government, and the health minister of the state is a visiting professor at the University. Saint Lucia is a small Caribbean island which follows the syllabus and regulations of the US. Four students from each country were interviewed, which includes current and graduated students. Interactions were also held with a recruiting agency and a medical professional to get more insights on the admission procedures and the quality of foreign medical education. Snowball sampling was adopted to select the respondents.

## **2. Decision making process of a student**

Students prefer foreign universities only when they don't have a chance to study medicine in India. Students prefer Kerala medical colleges over foreign colleges because of the superior quality of education in the former. The medical entrance exam in India is highly competitive. Most students who have opted for studying abroad have taken at least one year entrance coaching after 12<sup>th</sup> and appeared for the medical entrance examination in India. The low ranks in the entrance exam are the main reason why students look for options outside the country. The cost of completing medicine in self-financing and management seats in India is very high when compared to foreign medical colleges. Another reason, though rare is the age limit for joining medicine course in India. Candidates above 25 years of age who belong to the general category are not eligible to apply for MBBS course in India. A student who went to Saint Lucia for MBBS was 27 years old when he decided to do a medicine program.

### **2.1 Factors that a student consider in choosing the destination country**

First and foremost, students compare the fee structure and the cost of living in various countries. The cost of doing MBBS in India by self-financing is very high. A student needs to invest a minimum of one crore rupees in finishing the MBBS course in India if he or she couldn't secure a government sponsored seat. The fee structure of a foreign

MBBS degree can range from 20 lakhs to 80 lakhs<sup>1</sup>. Students completed the course in the Philippines in 20 lakhs and students from Saint Lucia, who have spent 80 lakhs to complete the course, were interviewed as part of the study. Asian countries offer the least expensive MBBS degrees, and as we move towards the west, the degrees become more expensive. The most expensive medical schools are located in North America, followed by Central Europe. Asian and Eastern European countries provide the most affordable medical degrees and hence is the hotspot destination for most students from developing countries. The students who migrate from Kerala hail from middle and upper middle class families, for whom these countries provide excellent opportunities to finish their MBBS degree and pursue their dream career. The average amount of course completion in these countries ranges between 30-35 lakhs.

After affordability, the second most important factor that students and parents look for is the reputation of the University. In China, Russia and Ukraine, medical universities are very reputed and find a place in the top medical school ranking lists. Moldova has only one government medical university, and it has ties with the Kerala government. K.K Shailaja, the health minister of Kerala, was appointed as a visiting professor at the University. The increasing number of Kerala students who come to Moldova for MBBS is increasing in recent years, and this move will attract more and more students from Kerala and increase the credibility and reputation the University in Kerala. Caribbean countries, like Saint Lucia, is also well reputed because of its close connection with US medical schools.

The syllabus of the course varies from country to country. Ukraine, Moldova and other European countries have six year MBBS degrees. China, Philippines and Saint Lucia have five year programs. Medical courses in these countries are formulated to meet the requirements of the country's population and its epidemiology. The Philippines share the same climatic conditions like India, and hence its epidemiology is similar to that of India. In the Philippines, it is common to find diseases like Malaria, Dengue, and other common illnesses. The case of European countries is very different. They have a different climatic condition than India, and hence their epidemiology is different from

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<sup>1</sup> This amount is inclusive of the tuition fees and the cost of living.

India. A student from Ukraine told that the country has less two wheelers and therefore low accident cases which are very different from the Indian point and this makes it difficult for him to gain experience in handling accident cases. Chinese universities are designing syllabuses to match the requirements of Indian students since the country is witnessing an influx of students from India. Some medical universities in China run two different batches: one for the Chinese students and one for the International students who are mainly from India. A student from Southwest Medical University, China said that he is taught from textbooks by Indian authors and the texts that he uses is the same ones that his sister used when she was doing MBBS in Kerala. Chinese medical universities also employ Indian doctors as professors to cater to the needs of Indian students. Saint Lucia follows the same syllabus as that of US Medical schools which makes it easier for the student to clear the entrance for MD in the US. It also provides an opportunity for students to do one year internship in a US hospital to gain practical experience. Students from Saint Lucia say that this opportunity is one of the main reason why they preferred to migrate to the country.

Other countries like China, Philippines, Ukraine and Moldova all lack in the practical knowledge and patient exposure. Apart from the syllabus, a student also considers the academic strictness in each country. Students prefer strict and disciplined programs over lenient and loose ones. As they invest large amounts for their MBBS degrees, and they do not want to waste it because of their carelessness and lack of motivation. One student said that she enjoys more freedom studying in Moldova than in Kerala. Going abroad and pursuing a medical degree demand a considerable amount of responsibility and independence from the students. She said that here in Moldova, she is away from the parental gaze, which makes it easy to lose focus from academics. Students prefer a strict environment in a foreign country so that they do not lose track of their academics.

The Philippines and Saint Lucia have the edge over other countries because English is their official language and students can avoid the extra burden of studying the local language. In all other countries where English is not the official language, the local language is taught for the first three years. Proficiency in the local language is essential

for having interactions with patients, and that is why most students in non-English speaking countries have less exposure to patients.

Students prefer to migrate as a group rather than migrating alone. Friends have a strong influence on the decision to study medical degree abroad and the choice of destination. For instance, the choice of a particular country might depend solely on the number of friends who chose to migrate to that country. Students have to face many challenges after migrating to a new country, and they feel more confident and safe if their friends are there with them. They also look at the population of Kerala students in a foreign country and the University. Most of them prefer to study in Universities where the number of Kerala students are high while very few choose to stay away from the Kerala population.

Finally, students also consider the culture and safety in the destination country when deciding which country to choose. The agency convinced the student that Ukraine was going to be part of the European Union, and he decided Ukraine for doing MBBS. Another student from Ukraine told that he chose Ukraine because it was part of Europe and he could experience a western lifestyle during his stay. A student from Saint Lucia said though he knew Chinese universities were reputed he did not choose them because of the fear of being labelled as a ‘Chinese Doctor’. He moved to Saint Lucia to get the US exposure and ‘US tag’ despite higher tuition fees.

## **2.2 Information channels for the student**

Family friends and relatives are the primary information channels for a student. Doing MBBS at a foreign university is so common in Kerala that it is easy for students to find someone connected to their family who is studying MBBS in a foreign country. Testimonials from relatives and family friends are trustworthy for parents, making them the most sought after information channel in the migration process. Students make friends from different parts of the state during their one year coaching for medical entrance. Such connections widen their networks, and they get information about foreign universities and various options through these friends. Education fairs also act as information channels for students who plan to migrate for MBBS. Some students use the internet to get information about foreign universities and the scope of migrating.

### 3. Admission process and the role of agencies

After making the decision to migrate and selecting the country to migrate, students approach the agency for taking admission and completing the visa processes. The agency is determined based on the recommendations from friends and relatives, educational fairs or newspaper and online advertisements. It is tough to take direct admissions in foreign medical universities, and hence agencies play the part of middle-men in connecting the students with the university administration. All students informed that it is impossible to take admissions without the help of an agency or a middle-man. Language is the main difficulty in the process of securing access independently. All the administrative works are carried out in their local languages, and a person should be proficient in the local language if he or she wishes to take admission directly from the University. Students who are studying in China told that the website of Chinese universities is difficult to access from India. The visa and migration processes also involve many steps, and it is tiresome if an individual tries to do it alone. The agencies will take care of everything from securing a seat for the student to clearing all the papers for visa and migration. Some agencies also continue to provide their service even after migrating. An agency which has many branches all over India is specialised in migration to China, has an employ appointed in the University to take care of the needs of the students. They take care of the difficulties faced by students in academics, health, and other aspects of their lives. **If students are facing a problem in following the instructions of a particular professor, then the students can approach the employ of the agency to change the professor.** The agency also provides remedial and special classes for students who need special attention. If a student has to go home urgently in case of any emergency, the agency will arrange the travel for the student immediately. Most agencies provide orientation classes for student and parents before migrating. Agencies operate in different scales, from small agencies which facilitate admissions for less than ten students per year to agencies who take more than 100 students per year. On average, 30 to 50 students migrate together in one batch, and a person accompanies the students from the agency. There are also a few students who migrate alone.

The admission procedure is relatively simple when compared to the admission procedure in Indian universities. The eligibility criteria for admission varies from country to country and University to University. For instance, universities may ask students to have a minimum of 80% in physics, chemistry and biology in 12<sup>th</sup> standard while some only ask for 70%. If the student is eligible for admission, then, he or she can secure a seat in any university of his or her choice. The admission procedures and administrative works will be taken care of by the agency. After reaching the University, the student has to appear for an exam which tests the knowledge in basic concepts studied in 12<sup>th</sup>. The average commission of an agency per student is 2.5 lakhs collected along with the payment of first year tuition fees, visa charges and flight charge. There are well reputed agencies to fake agencies working in the field. Students say that the agencies keep changing their names, although the agents are the same. As noted by an agent “...agencies are interconnected with each other on one side while they compete with each other on the other side..”.

False promises, half-truths and paid testimonials are common strategies used by agencies to attract students. A student shared an experience where the agency did not pay her semester fees, and she could not write her exam. Most students hear the name of the destination country for the first time in their life when they decide to migrate. Hence, they have minimal knowledge about the destination country and the University. A student from Moldova said that she was shocked to know that her hostel was far from the university and she had to depend on public transport to commute for class. Another student from the Philippines told that he did not believe everything that the agency told him, and he was expecting things to be different than what they promised.

#### **4. Differences between Foreign and Kerala Medical Universities**

The syllabus of MBBS degree varies from country to country even though the core modules are same everywhere. Each country adopts a syllabus which is best suited to the epidemiology and health conditions of its people. In Moldova, people suffer mainly from lifestyle diseases, and diseases like malaria and dengue rarely infect people, a student reported. The Philippines and other South Asian countries share the same epidemiology as that of India, because of its geographic location and climatic

conditions. The main disadvantage of studying medicine abroad, according to students, is the lack of practical studies. In India, students get plenty of opportunities to learn on dead bodies while it is minimal in most foreign universities. Students are taught with the help of dummy dead bodies which do not serve the purpose of gaining practical experience. The syllabus and course structure also vary from country to country. European countries have six year program while Asian and US countries have five year program. In China, students are introduced with the latest technologies in the medical profession, which are yet to be adopted in Indian hospitals.

Students reported that they feel less pressure in studies in foreign universities. Compared to Kerala medical colleges, foreign colleges provide more free time for students after classes. Saturdays are complete holidays for foreign universities, while Kerala medical colleges often hold extra classes on Saturdays. Foreign universities focus more on self-study rather than teaching. Students say, 60 per cent of the course is completed by self-study and rest 40 per cent by teaching. In the Indian case, 60 per cent is taught, and the student takes the remaining effort. A student who did MBBS from Saint Lucia after completing BSc in Nursing from Kerala said that in Kerala, the professors and the institution take more effort in making the student pass the course. In contrast, in Saint Lucia, he felt that the responsibility of one's grades and academic progress entirely depends upon the student.

The exam pattern in these countries is also quite different from the Indian model. Multiple choice questions based exams are more in foreign countries whereas in India students have more written exams. Students find that multiple choice questions are relatively easier to answer compared to traditional written exams. The practical exams are also different and more comfortable than Indian medical colleges. In these countries, students do not get real exposure in dealing with human bodies; they are provided only with dummy human bodies to perform practical studies.

Students are delighted with the infrastructure and the hostel facilities provided in these universities. Students feel that the hostel facilities are way superior to the facilities offered by the government medical colleges in India. Students can have single or shared rooms based on their preference and ability to pay, and also all hostels provide cooking

facilities for the students. The classrooms and teaching environment make use of the latest technologies providing students with the best learning experience possible. During the COVID-19 lockdown, students did not face any difficulty in attending online classes. Students reported that the universities effectively conducted online classes during the lockdown.

## **5. Problems faced by the students after migration**

Since the final decision to migrate and do an MBBS course in a foreign country is taken by the student alone, students are happy and satisfied in the foreign country during the time of their course completion. There is an initial cultural shock experienced by the students, but most students expect it to be a part of the migration process and prepared for it. The main problem that students face in a foreign land is communication. In countries where English is not a common language, students have to learn the local language for communication outside the classroom. In non-English speaking countries, the local language is taught as part of the course. Some students say that even with language training, they are not able to communicate appropriately with the local people. For example, a student studying in China told that the Chinese language has various dialects, and the one that he is taught in the classroom is different from the one used by the local population.

Migrating to a foreign country for education just after school gives a lot of freedom for students. Most students see this freedom as an opportunity to grow and be self-reliant. Students say that they have learned many skills like cooking, cleaning and washing etc. during their time abroad. A very few students feel that the freedom they enjoy in a foreign country is too much for them. A student from Moldova said that she wished her foreign experience to be more constrained. If she were in Kerala, she would've had her parents nearby to monitor her academics, and she would've performed better.

There have been few problems faced by the students of Ukraine and Moldova during the COVID-19 pandemic. In Ukraine, many students who registered their names for getting back home through the 'Vande Bharat' mission couldn't find their names in the list of passengers approved by the Indian government. Also, many students couldn't afford the ticket charges since the price of tickets were double the standard charge. In

the case of Moldova, 'Vande Bharat' mission left much to be desired. A student from Moldova, who is back home now told that students had to charter a flight at a very high ticket charge to get back home. Many students who wanted to come home for the semester break is stuck there because they cannot afford the huge ticket fare. Most of the students from China was already back home for semester break before the lockdown began. In the Philippines and Saint Lucia, the pandemic has not created much trouble for the students.

After the course completion and returning to Kerala, students face few difficulties in the verification process of their degrees and securing an internship position in Kerala hospitals. Kerala medical council is very strict regarding the verification process and advises one year compulsory internship in Indian hospitals for getting the license to practice in Kerala. Kerala and only a few other states ask to a mandatory internship in India for granting the medical license. The one year internship program in Indian hospitals will help the students procure the practical experiences which they missed in the foreign country. Further, this also provides an opportunity to interact with patients and understand more about the epidemiology of India. A student who completed his course from Ukraine and returned waited for three months to get an internship at a hospital in Kerala. He said that he could've got an internship opportunity faster if he opted to do it outside Kerala. Still, he waited to do it in Kerala because he believes that the quality of internship is higher in Kerala hospitals compared to other state hospitals. The time lag for verification is a severe problem faced by graduated students. Three students who completed their course last year and cleared Medical Council of India certification exam have been waiting for months to complete the verification of their degrees. A student from Saint Lucia told that his friends who are from other states got their degrees verified in less than a week while in his case he has been waiting for more than three months.

## **6. After the completion of the course**

Most students return to Kerala after the completion of their courses. Students have to pass the MCI (Medical Council of India) screening test, also known as Foreign Medical Graduates Examination which is a licensure examination conducted by the National

Board of Examinations to start practising in India. Besides, Kerala Medical Council has included a mandatory one year internship in India for students to practice in Kerala. A medical professional who completed her MBBS in Kerala and did internship along with students who completed MBBS from abroad said that students who did MBBS from foreign countries were excellent in theoretical knowledge. Two reasons could be attributed for this: first, foreign universities focus more on theoretical knowledge than practical experience, second, the students have to clear the MCI exam before joining the internship which is a challenging exam which requires students to be thorough with their topics to pass the exam. Some students also opt to practice in other foreign countries after clearing the licensure exam of the respective country, and some pursue higher studies in India and abroad.

Few students who couldn't complete the course, start agencies or become agents of the universities to make money by arranging admissions. Some get into the restaurant business near the university premise to cater to the food needs of Indian students.

## **7. Conclusion**

The high competition for the limited number of government seats in Indian medical colleges is the main reason why students look for education option outside the country. The number of students who are writing entrance for medical seats is increasing each year, but the number of seats remains the same, leading to tougher competition. The number of students registering for NEET increased by 14.4% from 2018 to 2019. In 2018 the number of students who registered for NEET was 13.26 lakh, and in 2019 it grew to a record 15.19 lakhs (Live, 2020). The total number of medical seats in Indian medical colleges in 2019 was 70,978 (Nagarajan, 2020). The demand for medical education is way higher than the supply. Looking at the number of students who migrate to foreign countries for MBBS every year, the Indian government and the Medical Council of India should look into the possibilities of increasing the number of MBBS seats in India to retain the students who plan to go abroad for MBBS. Foreign medical colleges are seeing the migration process of Indian students as an opportunity to make huge profits. Suppose the Indian Medical colleges could provide MBBS education at affordable rates which are in par with the international fee structure. In that case,

students will prefer Indian medical colleges over foreign universities, and it will be a source of revenue generation for the Indian institutions.

Most agencies which facilitate admissions for the students are not accredited by the government nor monitored by the Medical Council of India. It is relatively easy to start an agency in India which affects the credibility and quality of the agency. There are many incidents where students cheated by taking admissions in Medical colleges which are not accredited by the MCI. Government accreditation should be made mandatory for all the agencies, and the MCI should monitor the admission processes. The government can also look into the possibilities of facilitating admissions for eligible students with the help of the embassies of various countries. For example, the health minister of Kerala is a visiting professor at Moldova Medical University; these ties can be useful to build more partnerships between the countries and help students benefit in their migration process. Not only will this increase the transparency and credibility in the admissions, but students could also benefit by getting exemption from paying the fees that they pay to the agency.

The verification process after the completion of the course takes more time for Kerala students compared to students from other states. There should be measures taken to fasten the process of degree verification, and also student should be given internship opportunity without much waiting time.

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## **Appendix**

### **Questions for Conducting Interview with Students**

#### **Personal Details**

1. Name
2. Place home town
3. Schooling Syllabus
4. Parent's Job
5. Siblings

#### **Decision to migrate**

1. Why did you migrate?
2. How did you arrive at a decision? Who motivated?
3. How did you gather information on destination and college (seniors, friends, relatives, website, agents)
4. What was the first choice? (country/course)
5. What preparation did you make? (language, collecting information, getting contacts etc.)
6. How did you finally migrate? (agency/relatives/contacting college)

#### **Details about the agency**

1. Name of the agency with the location
2. How did you identify the agency?
3. Commission for the agency?
4. Services offered?

5. Services provided?
6. How many countries/institutes did they offer? Why did you arrive at your choice?
7. How was agency commission paid?
8. Have you taken loan?
9. Is there an option for a part time job?
10. Process of admission
11. Are you satisfied with the agents? (out of 10) if not, why?
12. Post admission, did you felt that you could have secured an admission without the help of the agency?

#### **Details about the country/course**

1. Migrated Country
2. Name of the course pursuing?
3. Did you do entrance coaching?
4. Year of Migration
5. Why this country?
6. How did you come to know about this country?
7. Through you, did someone migrate to this country?
8. Number of home visits per year?
9. No. of Kerala students
10. Overall life satisfaction in the country (out of 10) Ask why, rather than the rating?
11. How is your accommodation?
12. Differences when compared to Medical Colleges in Kerala

13. What are the problems faced by Kerala students in the country? (racial, lack of money, social life)
14. Problems related to language?
15. What are the prospects of the course? (recognition of certificate in India and other countries, job prospects in India and other countries)
16. What do graduate students from Kerala do after the course completion?
17. What is your plan after the completion of the course?
18. During this corona crisis, do you face any challenges?
19. Ask about the quality of teaching, if they recommend the country/institute/ course to someone else?
20. How frequently they go outside campus? If they have faced any difficulty? How do they see the local response?
21. Fee payment, amount and process (directly)
22. How far fee higher than locals?
23. Who are the other nationalities in your institute?