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CENTRE FOR HEALTH CARE
RESEARCH & INNOVATION

IEN-Co: Supporting the health and wellbeing of internationally educated nurses as they transition to practice in Canada: Developing a team and co-designing future work

Our research team for this work includes:

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Note: This summary report shares preliminary results at a high level, specifically for the research participants.

Suggested Citation: Please cite this work with the following information.

Sheiban Taucar, L., Tong, C. E., Babatunde, C., Neiterman, E. & Elliott, J. (2026). IEN-Co: Supporting the health and wellbeing of internationally educated nurses as they transition to practice in Canada: Developing a team and co-designing future work. Kitchener, Ontario: Centre for Health Care Research & Innovation, Conestoga College.



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Background



Why We Did This Work

Internationally educated nurses (IENs) are a growing and important part of health care teams across the country. They also play a vital role in addressing our national health human resource (HHR) crisis. IENs at work, however, may experience stress, feelings of isolation and confusion, and discrimination at the hands of their patients, peers, and employers. This project brought together a team of researchers and IENs to co-design a research study that seeks to understand and actively support IENs' health and well-being as they transition to practice in Canada.

What We Did

We used a community-focused co-design design approach, meaning that we did a series of co-design events to work alongside IENs and the professionals (e.g. faculty, health care administrators, researchers) supporting them. We completed 13 in-depth discovery interviews with administrators and IENs from several provinces, and a final co-design session with 25 IENs, administrators and faculty.

What we heard: Discovery Phase Interviews

Should future research focus on the health and well-being of IENs, and why?

Participants described health and well-being as more than just the absence of disease; but a state of complete well-being and balance, physically, mentally, socially, emotionally, and spiritually, as well as having supports, which enable them to take care of themselves and operate and deliver their jobs effectively. Additionally, extra emphasis was placed on mental health and its importance for nurses.

"I think if I define health, it is a state of complete physical, mental, emotional, social, I will even add spiritual wellbeing of a person, not just the absence of being sick or ill so I'm looking at it as a state of balance, being able to coordinate yourself to do things right to carry out your task effectively....and for nurses we need this. We need to care for ourselves. We need to be mentally and emotionally stable so that we can deliver our job effectively."

- IENCo_04

Participants also stated that it is essential to study the health and well-being of IENs because they undergo significant changes when moving from one country to another, experiencing stress from leaving their family, moving with dependents, and struggles with transition and integration. Participants noted that this is a necessary topic to research and one that has been previously neglected.

"I think it's great to look at that piece of it.... I think we look more towards their qualifications and their experiences. But maybe perhaps if we're talking about

health and well-being, ..., just that transition from one country to another could be quite a bit of a shock that we overlook considering I guess how intensive the programs and their transition can be an obstacle. So I think it's really important that we do look at that angle. ..."

- IENCo_06

What other research topics should be included in a future study on the well-being or IENs?

A point of intervention that was mentioned was for the focus to not only be on IENs but also on the cultures and systems in which they are placed. For example, racism and discrimination in the workplace were occurrences brought up by participants.

Hospital staff noted that understanding where IENs come from and their initial skills would enable them to better assist and tailor support for them, while addressing the knowledge gaps.

A focus on integration into the system, rather than just the transition process to a new workplace, was also highlighted.

"... How they're prepared is really important to us because we know that they're all unique... because that really impacts how we support. ... So if we have some people, they don't even necessarily need to be internationally educated nurses, but if we have some new hires that have gaps in their education, it takes us a long time to identify them and address them. So if we were to know how IENs are prepared, depending on where they're coming from, that would be very helpful for us."

- IENCo_01

"So there is discrimination. It it comes in, I'm not saying you know somebody is like yelling at you in a bad words or something like that. I kind of see, what it is is passive aggression. ... Or let's say if you are working with, you know, five staff and you are the one and the others, the others are all sitting and talking and not including you or talking to you, so you just kind of OK the it kind of [feels] isolated there. That I have seen a lot."

- IENCo_07

"I think you've been very respectful and nice to me. I think that's what matters. I I think just like respecting their time and you're giving incentive to just respect for their time anyway. So it's I think it's perfect right now as it is. And just like I think you should probably ask them like about more about like what they want to change. So they will bring up their experience and what they want to change that will bring the change in the whole system ..."

- IENCo_03

How should we design a future study with IENs? Participant insights on research methods:

Recruitment- finding willing participants

Participants mentioned that the very nature of the topic being researched is enough to make future participants feel valued; additionally, the fact that the research team thanks them for their time and expertise is also a great way to show participants that they are valued and supported.

In terms of communication, some participants mentioned email as an effective method for maintaining privacy and enhancing participant engagement; however, others suggested reaching out through phone text messages, as people may be more responsive to messages than emails.

Reasons mentioned for why IENs may be reluctant to participate include the perception that they are being asked to conduct a research study rather than complete an interview. Another reason mentioned is that participants may not have seen any change in the past and may be hesitant about participating as a result.

"... I think the best for privacy reasons would be email, but not Conestoga email because with time, when they are no longer students, they lose that email, so their personal email. Request for their personal email so that you can keep track. So with that, for years, even when they are practicing, you can still call on them and they will respond..."

- IENCo_04

Data Collection- timeframes, data types, etc.

Many participants suggest reaching out to IENs in their first few years of entry into Canada, as they require support at that time and would be willing to share their experiences as they navigate a new culture and adapt to a new environment.

Participants also suggested one-on-one interviews as an effective method because people may feel more comfortable sharing their personal experiences with just one interviewer rather than a group of people. A survey was another option mentioned by participants as an easy method of collecting data from a large number of people.

"I would say probably the first year, but that's my bias because that's what we do. And the research does say that first year is critical for any new nurse, not just IEN's or um anyone else. So I would say the first year, but thinking a little bit more broadly, which is probably not what you want for your research question, but you could have an IEN that comes and lives here for, for years before they jump into health care and try to get licensed so, so I, I guess, being in a hospital, to me, the first year is most important, but there's so much more that happens before they come to us."

- IENCo_01

"I think one-to-one or survey is better. The focus group, the thing is that sometimes people don't want to share in front of other people. It is just like, oh, I don't want this person to judge me or think that I am going through this, I experienced this."

- IENCo_07

Partnerships- organizations to consider

Organizations to partner with, as suggested by participants, include: the College of Nurses of Ontario, the Centre for Internationally Educated Nurses (CARE), hospital managers, HR professionals in health care settings, working nurses, IENs, clinical instructors, directors of care in long-term care, college faculty, and other researchers.

"Well, there's care4nurses that we connect with. ... CNO, I hope."

- IENCo_01

"I think we should probably go like more in depth with the people working in field and just I guess manager or like HR."

- IENCo_03

"So I think for internationally educated nurses there is like groups are there and internationally educated nurses groups, students, ... faculty, nurses [who] work at the hospital, yeah."

- IENCo_07

Honorariums- how to compensate

Gift cards were generally viewed by participants as a good incentive for IENs to participate, as they demonstrate that they are being valued for their time, and they could help with expenses such as groceries. The suggested gift card amount was between \$25 and \$50.

"Yes. And some any kind of incentive would be good. So people [are] like, OK, I'm getting something in return of my time or you know, you feel like value, right? Like, yeah so I think some kind of incentive would be good too."

- IENCo_07

Knowledge Translation- how to share what we learned

A brief summary sent via email was the most common method suggested for sharing findings with study participants.

"I think those who have participated like e-mail updates I think would be very good. Like I mean if I had an e-mail update that said, "Hey, by the way, like, this is a year later, this is what we did," I would certainly want to read it and share it with my team members as well."

IEENCo_06

IEN-Codesign Event

On February 4, 2026, we held a final co-design session to build on our research on optimizing IENs' health and well-being. This event included 25 participants (17 online, 8 in-person), a graphic recorder who created a visual display of discussion topics and insights, and the research team. Participants included IENs, IEN faculty, administrators who support IENs, and IEN researchers.



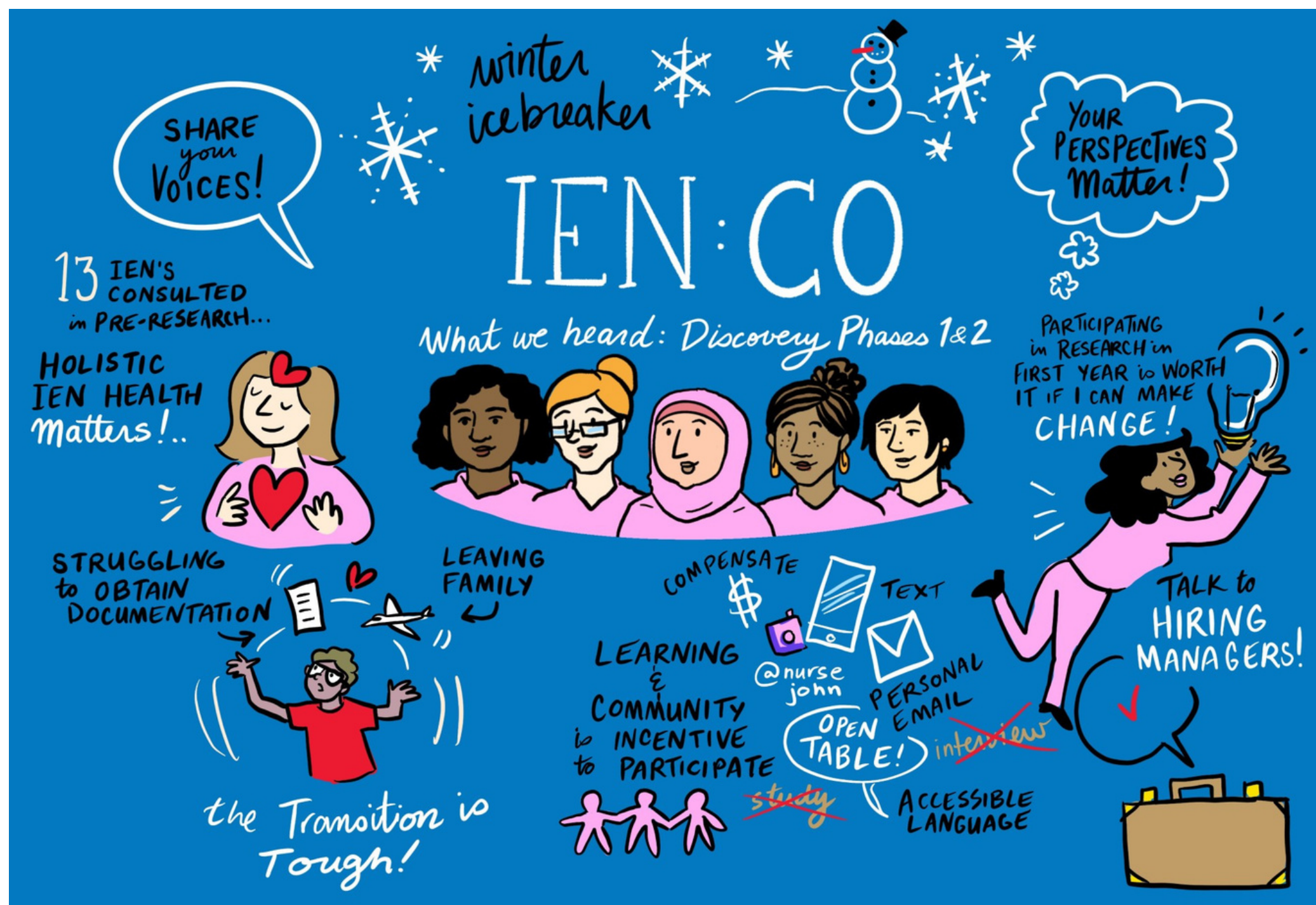
We held this event as the final phase of our co-design process. We aimed to consolidate insights from our interviews, and collaboratively design an effective study on the health and well-being of IENs as they integrate into the Canadian workforce. This event was held in a hybrid format, with participation available both in-person and online. In this event, IENs openly shared their personal experiences and views on how to most effectively conduct research on their health and well-being as they transition into the Canadian workforce. Topics included how to recruit for IENs, the importance of reaching out to IENs in the first year of arrival to Canada, the struggles faced in transition such as housing, environmental (snowy weather), and emotional, and the importance of accessible language to encourage participation in research initiatives.

The final part of the event included co-designing an interview guide to ensure we are asking the right questions. It was noted that difficult questions should not be avoided. Key interview topics that arose included strengths IENs have from their home countries, adaptation to Canadian culture, differences in food, what the first week in Canada was like, lifestyle changes, the challenges that new IENs faced and the supports that they received.

At the end of the event, we also recruited members of an advisory board who would continue to collaborate with us on next steps.

The images on the following pages, created by the graphic recorder, visually portray the discussion of topics and ideas that emerged from this co-design initiative.

IEN-Codesign Event



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This image visualizes the conversations around the two discovery phases. Participants said that words such as “study” or “interview” may deter nurses from participating as it could imply that they have to conduct a study. Instead, words such as “open table” or “dialogue” may encourage more people to be involved. Additionally, topics on the transition journey to Canada and obtaining correct documentation are things participants are open to talking about. In terms of outreach, participants suggested using text messages, personal email addresses, and Instagram (as many use this app for information).

IEN-Codesign Event



This image shows which dimension of wellness IENs perceived as most important to measure in future studies on IEN health and well-being. Emotional was the highest, as the participants felt that it connects all the dimensions together. Occupational and Financial were ranked second highest, with Physical third. Despite the ranks, IENs agreed that all domains are important, even if they were not ranked highly. Some dimensions that they believed should be added included cultural, educational/intellectual, housing and digital.



This image visualizes IEN's ideas on what should be included in an interview guide for future studies. Participants agreed that we should ask questions on: how easy or difficult the transition to Canada was, what challenges they currently face and if they are supported, what resources they use, if any, to support their wellbeing, what they are proud of, and anything they learned that is not currently being implemented in the field.

Next Steps

Our research team has recently completed studies on the professional transitions of IENs, their training and educational needs, and their wishes and hopes for a mentorship program, which one of our faculty partners is now working on developing.

We are committed to understanding and measuring the health and wellbeing of IENs, with the aim to improve it.

Our next steps include:

- presenting our IEN research at the CASN Biennial Canadian Nursing Education Conference in June 2026
- publishing this co-design work in a peer-reviewed journal, and
- using this co-design work to inform our next research grant application, which will focus on the health and wellbeing of IENs, and draw specifically on what we learned and developed together

If you have questions, comments and/or would like to stay involved, please stay in touch. Our email is chcri@conestogac.on.ca

We wish to thank the 13 participants who completed an interview, and the 25 participants who joined our co-design day in February. Your experiences and insights matter, and we appreciate you taking the time to share them with us.

We also wish to thank our insightful and supportive **advisory committee**, including: Angela Burke, Beatrice Ejime, Faith Donayre, Mark Dager, Michelle Heyer and Sharon Tarbotton.



<https://research.conestogac.on.ca/centre-for-health-care-research-and-innovation>

Funding for this research was provided by the Canadian Institutes for Health Research