



***The Ethical Recruitment of Internationally
Educated Health Professionals:
Lessons for Saskatchewan***

Presentation to:
Saskatchewan Institute of Public Policy
University of Regina
January 2007

**Tom McIntosh, Renée Torgerson
and Nathan Klassen**

**Health Network
Canadian Policy Research Networks**

H E A L T H N E T W O R K



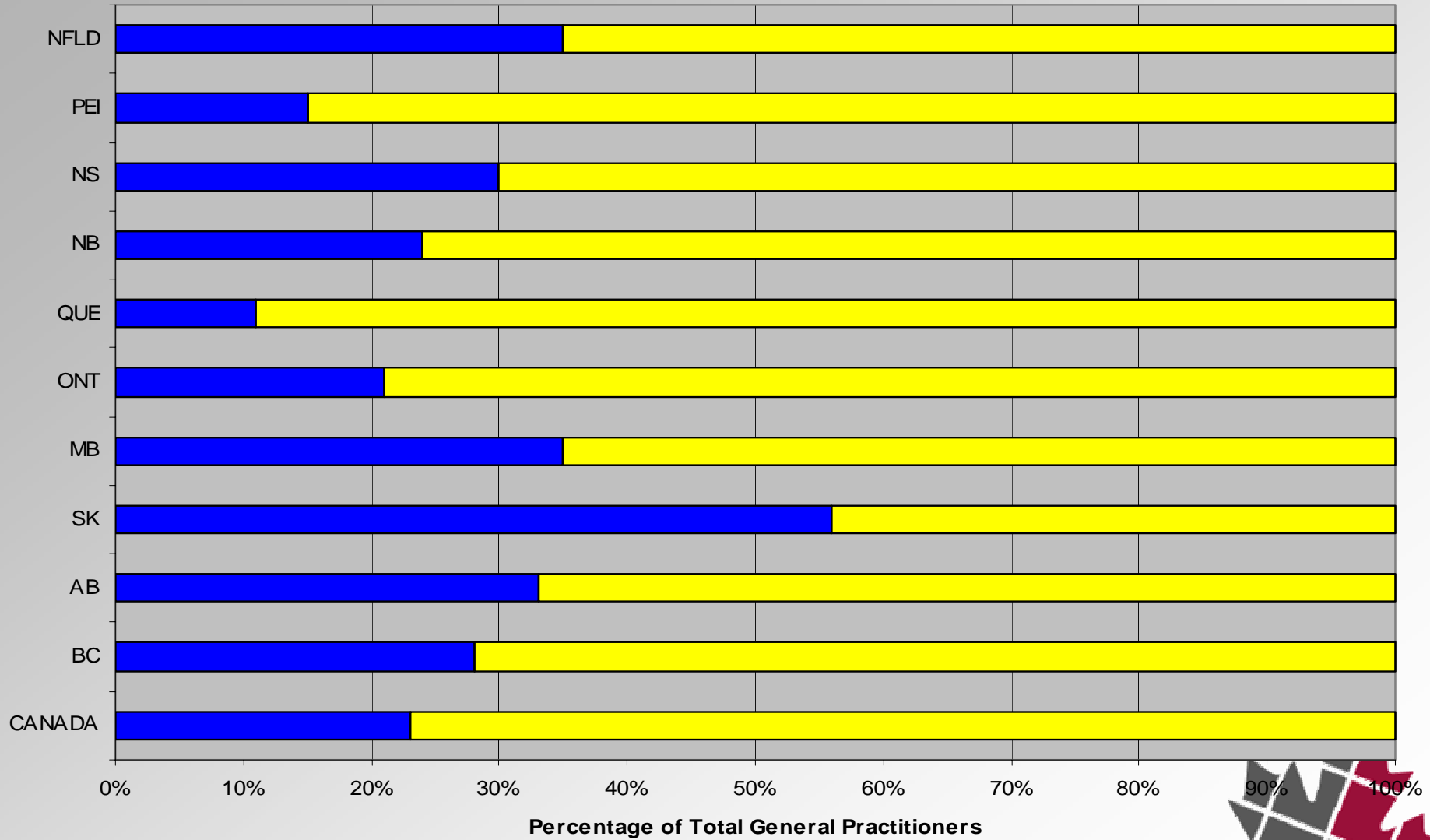
Presentation Outline

- Internationally Educated Health Professionals (IEHPs) in Canada and Saskatchewan
- The Ethical Dilemmas We Face
- What Does “Recruitment” Mean
- The International Experience
 - Codes of Conduct
 - Monitoring, Enforcement & Sanction
- Thoughts on a Framework for Ethical Recruitment

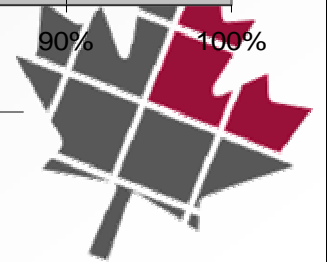


Canadian General Practitioners - IEHP vs DEHP (CIHI 2005)

■ IEHP ■ DEHP

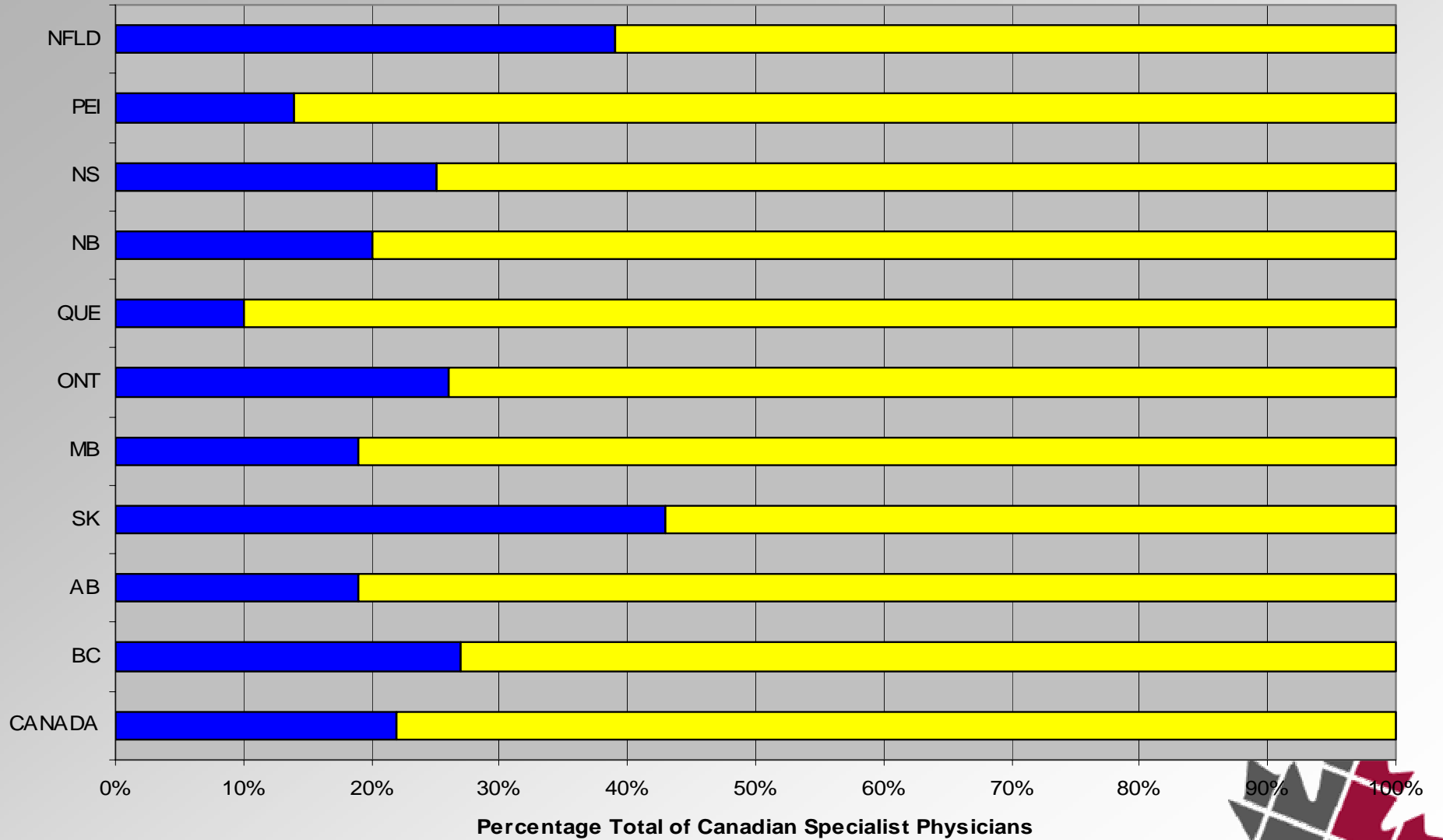


H E A L T H N E T W O R K

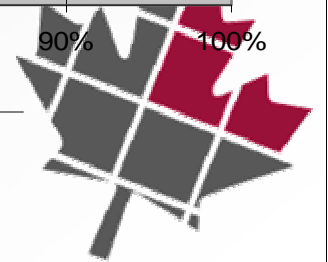


Canadian Specialist Physicians - IEHP vs DEHP (CIHI 2005)

■ IEHP ■ DEHP

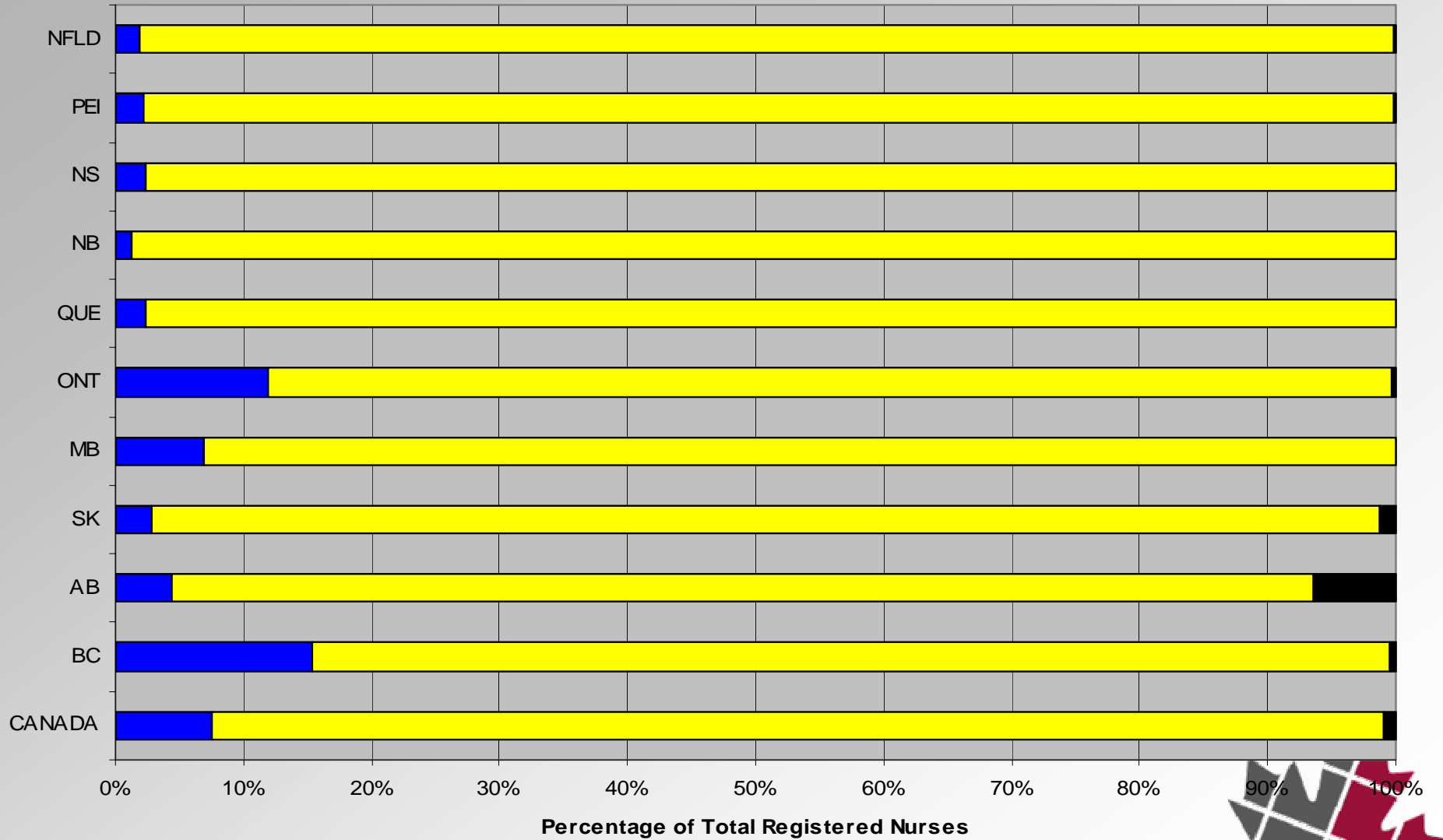


H E A L T H N E T W O R K

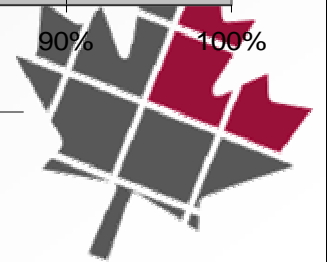


Canadian Registered Nurses - IEHP vs DEHP (CIHI 2005)

■ IEHP ■ DEHP ■ Not Stated

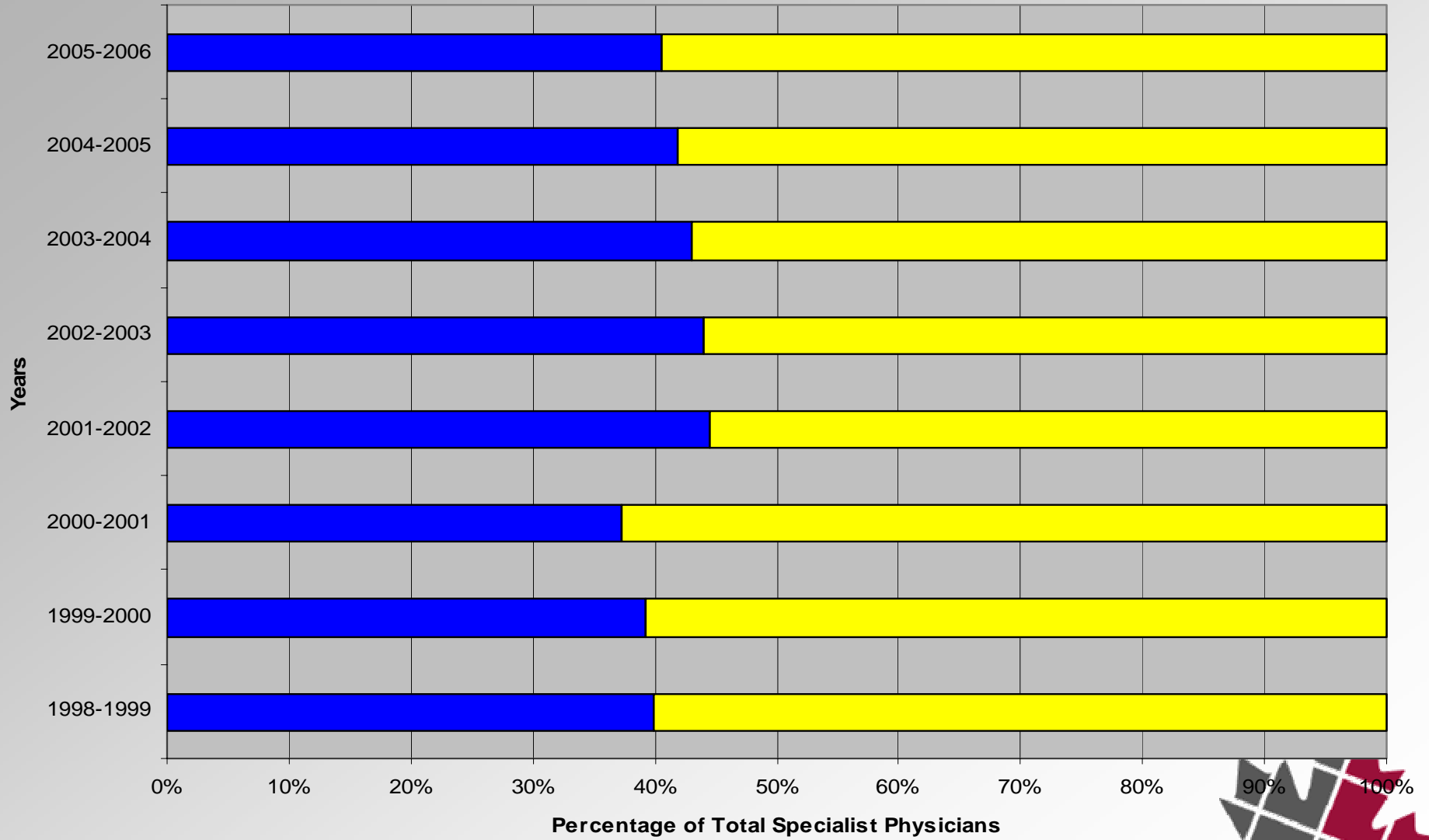


H E A L T H N E T W O R K

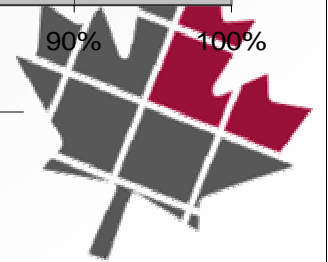


Saskatchewan Specialist Physicians - IEHP vs. DEHP

■ IEHP ■ DEHP

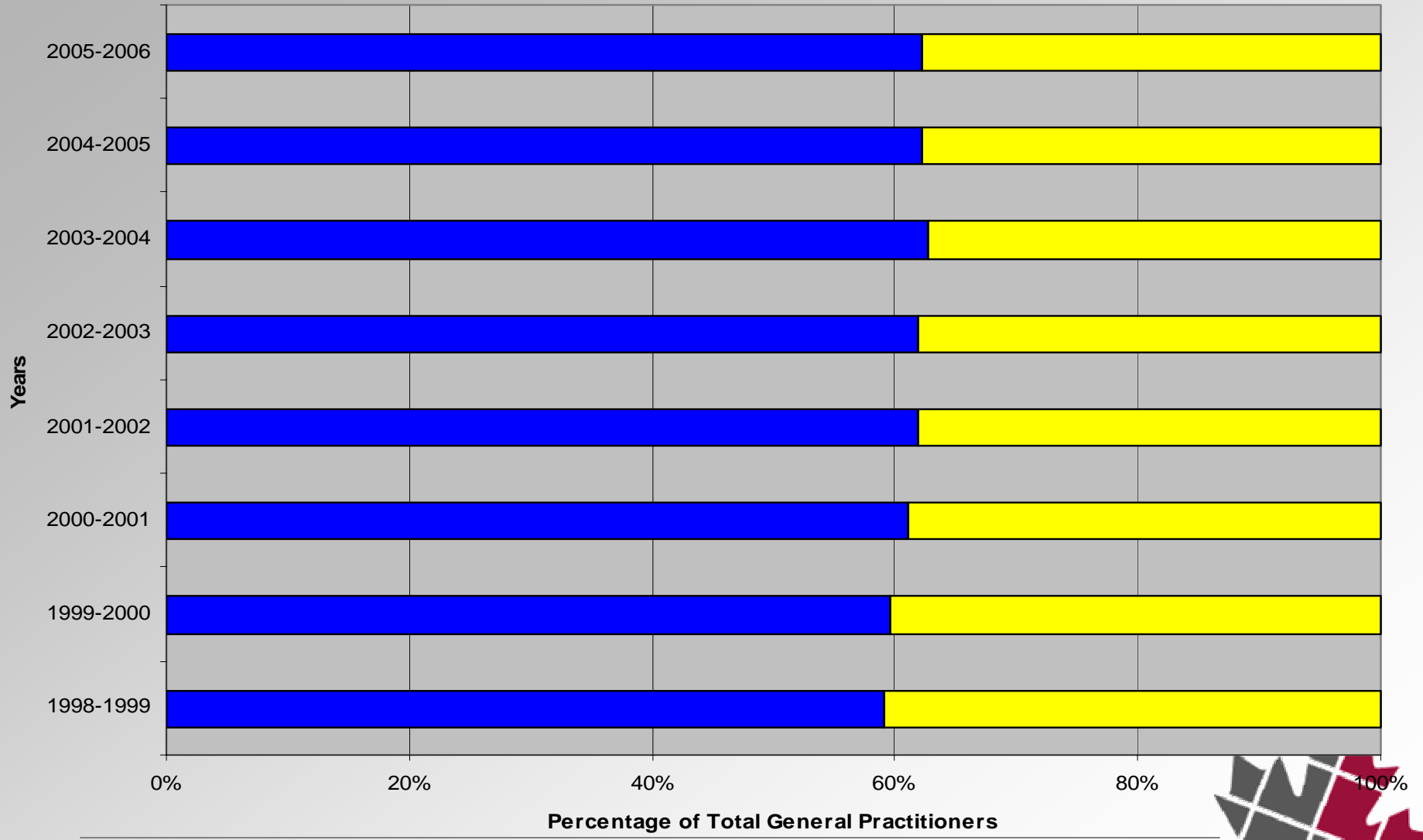


H E A L T H N E T W O R K

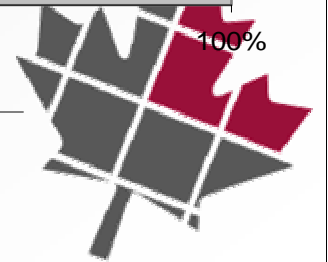


Saskatchewan General Practitioners - IEHP vs. DEHP

■ IEHP ■ DEHP

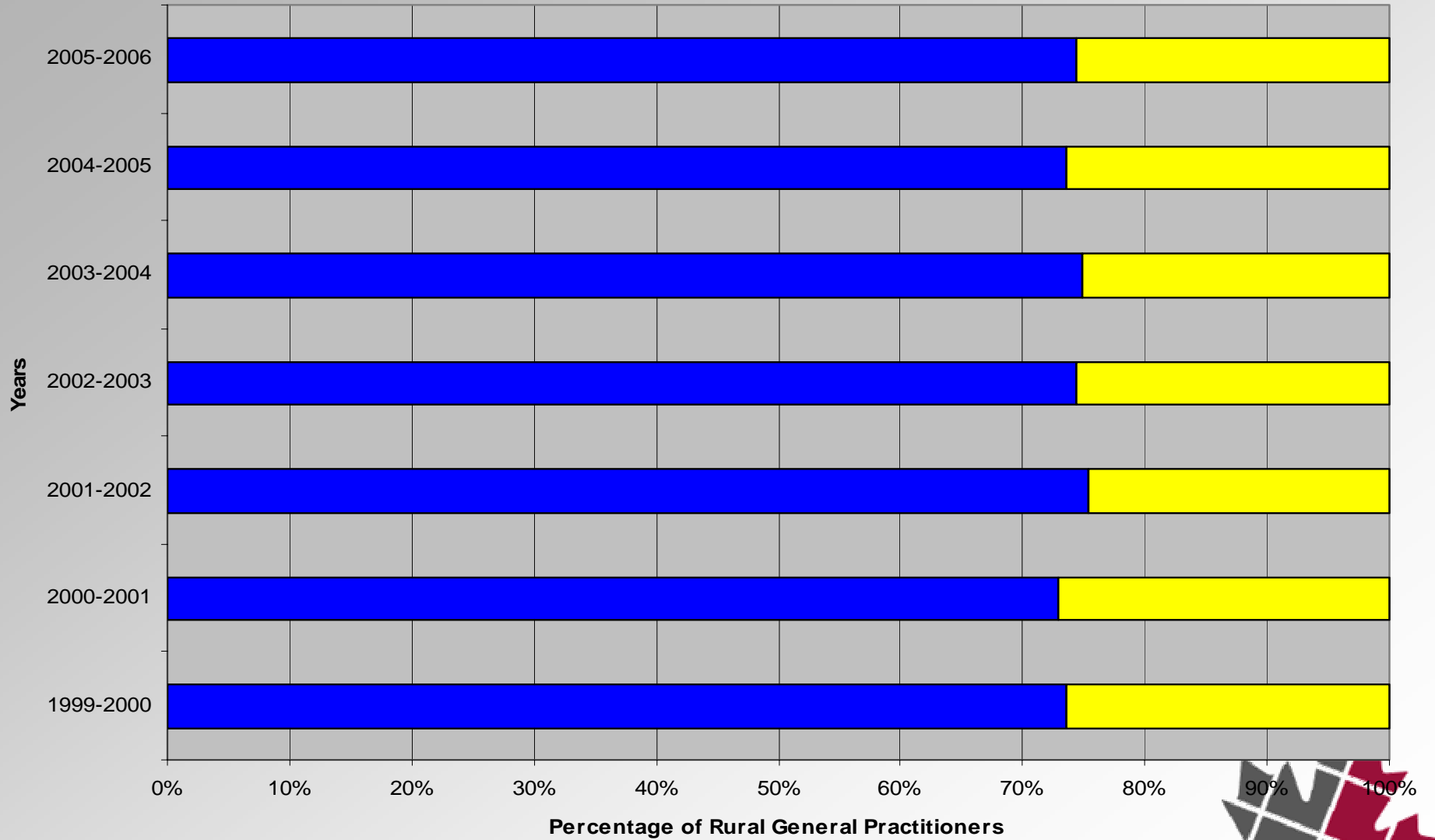


H E A L T H N E T W O R K

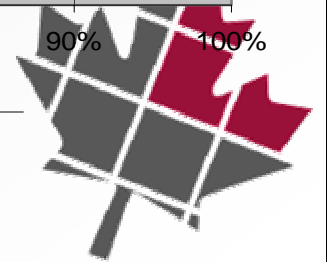


Rural General Practitioners in Saskatchewan - IEHP vs DEHP

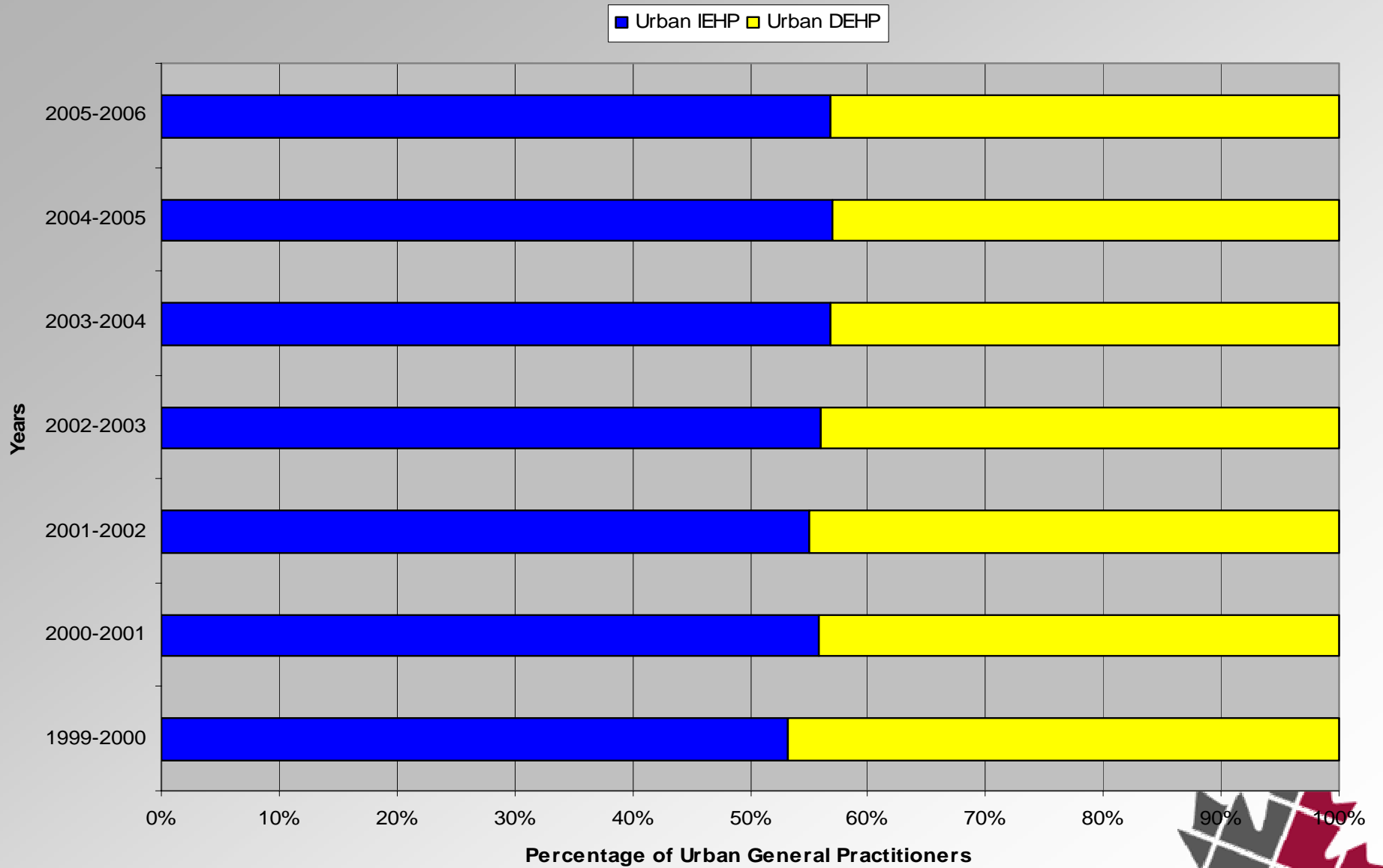
■ Rural IEHP ■ Rural DEHP



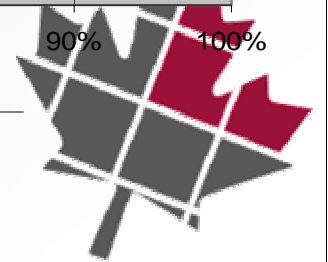
H E A L T H N E T W O R K



Urban General Practitioners in Saskatchewan - IEHP vs. DEHP



H E A L T H N E T W O R K



The Ethical Dilemmas (Part I)

- Proportion of IEHPs stable over 4 decades
- IEHPs have the right to move
 - And “push” factors are real in developing world (poverty, war, economic instability, social instability)
- Canada has very real shortages and mal-distributions of health professionals
 - These are the result (in some cases) of past policy choices
- Developing countries invest proportionately more resources in creating health pros



The Ethical Dilemmas (Part II)

- By any measure, Canada's health care challenges pale in comparison to those of developing countries
- Widespread consensus that the "active recruitment" of IEHPs from developing countries is inappropriate...
- But no consensus on how (or even whether) it can be curtailed
 - Reparations popular with developing countries, but unworkable & untenable for developed countries



“Active” vs. “Passive” Recruitment

- Distinction between the two was meant to resolve the dilemma
 - Active = Unacceptable and Passive = Acceptable
- But distinction is not always clear...
 - Immigration Rules (points system & PNP), Websites, Private Agencies, Professional Networks, etc.
 - Stakeholder orgs have clear idea, but activists want more restrictions & gov'ts want fewer...
- The distinction needs clarity if it is to be useful for policy development



Codes of Conduct

- United Kingdom Code of Conduct, 1999
 - Revised 3 times
- World Medical Association Guidelines on Ethical Recruitment of Physicians
 - Endorsed by SRPC, CNA & CMA
- Commonwealth Code of Practice, 2002
 - Canada supports, but has not signed
- Issue raised, but not explicitly confronted, by Nursing Sector Study & Task Force II



The Effectiveness of the Codes

- Little empirical evidence that CoCs have had significant impact on recruiting practices
- Monitoring & enforcement is “non-existent”
 - We know where IEHPs come from, but we need to know **HOW** they were recruited
 - Sanctions for violations mostly non-existent
- Regulation of private actors and private behaviour is not effective (or feasible?)
- Current CoCs are symbolic
 - Do we want more?



Ethical Recruitment: Part of a Multi-Faceted HHR Plan

- Canadian governments (F/P/T) have to FIRST get there own house(s) in order:
 - Define & operationalize “self-sufficiency”
 - Better use of existing domestic supply (incl. IEHPs)
- External recruitment is a *valued* policy response but it must adhere to some guiding principles: personal autonomy, global equity, fairness, transparency, etc.
- Defining & operationalizing these principles will move a CoC beyond symbolism



A Framework for Ethical Recruitment

- Transparency & accountability needed:
 - Are some countries/regions “off-limits”?
 - What can institutions/RHAs/provinces do and not do in their recruitment? Not just “who”, but also “how”
- Intergovernmental collaboration & cooperation
 - Interprovincial competition will have to be confronted
- Intragovernmental collaboration will be necessary
 - Labour, Immigration, Health all have different interests & understandings of the issue...



IEHPs & Sask's New Agency

- Province is developing an agency that would handle recruitment on behalf of RHAs & others
 - Use of the agency is voluntary...
- If Agency is too directive in limiting recruitment options then it can be side-stepped
- If Agency says nothing about ethical recruitment then it will miss important opportunity & gov't will continue to be criticized



Making All Recruitment Ethical

- The Agency can start by setting out a clear framework of what it means by ethical behaviour in all forms of recruitment
- Can insist that domestic supply be tapped first before int'l recruiting happens
- Can focus efforts on developed world
- Can begin conversation within government to get consistent understandings between immigration, labour & health departments



Tom McIntosh, Renée Torgerson and Nathan Klassen. 2007. ***The Ethical Recruitment of Internationally Educated Health Professionals: Lessons from Abroad and Options for Canada***. Ottawa: Canadian Policy Research Networks.

H E A L T H N E T W O R K





For additional information:

www.cprn.org

e-mail: health@cprn.org

Join our weekly news service:

<http://e-network.ca>

H E A L T H N E T W O R K

