

Perceived Benefits of Bridging Program Participation

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Internationally educated nurses in Canada: perceived benefits of bridging programme participation

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Aim: To examine internationally educated nurses' perceptions of the extent to which participating in bridging programmes is beneficial for preparing to practise nursing in Canada.

Background: Internationally educated nurses continue to migrate from low-income to high-income countries. Many experience challenges when attempting to practise their profession in the destination country. Canada and other top destination countries offer educational support, such as bridging programmes, to assist internationally educated nurses' with preparing to practise nursing in the destination country. The research evidence falls short in demonstrating the usefulness of bridging programmes.

Methods: A subsample of 360 internationally educated nurse participants from a Canadian cross-sectional survey conducted in 2014. All were permanent residents, employed as regulated nurses and participants of bridging programmes. Multiple linear regression was employed to examine the influence of internationally educated nurses' human capital (academic preparation, language proficiency, professional experience) and the economic status of their source country on perceived benefits of bridging programme participation.

Results: Regression model explained 11.5% of variance in perceived benefits of bridging programme participation. Two predictors were statistically significant: source country and professional experience.

Conclusion: Bridging programmes help internationally educated nurses address gaps in their cultural, practical and theoretical knowledge. Source country and amount of professional experience influences the extent to which internationally educated nurses benefit from participating in bridging programmes in Canada.

Implications for nursing policy: Provides emerging evidence for decision-makers globally when developing policies and supports to help internationally educated nurses integrate into the destination country's nursing workforce.

IENs in Canada

- For sometime Canada has been one of the top destination countries for IENs.
- The Philippines, India and the UK have long been the primary source countries.
- In recent years, Korea, China and many African countries are contributing larger numbers of nurses to the Canadian nursing workforce (Covell et al., 2017).

Literature about IENs in Canada

- Many IENs enter the nursing workforce quickly, others encounter obstacles due to inadequate education or professional experience, insufficient language proficiency, failure of the regulatory examination, or difficulty securing employment (Covell et al., 2017).
- Source country of IENs' education and previous nursing practice are suggested as major contextual factor that influences IENs integration experiences (Shen et al., 2014).
- Bridging programs are offered to help IENs gain the competencies needed to practice nursing in the host country and enter the nursing workforce (Xu & He, 2012).

Literature about IENs in Canada

- Literature offers various recommendations for bridging program best practices including curricula that provides:
 - Orientation to the healthcare system
 - Language assessment and instruction
 - Content and theory to address theory and practice gaps specific to the practice environment (CASN, 2012).
- Literature that examines *effectiveness* of bridging programs is lacking (Covell et al., 2016).

Research Questions

Do bridging programs help IENs prepare to practice nursing in Canada?

How do bridging programs prepare IENs to practice nursing in Canada?

Do some IENs benefit more than others?

What factors influence the extent to which IENs will benefit from bridging programs?

Study Aims

1. Examine IENs' perceptions of the extent to which participating in bridging programs is beneficial for preparing them to practice nursing in Canada.
2. Explore whether IENs' perceptions differ by IENs' source country of IENs' education.
3. Identify key human capital characteristics that predict the extent to which IENs benefit from participating in bridging programs.

Methods

- Subsample of 360 IENs from the cross-sectional survey conducted in 2014 (St-Pierre et al., 2015).
- All immigrated from 2002 to 2014, were permanent residents, employed as regulated nurses, and participants of bridging programs
- Variables used from the survey include:
 - Demographic variables of: age, gender, visible minority status, year became permanent resident, initial immigration status, regulated profession and jurisdiction of employment
 - Independent variables: source country (country of basic nursing education) and human capital characteristics (Covell, 2008) of academic preparation, language proficiency and professional experience
 - Dependent variable: Perceived Benefits of Bridging Program Participation

B²P² Scale ($\alpha=0.91$)

1. Develop the competencies needed to practice nursing in Canada
2. Understand the roles and responsibilities of nurses in Canada
3. Develop the skills needed to communicate with co-workers and other healthcare professionals
4. Acquire clinical nursing experience in Canada
5. Learn about the Canadian healthcare system
6. Obtain mentorship
7. Perfect their language skills (English &/French)
8. Learn the professional vocabulary used at work
9. Prepare for regulatory examination
10. Understand the conditions of employment

Analysis

- Data was analyzed using SPSS 24
- Descriptive statistics were computed to describe:
 - Participants' demographic and human capital characteristics
 - Perceptions of bridging programs benefits (B²P² scale)
 - Compare the participants' responses to the B²P² scale by income of source country
- Linear multiple regression was applied to examine influence of human capital characteristics and source country on perceived benefits of bridging program participation.

Sample Demographics (N=360)

Variable	N	Mean (SD), n (%)
Age, in years	351	40.12 (8.18)
Female	360	273 (75.8)
Visible Minority	353	261 (72.5)
Registered Nurse	360	302 (84.8)
Licensed-Practical Nurse		58 (25.6)
Jurisdiction of Employment	360	
British Columbia		23 (5.9)
Alberta		80 (20.5)
Saskatchewan		23 (5.9)
Manitoba		54 (13.8)
Ontario		49 (12.5)
Quebec		147 (37.5)
Nova Scotia		12 (3.1)
Newfoundland and Labrador		1 (>1)
Year Became Permanent Resident	360	2008 (2.62)
Initial Immigration Status, Permanent	357	308 (85.5)

Independent Variables

Variable	N	Mean (SD) or n (%)
Source country of education	359	
High-income country		68 (18.9)
France		25 (36.8)
Romania		16 (23.5)
United Kingdom		7 (10.3)
Israel		8 (11.8)
Other high-income countries		12 (17.6)
Low-income country		291 (81.1)
The Philippines		121 (33.6)
Haiti		20 (5.5)
India		22 (6.1)
Algeria		17 (4.3)
Ivy Coast		13 (3.6)
Columbia		9 (2.5)
China		9 (2.5)
Other low-income countries		80 (27.5)

Human Capital Characteristics

Variable	N	Mean (SD) or n (%)
Academic Preparation	357	
Diploma		112 (31.1)
BSN		215 (59.7)
Graduate		30 (8.3)
Professional Experience (years)	359	8.69 (6.96)
Language Proficiency	359	4.38 (1.59)

Perceived Benefits of Bridging Programs

Item	Sample (n=360) M (SD)
Develop the competencies needed to practice nursing in Canada	3.73 (1.01)
Understand the roles and responsibilities of nurses in Canada	4.06 (0.878)
Develop the skills needed to communicate with co-workers and other healthcare professionals	3.58 (1.50)
Acquire clinical nursing experience in Canada	3.61 (1.16)
Learn about the Canadian healthcare system	4.09 (0.88)
Obtain mentorship	3.41 (1.20)
Perfect their language skills (English &/French)	3.17 (1.22)
Learn the professional vocabulary used at work	3.49 (1.14)
Prepare for regulatory examination	3.57 (1.22)
Understand the conditions of employment	3.16 (1.22)
Total Score	35.86 (8.39)

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Total Score	35.86 (8.39)

Perceived Benefits of Bridging Programs by Source Country (* p=.05, **p=.01, ***p=.001)

Item	Low income M (SD) (n= 277)	High income M (SD) (n =68)
Develop the competencies needed to practice nursing in Canada	3.87 (0.93)***	3.21 (1.15)
Understand the roles and responsibilities of nurses in Canada	4.16 (0.817)***	3.76 (0.98)
Develop the skills needed to communicate with co-workers and other healthcare professionals	3.71 (0.92)***	3.04 (1.21)
Acquire clinical nursing experience in Canada	3.74 (1.10)***	3.06 (1.23)

Perceived Benefits of Bridging Programs by Source Country (* p=.05, **p=.01, ***p=.001)

Item	Low income M (SD) (n = 277)	High income M (SD) (n = 68)
Obtain mentorship	3.53 (1.17) **	3.07 (1.29)
Perfect their language skills (English &/French)	3.32 (1.18)***	2.42 (1.42)
Learn the professional vocabulary used at work	3.57 (1.06)*	3.16 (1.41)
Prepare for regulatory examination	3.77 (1.09)***	2.87 (1.47)
Understand the conditions of employment	3.27 (1.18)*	2.84 (1.29)
Total Score	37.12 (7.29)***	31.18 (9.22)

Predictors of Perceived Benefits of Bridging Program Participation

- Predictors of:
 - Source country (high income or low income)
 - Language proficiency (1 = none-5 very highly proficient)
 - Professional experience: years (total years)
 - Academic preparation (diploma, Baccalaureate, Graduate)
- Dependent variable: Total B2P2 Score (5-50)

Predictors of Perceived Benefits of Bridging Program Participation

- Model including source country, language proficiency, professional experience and academic preparation was statistically significant accounting for 11.5% of the variance.
- Source country and years of professional experience were statistically significant predictors.
- Language proficiency and academic preparation did not significantly predict perceived benefits of bridging program participation.

Discussion

- IENs perceived their participation in bridging programs helped them address gaps in their cultural, practical and theoretical knowledge and prepare them to practice nursing in Canada.
- Bridging program participation permitted IENs to develop occupational-specific vocabulary and become familiar with the nursing profession and health care system.
- This is consistent with other research that found IENs lacked cultural competency or lack of knowledge about how nursing is practiced in the destination countries (Neiterman & Bourgeault, 2013).
- Lack of cultural competency has been linked to: difficulties on licensing exam(Neiterman & Bourgeault, 2013), navigating the job search (Covell et al, 2015) and hiring process, working within interdisciplinary healthcare teams (Sherwood & Shaffer 2014) and providing safe, high quality care (Ohr et al. 2014).

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Discussion

- IENs who received their education from low-income countries found their participation more instrumental for gaining elements of cultural competency, specifically learning about the nursing profession and upgrading their professional competencies, improving their language proficiency and preparing for the regulatory examination, than IENs from high-income countries.
- Findings by source countries highlights the heterogeneity of the IEN population (they are not all the same!), meaning a one size fit all model may not fit all.
- Tailoring support and educational programming to address IENs' unique learning needs which may be greater for IENs from some countries than others.

Discussion

- Amount of professional experience IENs had prior to migrating influenced extent to which they benefited from bridging programs.
 - IENs with less experience rated higher than IENs with greater number of years of experience.
 - Literature about the acquisition of clinical competency support this finding in that IENs as nurses need several years of professional experience to become proficient clinicians (Benner et al., 2009).

Policy Implications

- Study provides emerging evidence to support bridging programs.
 - Additional research is required to determine their effectiveness.
- Bridging programs could include clinical practicums
 - Work experience ensures employers IENs are prepared to work in local environments (Squires 2017)
 - Can lead to positive employment outcomes (Sweetman & Warman, 2014)

Strengths and Limitations

- Strength
 - Study had a large scope
 - Newly developed scale to measure key elements of bridging programs known to facilitate IENs' success.
- Limitation
 - Possible sample selection bias

A few papers about IENs in Canada

Leadership & Administration

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Internationally Educated Nurses in Canada: Perceived Benefits of Bridging Program Participation
Author(s): Covell, CL, Primeau, M.D., St-Pierre, I
Publication Date: 2018-02-14
Journal: International Nursing Review
Volume: Early View
Issue: Online
Publication Link: <http://onlinelibrary.wiley.com/doi/10.1111/inr.12430/full>

Internationally Educated Nurses in Canada: Predictors of Workforce Integration
Author(s): Covell, CL., Primeau, MD., Kilpatrick, K., St-Pierre, I.
Publication Date: 2017-04-04
Journal: Human Resources for Health
Volume: 15
Issue: 26
Description: *Most highly accessed publication for 2017
Publication Link: <https://human-resources-health.biomedcentral.com/articles/10.1186/s12960-017-0201-8>

A Scoping Review of the Literature about the Professional Integration of Internationally Educated Health Professionals
Author(s): Covell, CL, Neiterman, E., Bourgeault, IL

Links

ResearchGate

Search for Dr. Covell's publications using Google Scholar

Canadian Health Workforce Conference 2016

Canadian Health Human Resource Network (CHHRN)

Ontario Health Human Resource Research Network (OOHHRN)

Pathways to Prosperity (P2P)

<https://www.ualberta.ca/nursing/about/contact-us-and-people/academic-listing/christine-covell>

Questions?



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