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EFFECTIVENESS,  
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## Canadian Nurse Migration to the United States of America

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### *Recruitment Strategies*

Canadian nurses are recruited directly by hospitals in the United States and indirectly through international recruitment firms. Employers advertise in newspapers, on hospital and other web sites, and at career fairs. They may offer incentives such as signing bonuses, relocation allotments, scholarships for continuing education, or paid travel expenses.

### *Legal and Regulatory Frameworks*

To be licensed in the United States a nurse must be screened by the Commission on Graduates of Foreign Nursing Schools (CGFNS), and then pass the National Council Licensure Examination (NCLEX-RN or CLEX-PN). The CGFNS reviews the nurse's education, licensure in the home country, English language proficiency, and results of the CGFNS Qualifying Exam which provides an indicator of the nurse's ability to pass the NCLEX (Buchan, J., Parkin, T., & Sochalski, J., 2003). Exemption from the NCLEX is extended to Canadian nurses by the state boards of nursing of Florida, Kentucky, Main, Missouri, South Carolina, Tennessee, Wisconsin and the Mariana Islands (CGFNS, 2001).

### *General Statistics*

It is difficult to estimate the number of Canadian nurses migrating to the U.S. as statistical information is not available. However, there are some historical data:

- < During the 1990's approximately 27,000 nurses migrated to the U.S. (Industry Canada, 1999), representing 15 Canadian nurses for every U.S. nurse migrating to Canada (Zaho, et al., 2000).
- < Nearly one in ten nursing graduates migrated to the U.S. between 1995 and 1997 (Canadian Council on Social Development [CCSD], 1998).
- < In 1996/97 the total outflow of nurses to the U.S. was equivalent to about a quarter of the 3,000 new Canadian graduates (Zaho, Drew & Murray, 2000).

### *Factors Contributing to the Migration of Canadian Nurses to the United States*

In the 1990s, restructuring and downsizing of hospital staff displaced many junior nurses from full-time positions (Baumann, & Blythe, 2003). The lack of job opportunities in Canada was an important push factor. A significant pull factor was the North American Free Trade Agreement (NAFTA) introduced in 1992. This Agreement gave skilled workers, such as nurses, easier access to temporary work visas, the most popular means of entry into the U.S. (Williamson, 2000).

An RNAO report (2001) cited the following as reasons for nurse migration to the US:

- Lack of job opportunities or downsizing (62.7%)
- Cost of living (3.8%)
- Felt that their work was not valued by the system (3.0%)
- Family or personal issues (28%)
- Workload or work conditions (7.6%)
- Pay and benefits (13.2%)
- Travel or weather (8.8%)

### *Retention Suggestions for Canada*

An RNAO report (2001) found that 78.3% of survey respondents working outside Canada would consider returning to Ontario. The availability of full time work and relocation expenses would be key factors in their decision making (RNAO, 2001).

In *The Health of Canadians-The Federal Role*, Kirby & LeBreton (2001) recommended that to increase retention employers should:

- Create more permanent full time jobs and offer full time work to new graduates.
- Encourage nurses to work to their full scope of practice, while delegating non-nursing tasks to other workers.
- Provide system supports to allow nurses to continue their education.
- Provide creative and flexible scheduling, safe working environments, and accessible child care.
- Ensure that basic nursing equipment such as wheelchairs, patient lifts and computers are readily available.

Creating a healthy workplace requires collaboration among governments, professional associations and councils, employers, educators and researchers (Baumann et al., 2001).

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