



# Indigenous Affirmation

I would like to acknowledge that we are gathered across Canada on territory of First Nations, Inuit and Métis.

I would like to extend my respect to all First Nations, Inuit and Métis peoples for their valuable past and present contributions to this land despite continued colonial incursions.

As a settler, I recognize that land acknowledgements are only one small part of disrupting Indigenous erasure and dismantling the legacy of colonial structures and processes that continue to this day.

I affirm my commitment to implement the Calls to Action from the Truth and Reconciliation Commission.





# Situating the Migration and Integration of Health Workers in National and International Contexts

Ivy Lynn Bourgeault, PhD FCAHS

Professor in the School of Sociological and Anthropological Studies

uOttawa Research Chair in Gender, Diversity and the Professions

Lead of the Canadian Health Workforce Network



# At CHWN, we apply our internationally recognized expertise and build partnerships to bring innovative solutions to complex health workforce challenges.

the following key themes:



Equity, Diversity, Inclusion



Governance & Regulation



Health Workforce Data



Health Workforce Planning



Healthy Work Environments & Retention



Integrated Care Models Optimising Scope



Mobility, Migration & Integration

and the following sectors:



Care Across the Life Course



Primary Care



Sexual & Reproductive Care



Mental & Substance Use Health

RCPS  
Réseau canadien des  
personnels de santé



CHWN  
Canadian Health  
Workforce Network



Our team includes several co-leads with  
extensive experience ...



Margaret Walton  
Roberts

Mobility, Migration &  
Integration



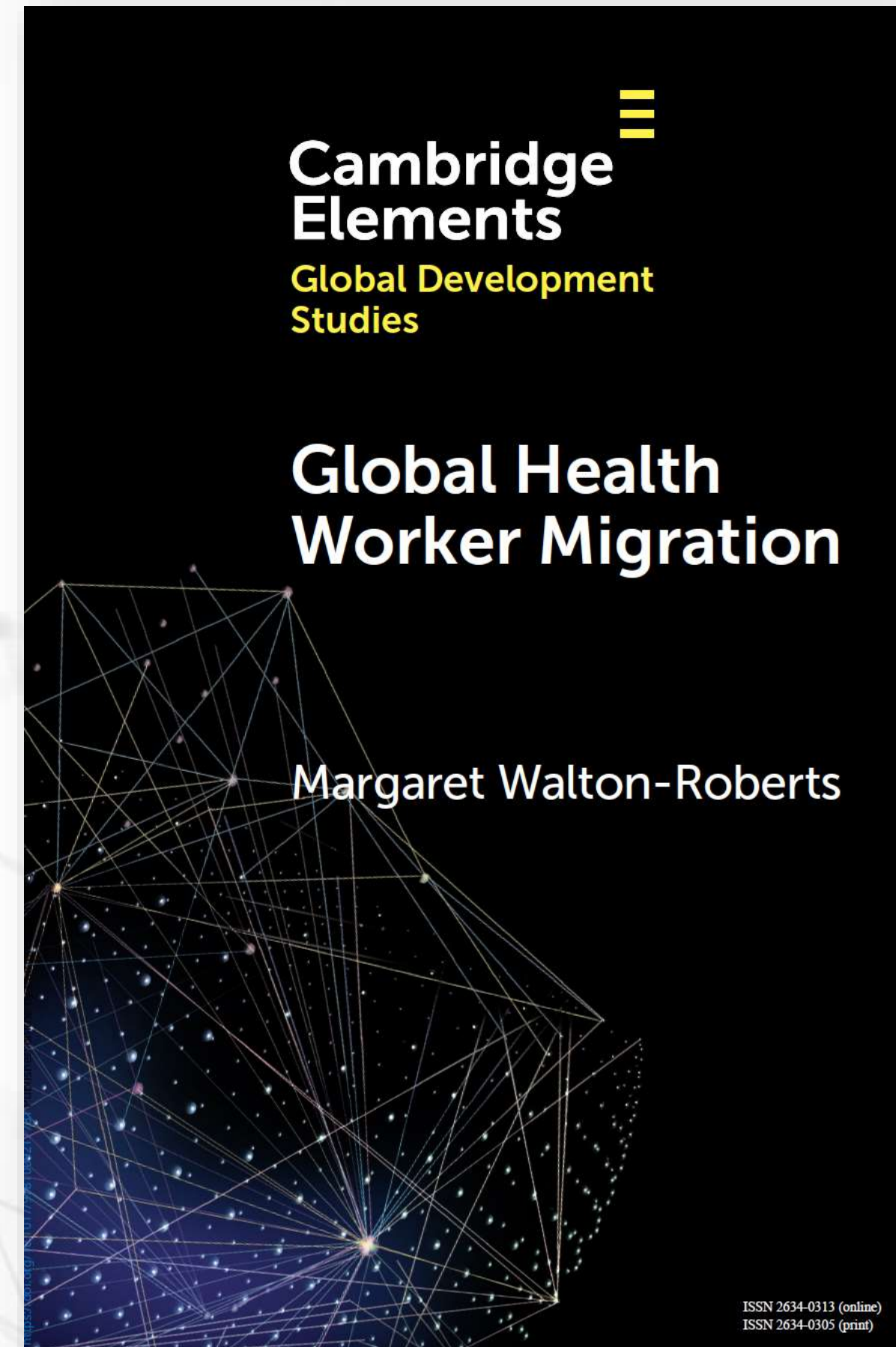
Housseem Eddine  
Ben Ahmed

Mobility, Migration &  
Integration



# Recently published...

This [book](#) examines the complex processes that feed health worker migrants into global circulation, the losses and gains associated with such mobility and examples of good practices, where migrants, sending and destination communities experience the best possible outcomes. It will approach this issue through the lens of problems, and solutions, making connections across the micro, meso and macro within and across the sections.



# Situating the Migration and Integration of Health Workers in National and International Contexts ... *in one slide*

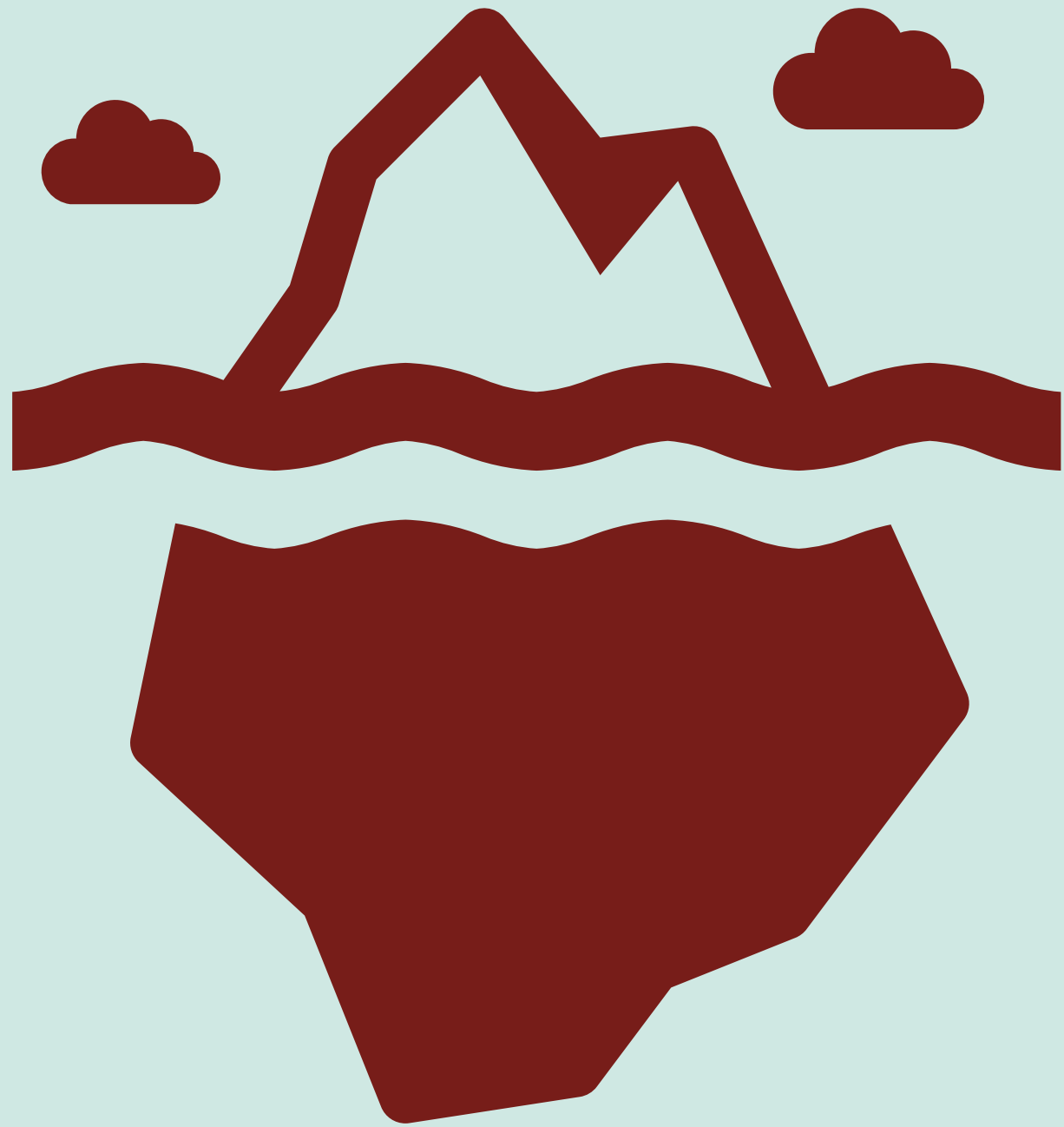


We are caught in a vicious cycle of work overload, burnout and attrition of the health workforce; Yet we have so many internationally educated health workers not able to practice.

This problem requires both *reactive* and *proactive* solutions.

An integrated set of solutions should include *embedded evaluation to inform policy course correction & capacity building*

**Canada has critical untapped resources that should be leveraged to spread and scale innovative solutions**



# The problem space



**Given that the health workforce accounts for ...**



more than 10% of all employed Canadians

over 2/3 of all health care spending

\$175 billion in 2019 or nearly 8% of Canada's total GDP

**... shouldn't support for integrated health workforce planning, policy & management be key priorities for federal, provincial/territorial governments and all stakeholders?**

# The health workforce conundrum:



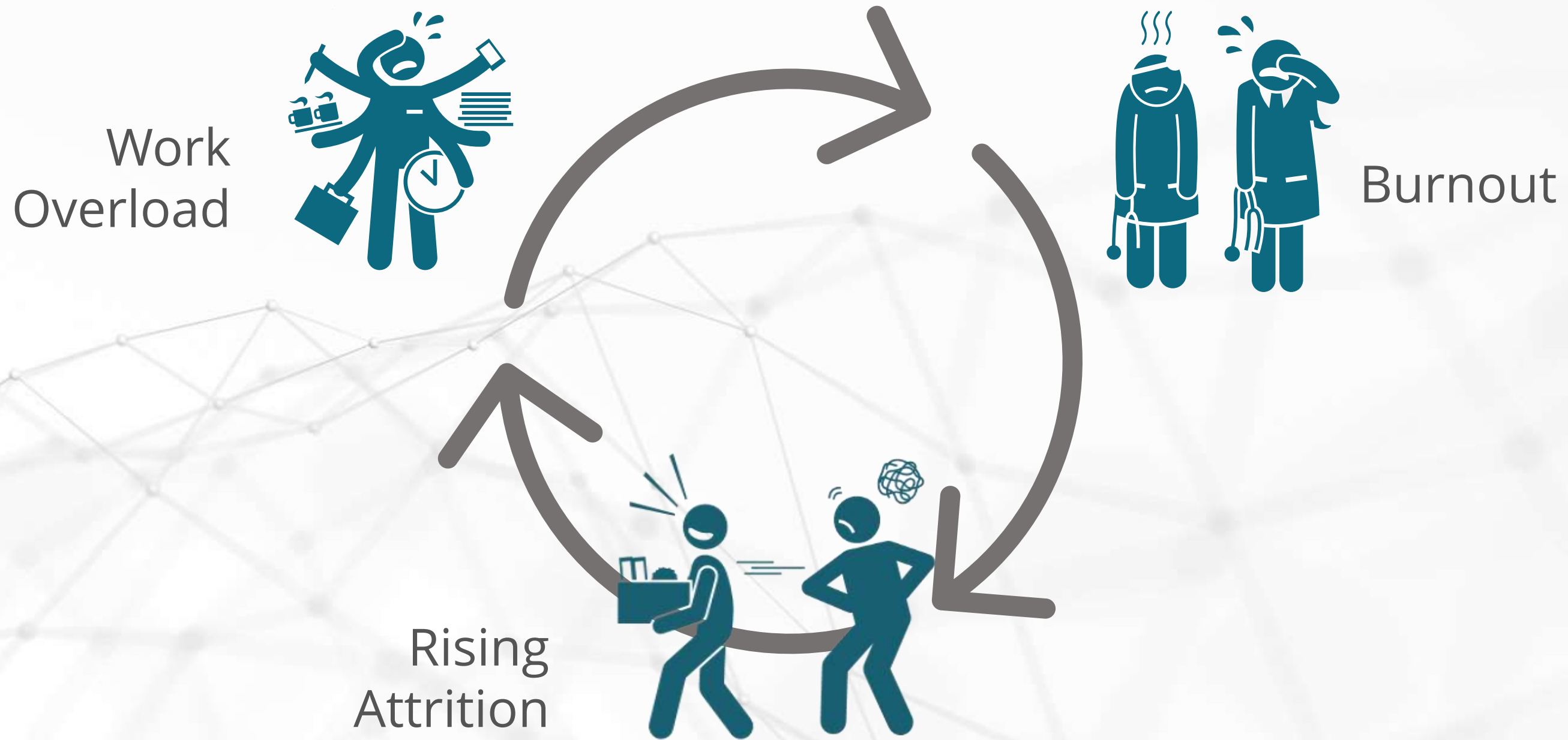
 The health workforce in Canada is increasing in size, *especially for women*

 Overall health workforce capacity is going down

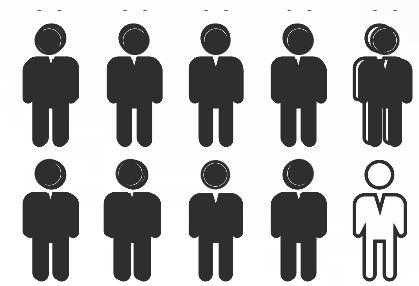
*and we also need to keep in mind*

 Population health needs are growing because of aging and chronic conditions

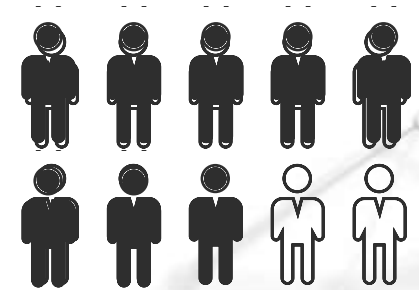
# All health workers everywhere are caught in this *vicious cycle* spiraling downwards:



# Recent surveys\* have indicated that the Canadian public is concerned.



9 out of 10 Canadians are concerned about the mental health of health care workers.



8 out of 10 Canadians are concerned about what this means for their *access* to, and the *quality* of health care.

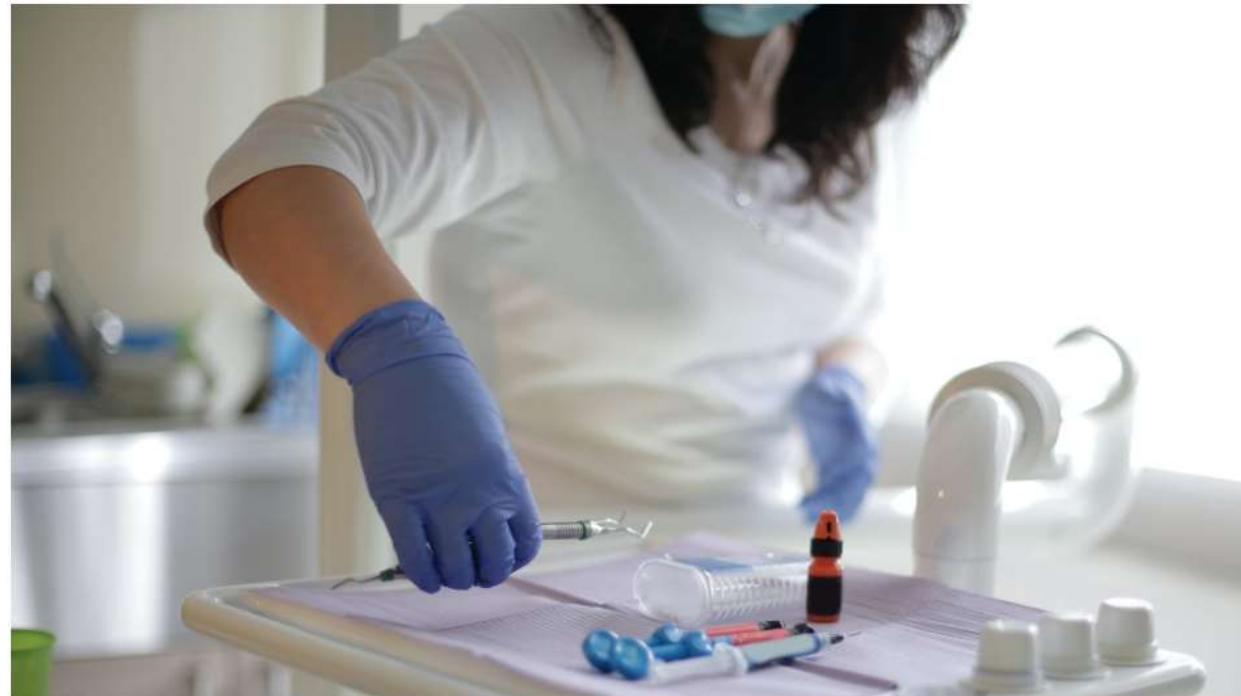
\*2022 Angus Reid Poll

# Yet we have so many internationally educated health workers in Canada who are not able to practice



HEALTH

## Federal government to provide funding to speed up credentialing of 6,600 internationally educated health professionals



(Andrea Piacquadio / pexels.com)

Manitoba

## New accreditation path will get more foreign-trained health-care professionals working in Manitoba: province

Woman who trained as nurse in Germany, now working at mine, hopeful as minister promises accreditation changes

Ian Froese - CBC News - Posted: Feb 08, 2024 6:00 AM EST | Last Updated: February 8



Monika Matera, an internationally educated nurse living in Thompson, Man., has found a job in mining she enjoys, but she continues to hold out hope she can work as a nurse in the northern Manitoba community. (Submitted by Monika Matera)

HEALTH

## Canada spends \$86M to accelerate health-care accreditation and address labour shortages

By Amy-Elle Prentice • Global News  
Posted January 15, 2024 3:03 pm · Updated January 15, 2024 4:57 pm · 2 min read



The federal government announced an \$86-million investment Monday in Winnipeg that will go to organizations across Canada...

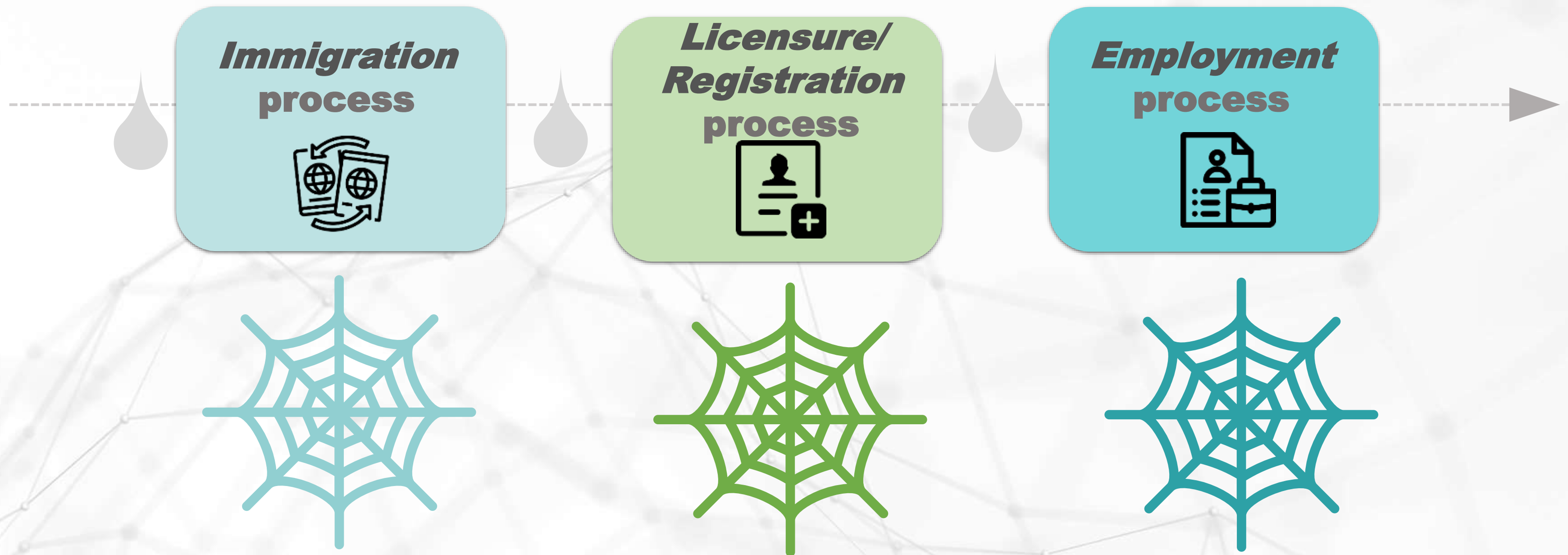




# The health worker migration, licensure & integration pathways need to be teased apart



# Each step involves a complex web of stakeholders and processes at the national, provincial/territorial and local/municipal levels



## **Immigration process**



- Government & Non-governmental organizations
- Outside of Canada – Consulates & Embassies plus recruiters and ‘intermediaries’
- Federal Government – Immigration, Refugees & Citizenship Canada
- Provincial/Territorial Governments – Ministries of Citizenship & Immigration + Provincial nominee programs
- Municipal – Settlement organizations



## **Licensure/ Registration process**



- Primarily non-governmental professional organizations
- Outside of Canada – Credential recognition agencies
- National level examining bodies
- Provincial/Territorial regulatory authorities
- Municipal – Settlement organizations

## ***Employment process***

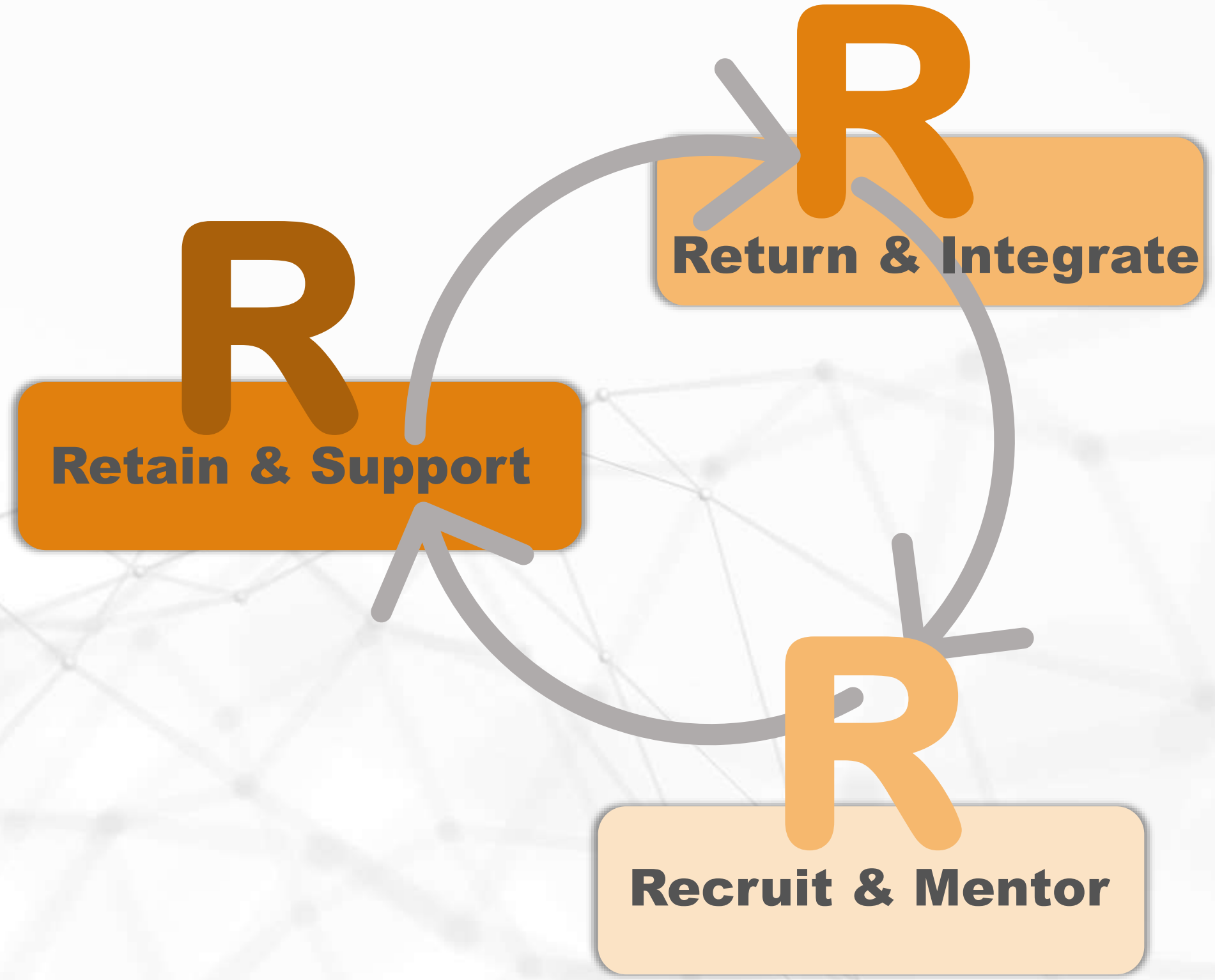


- Primarily non-governmental professional organizations
- Employers and employment agencies



# The solution space

We need to move to a *virtuous* Triple R and Triple E cycles implementing evidence-informed strategies to ...



... all these apply to Internationally Educated Health Workers

## ***Immigration process***



### **Challenges**

- (often) unclear and inconsistent information
- Requires numerous documents to provide
- Time consuming process
- Lack of transparency

### **Solutions**

- Provide more consistent information
- Streamline documentation required
- Accelerate processing times
- Increase transparency



## **Licensure/ Registration process**



### **Challenges**

- Costly, complex and time-consuming process
- Capacity challenges cause systemic delays
- (sometimes obscure) language requirements
- Examination costs
- Family and financial constraints

### **Solutions**

- Streamline the registration process by applying through one portal/gateway
- Reduce fees and increase timeliness and system capacity
- Facilitate the access to formal and informal assistance
- Provide financial and other forms of support

## **Employment process**



### **Challenges**

- Stigmatization, bias and discrimination
- Linguistic challenges
- Culture misunderstandings
- Lack of familiarity with Canadian healthcare systems

### **Solutions**

- Support a culture of civility free of bias and discrimination within healthcare settings
- Provide orientation programs to better facilitate the integration of IEHPs into various healthcare workplaces
- Provide support for mutual recognition and awareness



*Let us be reminded  
of the guiding  
principles of the  
2010 Global Code  
of Practice on the  
International  
Recruitment of  
Health Personnel*

- Ethical international recruitment **discourages active recruitment** from developing countries facing critical shortages.
- Migrant health personnel should receive fair and equal treatment.
- International cooperation between source and destination countries to derive mutual benefits is encouraged.
- Technical assistance and financial support to developing countries is encouraged.
- **Countries are encouraged to strengthen health workforce data gathering.**
- **Countries should implement effective health workforce planning, development and sustainability strategies.**

# Canadian Academy of Health Sciences

## Priority Pathways



### CANADA'S HEALTH WORKFORCE: PATHWAYS FORWARD

An Assessment by the Canadian Academy of Health Sciences



### Priority Pathways

- ➔ Supporting the development of successful and fulfilled Indigenous healthcare learners and practitioners.
- ➔ Supporting community engagement as a foundation for rural and remote recruitment and retention strategies.
- ➔ Creating safe, healthy, just, and equitable workplaces that have diverse and representative workforces. ★
- ➔ Transforming care through optimized scopes of practice within team-based models, supported by appropriate technology and properly aligned incentives.
- ➔ Embedding a culture of health workforce planning supported by enhanced data and decision-making tools. ★

# HESA: Addressing Canada's Health Workforce Crisis



House of Commons Standing  
Committee on Health  
March 2023

<https://www.ourcommons.ca/DocumentViewer/en/44-1/HESA/report-10/>

**Recommendation 1** That the Government of Canada collaborate with provincial and territorial governments and consult with organizations involved in recruiting internationally trained health workers, as well as Immigration, Refugees and Citizenship Canada where necessary, to streamline and simplify the process to recruit from countries known to train health workers in excess of their domestic needs.

**Recommendation 2** That the Government of Canada collaborate with provincial and territorial governments to provide more residency positions for international medical graduates.

**Recommendation 3** That the Government of Canada collaborate with provincial and territorial governments and professional regulatory bodies to improve upon and expand pathways to licensure for international physicians who have already completed their residency and who practiced abroad, such as the National Assessment Collaboration's (NAC) Practice-Ready Assessment (PRA) program and other similar initiatives.

**Recommendation 4** That the Government of Canada support expedited pathways to licensure and practice for internationally trained health care professionals



# Saskatchewan- Philippines Agreement – Win-Win?



- Premise:
  - Philippines has an oversupply of nurses,
    - Philippines 'oversupplied' nurse/patient ratio: 1.7/1000
  - Saskatchewan has an undersupply,
    - Saskatchewan 'undersupplied' nurse/patient ratio: 8.6/1000
- "win/win"?

**Pre pandemic**

# Sustain and Retain in 2022 and Beyond



## THE GLOBAL NURSING WORKFORCE AND THE COVID-19 PANDEMIC

January 2022

Authors

James Buchan, Adjunct Professor, University of Technology

Howard Catton, CEO, International Council of Nurses

Franklin A. Shaffer, President and CEO, CBFNS  
and ICNM Secretariat



# Internationally, the Nursing workforce is also in crisis

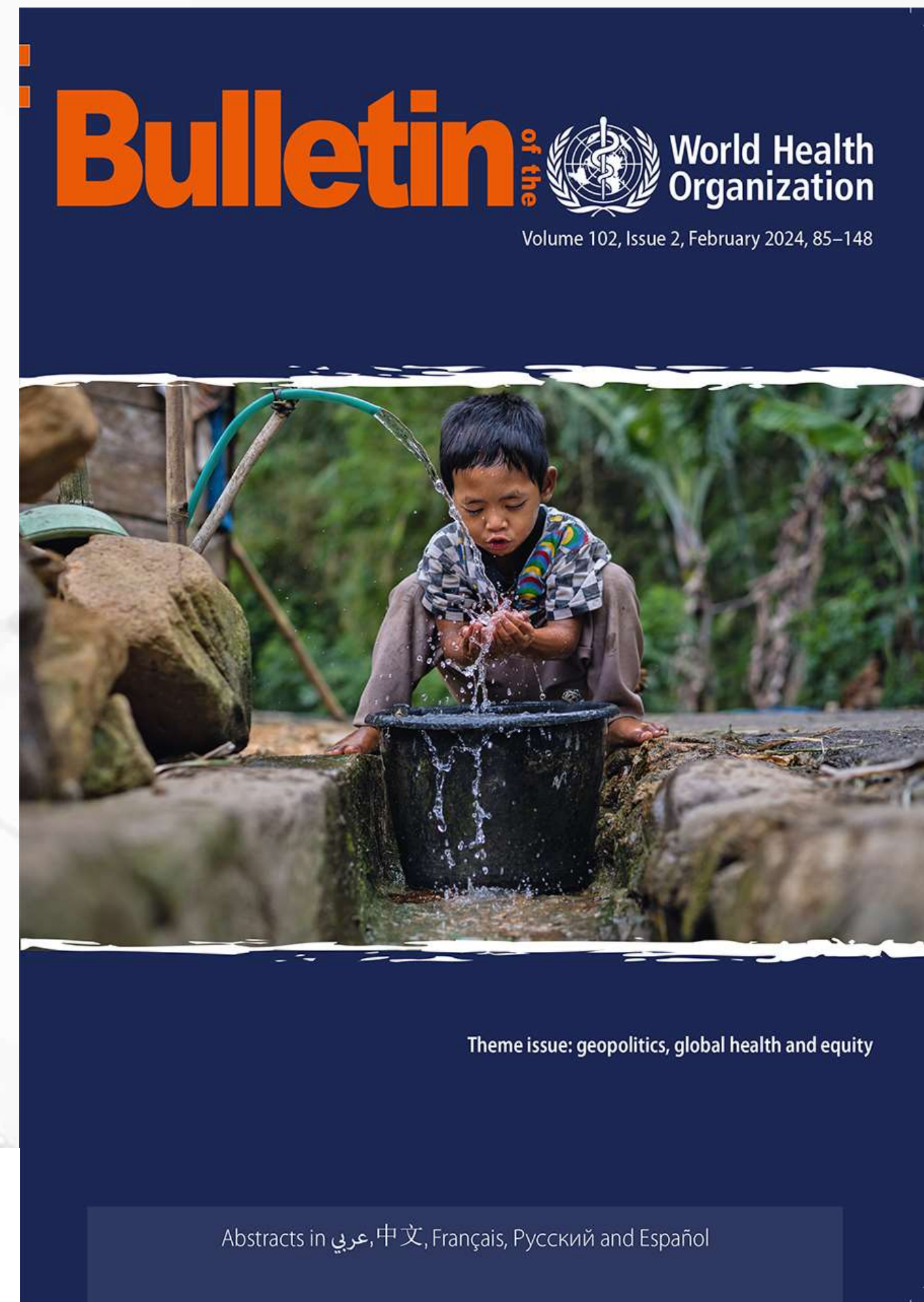


- The pandemic has increased the immediate need for nurses in all countries
- Many low- and middle-income countries entered the pandemic with inadequate supply of nurses
- There is an urgent need to monitor trends in international recruitment flows using a **self-sufficiency index** which can flag how reliant countries are on international inflows

# Hot off the press...

...A persistent challenge with health-worker migration is the inequities it creates. To minimize these inequities, systems of global governance of health-worker migration have arisen which include various global codes of practice, agreements and reporting requirements. **Reporting that is rigorous, open and transparent, and subject to scrutiny from the public, researchers, civil society organizations and other interested stakeholders, is important.**

Health workforce data needed to minimize inequities associated with health-worker migration  
Margaret Walton-Roberts<sup>a</sup> and Ivy L Bourgeault<sup>b</sup>  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10835628/>





# Discussing the migration, mobility and integration issues of internationally educated health professionals

CHWN Research Priorities Dialogue – June 2023

**Margaret Walton-Roberts &  
Housseem Eddine Ben Ahmed**  
CHWN Co-leads





# Summary of what we know

- **Topic 1: Brain drain:** many internationally educated health professionals are moving to high-income countries due to the poor work conditions in their home countries.
- **Topic 2: Impact of COVID-19 on international recruitment:** many high-income countries have been aggressively recruiting nurses from low-income countries, increasing global shortages.
- **Topic 3: Global codes and governance of the international migration of health professionals:** there is an ethical concern regarding the maldistribution of health professionals between high- and low-income countries due to the aggressive international recruitment.



# Key research gaps within migration, mobility and integration theme

## Gap 1

There is a need to understand more about health system reliance on IEHPs in Canada, and to identify targeted solutions for improved integration.



## Gap 2

Need to further improve national solutions to health worker shortages to develop greater self-sufficiency.



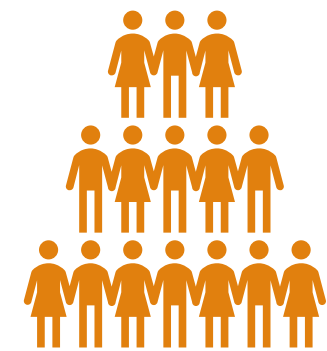
## Gap 3

How does active international recruitment affect the ability of source countries to achieve universal health coverage



## Gap 4

Develop, implement and assess promising solutions to increase equity, diversity and inclusion within the health workforce.





# Key Take Home Messages

1

A high-income country like Canada should dedicate more resources towards planning and management of what constitutes 8% of its GDP

2

It is not in the spirit of either the Global Code on the International Recruitment of Health Personnel to do rely on international recruitment

3

Once here, it is in the spirit of the Code to integrate their skills as fully as possible to address our wicked health workforce problem



# Join, follow and connect with us for more cutting-edge health workforce tools!



 [www.hhr-rhs.ca](http://www.hhr-rhs.ca)

 [info@hhr-rhs.ca](mailto:info@hhr-rhs.ca)

 @CHHRN

 chhrn1

 Canadian Health  
Workforce Network