

Profile of immigrants in nursing and health care support occupations

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The COVID-19 pandemic has highlighted a number of issues with the workforce in the health care sector. The number of job vacancies in this sector is thought to have peaked at 100,300 positions at the end of 2020, according to data from the Job Vacancy and Wage Survey.

In Canada, as in most countries around the world with aging populations, immigrant workers are an integral part of the workforce, particularly in the health care sector.

The study "[A Portrait of Immigrants Working in Nursing and Health Care Aide Occupations](#)" uses data from the Census of Population and the Longitudinal Immigration Database to provide a portrait of immigrants in nursing and health care support occupations.

This study examines the extent of immigrants' contribution to nursing and health care support occupations in Canada, and the pathways that lead them to these occupations. A better understanding of the prevalence of this phenomenon and the dynamics that lead immigrants to these occupations is necessary to the renewal of skilled workers in Canada's health care sector.

This information is also important in the current context of the COVID-19 pandemic as it allows us to assess the extent to which certain immigrants are exposed to COVID-19-related risks in their work, particularly by providing information on ethnocultural groups in front-line jobs, such as nurse aides, orderlies and patient service associates.

Immigrants who arrived in Canada as adults are overrepresented in nursing and health care support occupations

Immigrants who arrived in Canada as adults (aged 18 or older) are overrepresented in the nursing and health care aide occupations. In 2015/2016, they made up 22% of workers in these occupations, compared with 16% of the employed population.

The overrepresentation of adult immigrants was particularly high among the specific occupations of nurse aide, orderly and patient service associate, with adult immigrants representing almost a third (30%) of workers in these occupations. By comparison, they represented a smaller proportion of workers in the occupations of licensed practical nurse (21%), registered nurse and registered psychiatric nurse (16%), and nursing coordinator and supervisor (11%).

Immigrants born in the Caribbean and Bermuda, sub-Saharan Africa and the Philippines most likely to work in nursing and health care support occupations

In total, 5% of all adult immigrants employed in Canada in 2015/2016 worked in nursing and health care support occupations, compared with 3% among the rest of the workforce.

The proportion of immigrants who worked in these occupations varied significantly by region of birth. It was particularly high among immigrants born in the Caribbean and Bermuda (13%), West Africa (12%), Central Africa (12%), East Africa (8%), and Southeast Asia (10%).

In terms of specific countries of birth, Haitian-born immigrants (25%) were the most likely to work in nursing and health care support occupations. The proportion (13%) and number (44,380) of Filipino immigrants working in nursing and health care support occupations were also high. They alone represented close to one-third (30%) of adult immigrants in these occupations in 2015/2016.



Few immigrants working as licensed practical nurses or as nurse aides, orderlies or patient services associates intended to work in any of these occupations at the time of admission

Not all immigrants who work in nursing and health care support occupations came to Canada with the intention of working in the field. In fact, many immigrants make a transition to these occupations and embark on studies in these fields after they arrive in Canada.

For example, of the economic immigrant principal applicants who were employed as nurse aides, orderlies and patient service associates in 2015/2016, 2% had planned to work in one of these occupations upon admission to Canada. This proportion was slightly higher among those working as licensed practical nurses (11%), but was nevertheless weak. The highest proportion of economic immigrant principal applicants who were working in their intended occupation after arriving in Canada was among professional occupations in nursing (50%).

In addition, a considerable proportion of immigrants in nursing and health care support occupations were not economic immigrants, but family-sponsored immigrants or refugees. Economic immigrant principal applicants were slightly more likely to be employed in nursing or health care support occupations (5.1%) than refugees (4.6%) and family-sponsored immigrants (4.4%).

The same trends were observed for each occupation in the nursing and health care support occupations group. The proportion of immigrants from all immigration categories who entered these occupations was relatively similar.

However, these patterns may have changed somewhat because of recent developments in immigration policies; for example, refugee claimants can now apply for permanent residency if they provided direct patient care during the COVID-19 pandemic.

Nonetheless, overall, previous findings suggest that immigrants of all backgrounds can contribute to filling shortages in the nursing and health care support occupations, not just those who intended to work in this sector at the time of landing.

Immigrants who earned a nursing degree abroad are more likely to be overqualified than those who graduated in Canada

Many studies have shown that immigrants who earned their postsecondary degree or diploma in Canada were less likely to be overqualified for their job, and the same is true for access to nursing occupations.

The proportion of adult immigrants who earned their highest postsecondary degree in Canada varied by region of origin. Among immigrants working in nursing and health care support occupations, the majority of those from the Caribbean and Bermuda (75%) and sub-Saharan Africa (60%) had earned their highest postsecondary degree or diploma in Canada. In contrast, a minority of immigrants born in the Philippines (25%) and South Asia (32%) had graduated in Canada.

Overall, the study found that immigrants who graduated from a nursing program abroad were significantly less likely to enter occupations matching their educational background than those who graduated from programs in Canada. For example, 37% of immigrants who completed a bachelor's degree or higher in a professional nursing program outside Canada were employed in these occupations in 2015/2016, compared with 78% of those who completed the same education in Canada.

Immigrants who graduated from a nursing program abroad were also more likely than those who had graduated in Canada to be overqualified, that is, to hold a job requiring a lower level of education, even after controlling for age and province of residence.

For example, among immigrants who completed a bachelor's degree or higher in a professional nursing program outside Canada, 58% were employed in a job requiring a lower level of education. This proportion was almost four times higher than that of their counterparts who completed the same education in Canada (15% overqualification rate).

Although less likely to be overqualified, some immigrants who completed their education in Canada may have had to do these studies to find a job matching their qualifications, particularly if they were unable to find a job that matched their foreign training.

Note to readers

The data used were taken from the 1996, 2006 and 2016 censuses and the Longitudinal Immigration Database (IMDB). Information on the intended occupation of immigrants at the time of landing is from the IMDB. To compare intentions upon landing with the job held in 2015/2016, a linkage between IMDB and 2016 Census data was used.

Definitions

Nursing and health care aide occupations

When we refer to "nursing and health care support occupations," we are referring to the following occupational groups in the National Occupational Classification (NOC):

1. professional nursing staff, including nursing coordinators and supervisors (NOC code 3011) and registered nurses and registered psychiatric nurses (code 3012);
2. licensed practical nurses (code 3233);
3. nurse aides, orderlies and patient service associates (code 3413).

A person's occupation corresponds to the main job held during the census reference week (in May 2016) or, if they did not work during that week, the longest held job since January 1, 2015. For data from the 1996 and 2006 censuses, the reference periods are similar (e.g., for the 1996 Census, the census reference week was in May 1996 and the period for the longest held job was since January 1, 1995).

The term "adult immigrants" refers to people who were aged 18 or older when they were admitted to Canada as permanent residents.

Intended occupation

As part of the process for becoming a permanent resident, principal applicants under the economic immigrant categories are required to report their intended occupation in Canada. To indicate an intended occupation, applicants must demonstrate that they have the educational requirements and at least one year of experience in the field. This information is available for immigrants who have been admitted to Canada since 1980. There is no reliable information on the intended occupation of immigrants in other admission categories (secondary applicants under the economic immigrant categories, sponsored by family and refugees).

Overqualification of graduates of nursing program

Graduates of some nursing and health care support programs are considered overqualified when they work in an occupation that requires a level of education lower than what they have. This information was summarized using an "overqualification rate," which corresponds to the proportion of graduates who hold a job requiring a lower level of education. Rates were adjusted for age and province of residence.

Definitions, data sources and methods: survey numbers 3901 and 5057.

The article entitled "A Portrait of Immigrants Working in Nursing and Health Care Aide Occupations" is now available in *Insights on Canadian Society* (75-006-X).

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