

Recruiting Foreign-Trained Doctors and Nurses – Thinking Twice

The technical term is internationally educated health providers, or IEHPs. They are the health care professionals – mainly doctors and nurses – who have come to work in Canada after being trained in other countries. These people have always played an important role in the Canadian health care system. Indeed the proportion of these new doctors and nurses in the Canadian system has not changed greatly since the birth of Medicare. What has changed is *where* they are coming from. Increasingly, they are leaving developing countries where there is a greater burden of disease and fewer human resources.

Developed countries like Canada are increasingly being singled out as the cause of a “brain drain” from poorer nations, and are accused of actively recruiting these scarce human resources to make up for their own health human resource shortages and uneven distributions. Thus, the issues of how Canada recruits IEHPs, the ethics of recruiting from developing countries, and how these new doctors and nurses fit into the overall health human resource planning efforts of Canadian governments, are increasingly important. At the same time, a number of international “codes of conduct,” policy statements and diplomatic initiatives have attempted to come to grips with this issue.

The new report, *The Ethical Recruitment of Internationally Educated Health Professionals: Lessons from Abroad and Options for Canada*, by CPRN’s Renée Torgerson, Tom McIntosh and Nathan Klassen, will be coming out in January 2007. It provides options for Canadian governments to frame our stance on the recruitment of foreign trained health care professionals in an ethical manner that recognizes the complexity of the issue and the conflicting sets of interests that need to be accommodated.

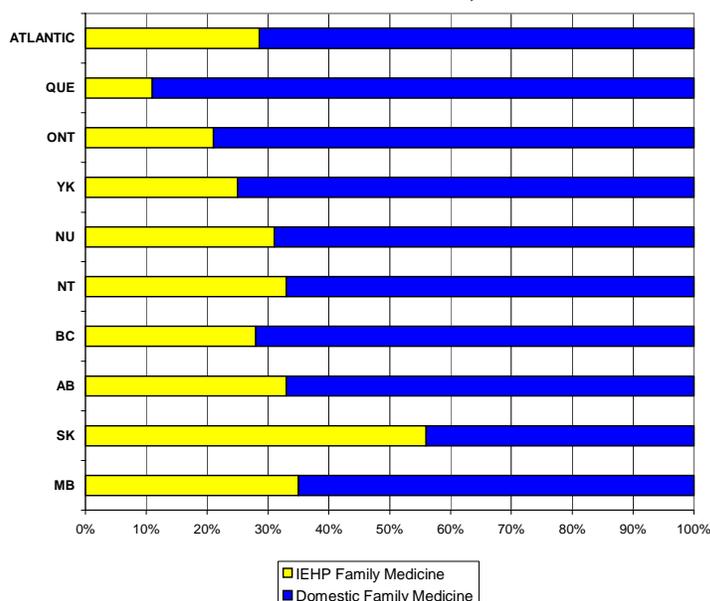
As Canada begins to experience shortages, active recruitment is a valued policy response. But it must be done in a fair and transparent manner that adheres to the principles of global equity, personal autonomy, fairness and transparency.

This is not as simple as it looks. There is a general consensus by the international community and Canadian stakeholders that the active recruitment of these health providers from developing countries is unacceptable. But, there is less agreement on which specific actions constitute unacceptable

recruitment practice, and which jurisdictions – including have-not provinces – should be allowed to recruit at will. Here is an example of how complicated it is to set up a Code of Practice on Ethical Recruitment: on one hand, it is acceptable for these internationally educated health professionals to apply for positions and move to Canada on their own behalf; on the other hand, Canadian stakeholders judged putting “help wanted” ads on Canadian Web sites as constituting passive recruitment action.

Moreover, a Code of Practice on Ethical Recruitment on the wall does not necessarily translate into ethical recruitment practice on the ground. This does not mean that a Code of Practice should be legally binding. What *is* needed for compliance is the inclusion of all stakeholder groups in the drafting and implementation of a Code of Practice, including the expectations around compliance. Some kind of system to monitor what is going on “down on the ground” is also essential. This includes not only monitoring where recruits are being drawn from, but also the manner in which they are being recruited.

Internationally vs. Domestically Educated General Practitioners, 2005



Source: CIHI (2006). *Supply, Distribution and Migration of Canadian Physicians, 2005*.



We also need to *demonstrate* that we are engaging in ethical recruitment practice. Simply put, good intentions are not enough; they need to be backed up with evidence. This means defining the guiding principles and translating them into measurable outcomes. For instance, fairness could be measured by monitoring advertisements to ensure that they accurately depict Canadian workplaces and the Canadian way of life.

In the end, perhaps the first policy response for dealing with a shortage of health professionals would be to work harder at becoming self-sufficient: including improving recruitment and retention policies by ensuring quality workplaces and maximizing the skill sets of all health care providers (foreign trained providers included). Recruiting outside Canada should, therefore, be only one component of the overall discussion around a pan-Canadian and integrated approach to health human resources planning.

Top Downloads



1. Measuring the Quality of Post-secondary Education: Concepts, Current Practices and a Strategic Plan (83,324)
2. Labour Force Ageing and Skill Shortages in Canada and Ontario (75,662)
3. Too Many Left Behind: Canada's Adult Education and Training System (70,656)
4. Housing Is Good Social Policy (60,193)
5. Healthy Workplace Strategies: Creating Change and Achieving Results (57,637)
6. Work-Life Balance in the New Millennium: Where Are We? Where Do We Need to Go? (55,991)
7. Accountability in Health Care and Legal Approaches (49,867)
8. Data, Data, Everywhere... : Improving Access to Population Health and Health Services Research Data in Canada (46,160)
9. Urgent Need, Serious Opportunity: Towards a New Social Model for Canada's Aboriginal Peoples (39,424)
10. Health Human Resources Policy Initiatives for Physicians, Nurses and Pharmacists (38,059)

www.e-network.ca

Receive weekly notification of the latest publications, speeches, articles and presentations from CPRN researchers. All of them are available free for downloading from the CPRN Web site.

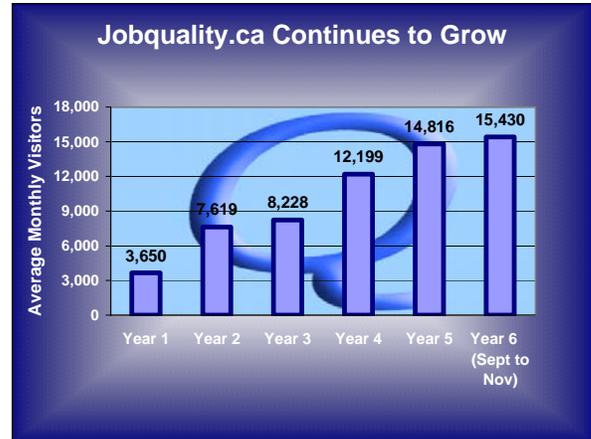
Sign up today by visiting www.e-network.ca

Partnerships

Bell Canada and JobQuality.ca

Bell Canada has been a long-standing friend and supporter of CPRN. The organization was one of the initial funders of CPRN's satellite Web site www.JobQuality.ca.

Bell Canada Inc. has recently agreed to extend its support of [JobQuality.ca](http://www.JobQuality.ca) for the next five years. We at CPRN are most grateful for this renewal of Bell Canada's commitment, which will ensure that [JobQuality.ca](http://www.JobQuality.ca) will continue to bring up-to-date information on what constitutes good, quality employment in Canadian workplaces.



Seeking New Partners and New Friends

CPRN is lucky to have the support of many partners like Bell Canada. We also have had tremendous support from Home Depot Canada, the Laidlaw Foundation, the RBC Foundation and Power Corporation, to name just a few. But our viability also depends on help from individuals. And your help has never been more important.

This fall, the Government of Canada cut its four-year funding commitment to CPRN. In the days after the cut was announced, we received hundreds of e-mails of support from across Canada. **Thank you for your commitment to CPRN.**

CPRN is evolving to be as effective as possible in these new circumstances. We are committed to continuing the high quality of research which Canadians have come to value over the last 11 years.

There are three ways you can help us to overcome this setback:

- You can make a donation to CPRN through www.canadahelps.org a secure Web site for supporting Canadian non-profits and charities;
- You can email and register your support through our Web site, www.cprn.org; and
- You can become an Ambassador and introduce CPRN to friends and institutions you know are interested in preserving the public discourse in Canada.

Many friends have already made a personal contribution to CPRN. Thank you for your generosity.

Security – CPRN’s 2005-2006 Annual Report

The latest edition of CPRN’s Annual Report is now available on our Web site. We chose the theme of security because of its double meaning to Canadians. It has become like a mantra chanted by every government following the attacks on September 11, 2001. At the same time, many Canadians are feeling less secure when it comes to prosperity, quality of life and their sense of inclusion. Security of health, work and family and civic participation are the basics of life. And they are at the very root of CPRN’s work.

The **CPRN 2005-2006 Annual Report – Security** is available on-line at www.cprn.org.

CPRN Policy Briefs – Good Thinking in Small Packages

CPRN has begun a series of short papers designed to highlight a topical policy area and, in one page, describe the research we are doing. The result is a continuing series called **Policy Briefs**. While each paper is about a single policy area, it may contain material from several CPRN research papers or themes. The goal is to focus our research into simple, useful and current information. Here are the *Policy Briefs* completed in the spring of this year:

Strengthening Canadian Families – a look at what policy mix is best for Canadian families.

Making Work Pay – suggestions for helping Canada’s working poor.

Public and Private Roles in Health Care – the “end of Medicare” or “passive privatization”?

Waiting for Health Care – getting past simple promises to realistic solutions.

Restoring Citizen Trust – The Heart of Accountability – establishing a political culture that reconnects with politicians and the public.

Canada’s Young Drop-outs – What Needs to be Done – getting Canada’s young adults with low levels of education (YALLE) back to school and into good jobs.

Getting to College or University – Not Just About Money – the determinants of whether young people will or won’t go on to post-secondary education.

CPRN’s *Policy Briefs* are available at: www.cprn.org/en/doc.cfm?doc=1586.

You can access or download full reports and presentations reviewed here from our Web site at www.cprn.org.

News from CPRN’s Board of Directors

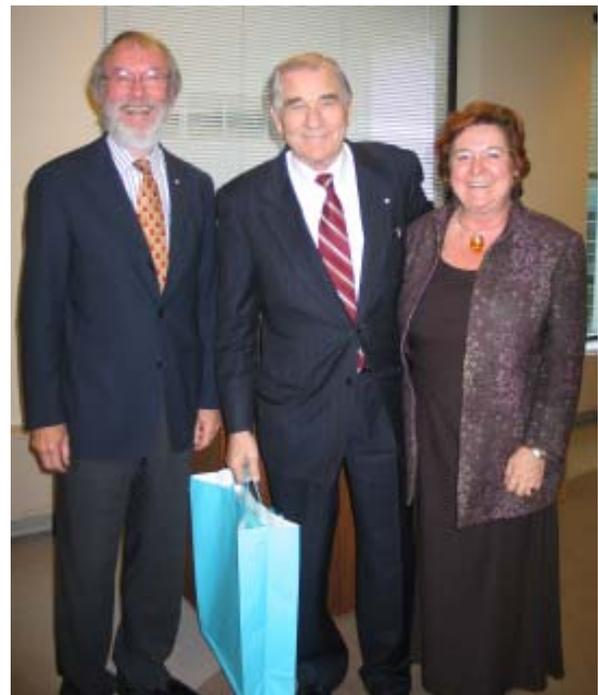
Changing Chairs

Allan Shaw’s family started a company in Nova Scotia more than a century ago – manufacturing bricks. So, CPRN knows that strength and solidity will be hallmarks of his term as Chair of CPRN’s Board of Directors. Mr. Shaw moved into the position at the November 2006 meeting of the board.

As well as being Chairman of The Shaw Group, Mr. Shaw is Director, the Bank of Nova Scotia; Director, the Canadian Centre for Ethics in Public Affairs; and Director, the Dalhousie Medical Research Foundation.

Mr. Shaw says he recognizes that he is taking over at a critical time. “CPRN is at a significant crossroads following the recent cancellation of the government grant. However, over its first decade, it has consistently demonstrated agility within the policy research marketplace and resiliency in the face of funding challenges. This board is committed to supporting the efforts of CPRN in its second decade, as it adapts and flourishes in this new environment.”

Allan Shaw takes over from Arthur Kroeger. Mr. Kroeger was a founding board member in 1996, and served as Chair of the board since 1999. Dubbed the “dean of Deputy Ministers” by Parliamentary media, Mr. Kroeger brought a wealth of experience to his leadership, having served as Deputy Minister in five federal government departments.



Allan Shaw, Arthur Kroeger and Sharon Manson Singer



The Poverty Debt

Two reports on poverty in Canada were issued in November 2006, each with strikingly different conclusions. One said less than 6% of Canadian children live in poverty; the other said the poverty rate for Canadian children was more than three times that, over 17%. How can that be?

Well, one report was from the Fraser Institute, a Vancouver-based think tank that primarily proposes competitive market solutions to social problems. The other was from Campaign 2000, a national coalition of community organizations which are promoting an end to child poverty – echoing an all-party resolution in 1989 to accomplish that goal by the year 2000.

In issuing its number, the Fraser Institute celebrated the national poverty rate falling to the “lowest level in history,” just under 5%. It called the number of children living in poverty, just under 6%, a “dramatic improvement.” Not only were these numbers “historically” low, they also were much lower than rates of recent years.

Campaign 2000 reported that child and family poverty rates have been “entrenched” at around 17-18% for the last five years. And that the rate has never been below 15% since 1989, the year the House of Commons resolved to end child poverty.

As you have probably guessed by now, the Fraser Institute and Campaign 2000 define poverty very differently. There is no official definition of poverty in Canada, due no doubt to the fact that the calculation of how many people live below the poverty level is contentious. But how different are their definitions?

The measure used by Chris Sarlo of the Fraser Institute is a basic, bare-bones approach. Sarlo includes the cost of only what he considers the basic necessities for living. The cost of subsistence levels of food, clothing, housing, and a few other miscellaneous items are all that are included. For a family of four, this approach gives a figure of just under \$23,000 as the poverty line.

Campaign 2000 relies on Statistics Canada to provide the yardstick. Stats Can does not measure poverty. Instead it issues “low income cut-offs,” levels below which families would find themselves living in “straitened circumstances” because it spends a greater portion of income on basics such as food, clothing and shelter than does the average family of a similar size. Stats Can sets this line, for a family of four, at around \$32,000.

Neither the Fraser Institute nor Campaign 2000 can claim to have the “right” definition of poverty – choices about what level of income constitutes a poverty line is a representation of values, goals and objectives. The Fraser Institute’s rationale for its approach is that the Statistics Canada lines are too generous; it doesn’t measure “true deprivation,” thereby misrepresenting the number of people in Canada that can truly be labelled poor or impoverished.

Whatever the measure, there are still too many poor people in Canada. By the measure of the Fraser Institute, we have more than 1.6 million Canadians – hundreds of thousands of whom are children – living in serious deprivation, conditions which are hazardous for health and development. One in every 18 Canadian children is living in deep poverty in a country that finds itself so rich it can afford to put down over 13 billion dollars as payment on the national debt. Deep poverty is deprivation on an ongoing basis. It is not missing out for a month when funds are short. It is about not having money to participate in our society, period.

While we pay down the national debt, we are running up a *poverty* debt that will sink the next generation. Rather than worrying about the next generation’s fiscal debt load we should be worrying that there will be a next generation that can work and participate as Canadian citizens. Living in poverty reduces both expectations for health and getting a job.

The poverty debt can be directly addressed through Canada’s National Child Benefit. Raising the amount of the benefit for families with children provides immediate relief and lifts children out of deep and destructive poverty. Their parents also need help to be included in an economy that has been shedding unskilled workers. Parents need jobs that will support families. CPRN’s study *Too Many Left Behind* found that 9 million workers had not attained literacy levels that are expected of a productive worker. Canada needs to raise the skill level of our workers to be competitive in the new knowledge economy.

Forget about the ongoing debate about the measurement of poverty – it isn’t a problem. The big problem is: we have too many poor children by any measure.

Sharon Manson Singer, Ph.D.
President

David Hay, Ph.D.
Director, Family Network

CPRN is a national not-for-profit research institute whose mission is to create knowledge and lead public dialogue and debate on social and economic issues important to the well-being of Canadians, in order to help build a more just, prosperous and caring society.

NetworkNews is published quarterly by Canadian Policy Research Networks, an independent policy research think tank.