



# mythbusters

USING EVIDENCE TO DEBUNK COMMON  
MISCONCEPTIONS IN CANADIAN HEALTHCARE

MYTH BUSTED MAY 2013

## MYTH: INTERNATIONAL MEDICAL GRADUATES ARE THE SOLUTION TO THE DOCTOR SHORTAGE IN UNDERSERVED AREAS

If you are one of the many Canadians without a family doctor, you know how challenging a problem this can be. For Canadians in rural and remote areas, this problem is especially serious<sup>1,2</sup>. Most rural and remote communities face a shortage of health workers, especially doctors. Although rural Canadians constitute 22% of the population, fewer than 10% of physicians and 2% of specialists work in these areas.<sup>3</sup> While Canada as a whole averages one doctor per approximately 450 residents, this ratio can be as low as one in 3,000 in some remote areas.<sup>1</sup> Adding to this problem, residents of rural and remote communities often have greater healthcare needs than urban residents, experiencing higher rates of chronic disease, traumatic accidents, and poorer mental health than their urban counterparts.<sup>4</sup>

To address the shortfall of doctors in rural and remote areas, some provinces, territories, and local health authorities recruit international medical graduates, physicians who were educated abroad. Often, international medical graduates are given temporary placements in underserved communities while they await full professional registration and complete immigration paperwork.<sup>5</sup> Unfortunately, international medical graduates have not been the solution they were hoped to be, with many leaving the remote communities upon receiving their full licenses. This results in high levels of physician turnover and continued problems for underserved communities.

### REMOTE RECRUITING

International medical graduates make up a sizeable proportion of physicians in Canada. Across the country, around 25% of practicing doctors received their medical education in other countries.<sup>6</sup> Currently, there are two main ways of recruiting international medical graduates to rural and remote communities: through provisional licenses or Return of Service agreements. In both cases, international medical graduates agree to work in an underserved area for a number of years before receiving full licenses to practice medicine in Canada.<sup>7,8</sup>

### REGRETTABLE RETENTION RATES

Unfortunately, recruiting international medical graduates is, at best, a temporary and partial fix for doctor shortages in rural and remote areas.<sup>5</sup> While the hope was that mandatory rural service would lead physicians to integrate into local communities and establish long-term practices, this is not always the case. After international medical graduates receive their full licenses or complete return of service agreements they are free to practice anywhere in Canada, and many move to urban centres once they are able to do so.<sup>7</sup> As a result, many rural and remote communities experience rapid physician turnover.

In other instances, some physicians recruited through provisional licenses stop practicing medicine in Canada. One study of provisionally licensed international medical graduates in Newfoundland found that less than 40% of those licensed between 2002 and 2006 could still be found on the Canadian Medical Directory.<sup>5</sup> Other studies suggest that after five years, fewer than 20% of physicians who had been provisionally licensed remain in the province.<sup>9,10</sup> Of the international medical graduates who moved elsewhere in Canada, 76.7% went to work in urban communities (10 000 or more population).<sup>11</sup>

### OVERCOMING THE RURAL CHALLENGE

Several barriers contribute to the difficulty rural and remote areas have in retaining physicians, including a heavy workload, professional isolation, and limited career options.<sup>9</sup> Personal considerations are also important obstacles, including fewer educational opportunities for children, and limited cultural and religious resources.<sup>9,12</sup> Employment and social opportunities available for spouses may also be inadequate, further hindering long-term retention in remote areas.<sup>12</sup>

While all of these barriers play a role in poor retention rates, there are ways in which retention can be improved. Research suggests that receiving medical training in rural areas can play a significant role in a physician's decision to practice in a rural area.<sup>13</sup> By exposing students from urban areas to rural life and learning experiences, an interest in rural practice may develop.<sup>13</sup>

Additionally, encouraging individuals who are already from rural areas to apply to medical school (currently only about 11% of medical students are from rural and remote areas<sup>14</sup>) could significantly improve retention rates. A 2005 study indicates that practicing rural physicians are 2.4 times more likely to be from a rural community than their urban counterparts.<sup>13</sup> This suggests that rather than recruiting from overseas, the solution to the rural health worker shortage may be much closer to home than we thought. By promoting student outreach and financial support for rural students, rural recruitment and retention could be vastly improved.<sup>15</sup>

## CONCLUSION

The high turnover rates and costs of recruiting a physician from overseas have kept reliance on international medical graduates from becoming a sustainable solution to the rural shortage of health professionals in Canada. Canada suffers from an unequal distribution of physicians rather than from an absolute shortage,<sup>16</sup> and recruiting physicians into rural areas can actually worsen this problem. Since few recruited international medical graduates stay in rural communities once they are fully licensed, the unequal distribution gets worse. Thus, the biggest obstacle to maintaining sufficient health staff in remote areas is not recruitment, but rather retention. Evidence suggests that the most reliable way to attract and retain rural physicians is to recruit rural applicants into medical schools and to provide extended exposure to the special challenges of rural practice during training.<sup>17</sup> Increased support of rural physicians may serve to retain physicians and decrease rural dependence on international medical graduates and simultaneously reduce the health worker shortage in remote areas.

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