

# *Internationally Educated Health Professionals: Highlights from a Canadian Perspective*



**RCRHS**  
Réseau canadien sur les  
ressources humaines en santé



**CHHRN**  
Canadian Health  
Human Resources Network

# Background

- Canada considers itself to be in the midst of a general HHR shortage.
- IEHPs represent a potential solution to this gap but we know that the transition for IEHPs to the Canadian workplace is not always smooth.
- We undertook a knowledge synthesis to capture the existing literature in Canada regarding the ‘recruitment, recognition and integration’ of IEHPs.



# Key Findings (1)

## PRE-IMMIGRATION ACTIVITIES/PROGRAMS

- The experiences of IEHPs differ largely between those who have been recruited, those who have undertaken professional recognition activities prior to immigrating and those who have not.
- There is increasing recognition of the consequences of active recruitment from countries with developing health systems, but some instances of active recruitment persist, particularly of nurses and to a much lesser extent, physicians and pharmacists.

# Key Findings (2)

## EARLY ARRIVAL ACTIVITIES/PROGRAMS

- Early system navigation supported through micro financing programs or utilizing a case management approach, such as the one undertaken by the Access Centre for Internationally Educated Health Professionals are critical.

# Key Findings (3)

## CREDENTIAL RECOGNITION & PROFESSIONAL RECERTIFICATION

- We find three general themes.
  - *First, the process is seen as opaque by IEHPs.*
  - *Second, there is a recognition of this experience by many stakeholders.*
  - *Finally, there are a number of policies and programs that have been put in place to respond to the concerns raised.*
- What is not yet clear, however, is whether those policies are fully addressing the concerns. That is, there is an inherent time lag in the impact of the recent policies and programs on the experiences of IEHPs.
- We suspect, however, that there will be a number of IEHPs who have ‘been in the system’ for a sufficient length of time that their chances of professional recognition are significantly diminished.

# Key Findings (4)

## BRIDGING & RESIDENCY PROGRAMS

- What we know from the literature about bridging and residency programs is that despite wide variation in the content and structure of bridging programs, they are often identified as promising practices for facilitating the integration of IEHPs.
- Upon completion of bridging programs, IEHPs have been found to report a better knowledge of the culture of health care in Canada practice and improved communication skills.
- A common lament in the literature about bridging programs is that funding is often isolated and temporarily.
- This draws attention to the need to better integrated bridging programs both within the professional infrastructure as well as *interprofessionally*

# Key Findings (5)

## WORKPLACE INTEGRATION

- This reveals another layer of barriers and discrimination on top of what we have already highlighted for credential assessment and professional recognition.
- Employers play a critical role in this process. More explicit examination of their perspectives on the role they could and should play is another promising area for research development.