

BACKGROUND

The recruitment of internationally educated nurses (IENs) is identified as one of the solutions to persistent health care workforce shortages across the country. In 2022 IENs accounted for 13% of all nurses in Canada, and this continues to increase with recruitment efforts and policy changes aimed at addressing health human resource gaps. Prior research shows that varying pathways to professional recertification can be confusing, costly and lengthy, and may result in downward employment mobility, deskilling, and IENs leaving the profession (Covell et al., 2022; Crea-Arsenio et al., 2023). For those who do make it into practice, IENs are making meaningful contributions to a health care system in crisis, but they are also confronted with a host of challenges. IENs in Canada have reported difficulties with workforce integration, feeling unwelcome, racism and discrimination, learning to navigate our systems, and adjusting to aspects of nursing that differ from country to country (e.g. scope of practice, communication styles, etc.) (Covell et al., 2014).

PURPOSE

This analysis is part of a larger qualitative descriptive study that seeks to better understand the experiences of IENs as they transition to working in the Canadian health care system, and to identify opportunities to support them in a transition that is known to be challenging. We seek to understand this from the perspectives of IENs themselves, and those who support them in this transition (e.g. nursing faculty, health care administrators).

METHODS

IEN students and IENs registered as nurses in Ontario and currently employed were eligible to participate, as were faculty members teaching in nursing programs for IENs in Ontario (e.g. bridging programs). Eligible health care administrators were those who have experience supporting IENs as they transition into their work in the Canadian health care system, including managers, administrators, clinical educators, and others. In-depth, semi-structured interviews were completed March-May 2024, using videoconferencing software. We interviewed 27 IENs, 10 faculty members and 10 health care administrators. Interviews were digitally recorded and then reviewed, cleaned and anonymized by trained research assistants. For the purposes of this analysis, we have focused on data from the IENs. Ethics approval was granted by the Research Ethics Board at Conestoga College (REB #528).

Table 1. Demographics of IEN Participants (n=27)

| | |
|--------------------------------------|--|
| Country of Origin | Years of practice prior to coming to Canada |
| India 14 | Years (avg) 6.36 Min: 1, Max : 11 |
| Philippines 7 | |
| Nigeria 4 | |
| Nepal 1 | |
| Taiwan 1 | |
| | Gender all IENs were women |
| Length of time in Canada | Languages spoken: 21, most common being English, Hindi, Punjabi and Tagalog |
| Years (avg.) 4.87 Min: 1, Max: 10 | |

RESULTS

Transition to Practice Journeys: Motivations, Dreams & Challenges Participants’ journeys were diverse, but our interviews were replete with words like “confusing”, “not straightforward”, and “expensive”, and the consequences of this challenging and costly process included feeling frustrated, stressed, unsupported and underappreciated, sometimes for years. These consequences extended to their families, impacting their spouses’ immigration journeys and choices, their children and timeframe to have children, their ability to send money home to their parents, etc.

Characteristics, Skills & Contributions Participants described professional and personal aspirations to pursue additional education and training in a range of areas, including: chemotherapy, hospice care, emergency psychiatry, and cardiac care. Several also discussed long-term goals of completing a master's degree in nursing, becoming a nurse practitioner, and teaching nursing. These nurses also speak several languages, an important and under-valued asset when serving Canada’s increasingly diverse patient population. They brought with them an average of 6 years of nursing practice prior to arrival in Canada, with some having worked in other countries and cross-cultural contexts, and in specialized units.

Policies Impacting IENs’ Ability to Contribute . A commonly cited difference, which many greatly appreciate, is the expanded role and autonomy of the nurse in Canada, and the respect that comes along with this.

Participants also shared many policies, programs and features that support IENs’ ability to contribute their skills and expertise. There was a noted improvement for the more recent students, with IENs describing newer processes and programs that support recertification. Clinical extern programs, which allow nursing students to work in hospitals as care aides during their studies, providing them with both income and exposure to the health care system. The Supervised Practice Experience Partnership (SPEP) program was described positively. SPEP allows IENs to work under the supervision of a nurse for a minimum of 140 hours, giving them the opportunity to demonstrate “evidence of practice” and “language proficiency”, both requirements for licensing.

IMPLICATIONS

The nurses that we interviewed were a dynamic, educated group with dreams to pursue additional education and training in a range of nursing practices. It is, therefore, particularly egregious that IENs are more often faced with less opportunities to grow professionally (Crea-Arsenio et la., 2023). The ongoing professional development of IENs, beyond recertification, should be recognized and supported. The Registered Nurses’ Association of Ontario (2024) has urged government to more meaningfully focus on not only the recruitment of new nurses, but also retention. Retention is typically conceptualized as retaining employees once they are hired, but our research reiterates the need for IEN retention supports that cover these nurses in the “employment gap” (Covell et al.,2022), when they are waiting and working to become certified in Ontario.



CONESTOGA

CENTRE FOR HEALTH CARE
RESEARCH & INNOVATION

Funding for this research was provided by the Conestoga New’s and Emerging Researcher Grant Plus (CNERG+) program.

Contact us: Email Director Linda Sheiban Taucar, lsheibantaucar@conestogac.on.ca

Or scan the QR code to the right, which will direct you to our website

