

# Providing care for recent immigrants

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Immigration has important roles in Canadian population growth, economy, and culture. In 2010, 280 636 immigrants arrived in Canada—the highest number in the past 50 years.<sup>1</sup> Although many recent immigrants are healthier than the Canadian-born population when they arrive,<sup>2</sup> some of them (ie, children, pregnant women, and refugees) require access to health services immediately and routinely. Further, after 10 years in Canada, the healthy immigrant effect declines due to several factors such as timely access to different services, language barriers, culture, and other determinants of health.<sup>3</sup> For better health outcomes among this patient population, there needs to be better access to care and proper communication strategies (ie, the provision of properly trained interpreters).<sup>3</sup>

The Canadian Collaboration for Immigrant and Refugee Health has recently developed clinical preventive care recommendations for newly arriving immigrants and refugees to Canada.<sup>4</sup> The guidelines include screening for infectious diseases, mental health problems, chronic diseases, and other conditions, depending on the person's age, sex, country of origin, and migration history.<sup>4</sup>

Figure 1 shows the 2010 National Physician Survey (NPS) data on the distribution of FPs and GPs who provide care for recent immigrants in different provinces. The provinces with physicians reporting the highest proportions of those caring for recent immigrants are Saskatchewan (76.2%) and Manitoba (76.1%); proportions are lowest in Quebec (40.8%) and Newfoundland (43.7%). Comparing demographic characteristics of FPs and GPs who have recent immigrants as a considerable

part of their patient population with the general population of FPs and GPs reveals that the first group is more likely to be female (43% vs 40% overall) and consists of slightly younger physicians (average age of 47.5 years vs 49.7 years overall).

With the aim of providing comprehensive care and fulfilling our social responsibility to all Canadians, this might be one of the areas requiring more education about ethnic diversity and transcultural medicine, particularly among future physicians.

The NPS is a collaborative project of the College of Family Physicians of Canada, the Canadian Medical Association, and the Royal College of Physicians and Surgeons of Canada. Additional results are available at [www.nationalphysiciansurvey.ca](http://www.nationalphysiciansurvey.ca). If you would like the opportunity to develop and write a future Fast Fact using the NPS results, please contact **Artem Safarov**, National Physician Survey Project Manager, at 800 387-6197, extension 242, or [asafarov@cfpc.ca](mailto:asafarov@cfpc.ca).

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## Competing interests

None declared

## References

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Figure 1. Proportions of FPs and GPs caring for recent immigrants by province

