

# Global Nursing Workforce at a Crossroads: A Canadian Policy Lens on the 2026 International Workforce Forum

**Valerie Grdisa, RN, PhD**  
Chief Executive Officer  
Canadian Nurses Association  
Ottawa, ON

**Kimberly LeBlanc, PhD, RN, NSWOC, WOCC(C), FCAN, FNSWOC, FAAN**  
President  
Canadian Nurses Association  
Ottawa, ON

## Abstract

The 2026 International Workforce Forum highlighted a projected global shortage of 11 million health workers by 2030, more than half of whom are nurses. This paper examines the Forum's findings through a Canadian policy lens, drawing on the Canadian Nurses Association's *Policy Roadmap for 2025 and Beyond* and recent national workforce data. It identifies converging challenges, including workforce shortages, underutilization of nursing scope, barriers to mobility and declining workforce well-being. The analysis positions Canadian policy priorities as both aligned with and responsive to global imperatives, arguing that nursing leadership and strategic investment are essential to system transformation. This article establishes the foundation for focusing on the experience of internationally educated nurses and nurses' mental health and well-being.

## Introduction

Health systems are undergoing profound transformation in response to demographic change, rising complexity of care and the lasting impacts of the COVID-19 pandemic. In Canada, these pressures are compounded by structural inefficiencies in workforce deployment and persistent challenges in access, equity and sustainability. The Canadian Nurses Association (CNA), through its *Policy Roadmap for 2025 and Beyond*, has articulated a comprehensive strategy to address these issues and optimize the nursing workforce as a central driver of system performance (CNA 2025).

Against this backdrop, the 2026 International Workforce Forum (IWFF), convened by the International Council of Nurses and hosted by the Japanese Nursing Association, brought together global nursing leaders to address escalating workforce shortages and system strain (ICN 2026). The forum reinforced the urgency of coordinated action, aligning closely with Canadian priorities while highlighting the scale of the global challenge. The World Health Organization projects a shortfall of 11 million healthcare workers by 2030, more than half of whom will be nurses. This article situates the IWFF findings within the Canadian context, demonstrating that transformational nursing leadership, supported by coordinated policy action, is essential to addressing these challenges and sustaining health systems by advancing global solutions.

### **A Converging Crisis: Global and Canadian Workforce Pressures**

The IWFF identified a multi-faceted global nursing shortage driven by workforce aging, burnout, insufficient compensation and declining interest in the profession. These pressures are clearly evident in Canada, where population growth and increasing patient complexity continue to outpace workforce expansion and workforce optimization. Recent data indicate persistent vacancy rates across nursing roles, particularly in rural and remote regions, and a growing reliance on overtime to sustain service delivery.

At the same time, indicators of workforce instability are deeply concerning. Less than half of Canadian nurses report no intention to leave their current position within the next year, reflecting widespread dissatisfaction and burnout. These trends align with the IWFF's warning of a self-reinforcing cycle in which workforce shortages exacerbate working conditions, further accelerating attrition. Without intervention, this cycle threatens both patient safety and the sustainability of health systems.

### **Workforce Optimization and Shortages**

A central issue in Canada is the persistent underutilization of the nursing workforce. Despite being the largest group of regulated health professionals, many nurses are not working to their full legislated scope of practice due to outdated models of care and systemic constraints (CNA 2025). This inefficiency occurs alongside ongoing workforce shortages driven by population growth, increasing care complexity and an aging workforce.

Recent Canadian data indicate that demand for nursing care continues to outpace supply, with elevated vacancy rates and increasing reliance on overtime to maintain service delivery (CIHI 2025; Masoud et al. 2025). Workforce instability is further reflected in high levels of intention to leave the profession, driven by workload pressures and dissatisfaction (CFNU 2025).

These national challenges closely mirror those identified at the IWFF, where participants emphasized a global shortage driven by retirements, burnout, inadequate compensation and declining interest in nursing careers (ICN 2026). The convergence of these trends highlights the urgency of shifting from reactive workforce strategies toward long-term investment and system redesign.

### **Safe Staffing, Workload and Retention**

In Canada, unsafe staffing levels and excessive workloads remain among the most significant factors affecting retention. Evidence from national surveys indicates that many nurses work beyond scheduled hours, often due to a sense of professional obligation, while reporting high levels of stress and deteriorating work-life balance (CFNU 2025). These conditions contribute directly to burnout, job dissatisfaction and attrition.

The implementation of enforceable nurse-patient ratios has emerged as a leading policy priority, with strong evidence linking safe staffing to improved retention and patient outcomes (McTavish and Blain 2024). National coordination efforts, including the establishment of a council to advance ratio implementation, reflect growing recognition that systemic approaches are required.

The IWFF reinforced these findings by highlighting the critical importance of safe staffing and appropriate skill mix in ensuring both patient safety and workforce sustainability (ICN 2026). The forum also emphasized the health risks associated with shift work, particularly night shifts, underscoring the need for improved working conditions and supportive policies. Together, these perspectives affirm that retention is fundamentally a function of work environment and system design.

### **Mobility, Regulation and Workforce Data**

Canada's decentralized health system presents ongoing challenges for workforce mobility and planning. Variability in provincial and territorial regulation limits the ability of nurses to move efficiently across jurisdictions, restricting responsiveness to regional needs. The CNA has identified the development of a pan-Canadian licensure framework as a critical policy priority to enhance labour mobility and system efficiency (CNA 2025).

Efforts to strengthen workforce data systems have also been advanced through federal investments and intergovernmental agreements, although gaps remain in standardization and forecasting capacity (CNA and CFNU 2026). Improved data infrastructure is essential to support evidence-based workforce planning and to anticipate future supply-demand imbalances.

These priorities align with IWFF discussions emphasizing the need for coordinated workforce strategies and improved data to inform policy decisions (ICN 2026). The global perspective reinforces the importance of national leadership in addressing structural fragmentation and ensuring effective workforce deployment.

### **Internationally Educated Nurses and Ethical Recruitment**

Internationally educated nurses (IENs) are an important component of Canada's workforce strategy, yet significant barriers limit their full integration. Despite active recruitment, fewer than half of immigrants with nursing qualifications are employed in nursing roles, reflecting challenges in credential recognition and workplace integration (Masoud et al. 2025). Experiences of discrimination further exacerbate these challenges and raise important equity considerations.

The CNA has called for harmonization of nursing regulation, including streamlined licensure processes, standardized integration pathways and accountability for retention outcomes (CNA 2025). These efforts are essential to maximizing the contribution of IENs while ensuring fairness and inclusion.

The IWFF placed strong emphasis on the ethical dimensions of international recruitment, raising concerns about the impact of aggressive recruitment practices on lower-income countries (ICN 2026). This global perspective reinforces the need for Canada to balance domestic workforce needs with international responsibilities, aligning recruitment practices with the World Health Organization Global Code.

### **Primary Healthcare and Scope of Practice**

Expanding access to primary healthcare remains a critical priority in Canada, particularly in the context of growing demand and gaps in service availability. Nurses, and particularly nurse practitioners (NPs), play a central role in addressing these challenges. Recent policy developments, including the modernization of the *Canada Health Act* (1985) (CHA) through the introduction of the CHA Services Agreement, have reinforced the importance of integrating NPs into publicly funded systems (CNA and CFNU 2026).

The CNA has emphasized the need to expand nurse-led and team-based models of care, enabling nurses to work to their full scope and improve access, quality and efficiency (CNA 2025). These models are particularly important in rural, remote and underserved communities.

The IWFF similarly highlighted the expanding role of nurses in primary healthcare, emphasizing their contributions as care coordinators, community-based providers and leaders in chronic disease management (ICN 2026). However,

participants noted that outdated regulatory frameworks and “turfism” and protectionism by our physician colleagues continue to limit the full utilization of advanced practice nurses, a challenge that is also evident in Canada.

### **Workforce Well-Being, Mental Health and Safety**

The well-being of the nursing workforce has emerged as a critical concern in Canada. High levels of burnout, anxiety and depression are widely reported, with significant impacts on workforce participation and retention (CFNU 2025). Workplace violence further exacerbates these challenges, with a majority of nurses reporting exposure to abuse or aggression in the course of their work.

The CNA has called for strengthened workplace protections, including enforcement of existing legislation, investment in mental health supports and the development of safer work environments (CNA 2025). Addressing these issues is essential not only for workforce sustainability but also for the quality and safety of patient care.

The IWFF reinforced the centrality of nurse well-being, emphasizing the need for healthy work environments, protection from violence and policies that support both professional and personal sustainability (ICN 2026). These findings underscore the importance of leadership approaches that prioritize psychological safety and trauma-informed practice.

### **Leadership, Governance and System Transformation**

Leadership is a critical enabler of workforce transformation. In Canada, the CNA has emphasized the importance of embedding nursing leadership within federal policy structures, including the formalization of the Chief Nursing Officer role at a senior executive level (CNA 2025). This role is essential for coordinating national workforce strategies and ensuring that nursing perspectives are integrated into policy decisions.

More broadly, investment in leadership development across the profession is required to support system redesign, innovation and workforce retention. Leadership capacity at the point of care, as well as within policy and administrative domains, is essential to driving change.

The IWFF strongly reinforced the importance of nursing leadership, highlighting the role of Chief Nursing Officers and other leaders in shaping policy, improving care quality and advancing health system performance (ICN 2026). This alignment underscores the central role of leadership in translating policy into practice.

## **Technology, Artificial Intelligence and the Future of Nursing**

The integration of digital health technologies and artificial intelligence (AI) is rapidly transforming healthcare delivery. The CNA has emphasized the importance of involving nurses in the design, implementation and governance of these technologies to ensure that they are safe, effective and aligned with patient needs (CNA 2025).

In Canada, digital health solutions are particularly important for improving access in rural and remote communities. However, careful attention must be paid to issues of data security, ethics and potential impacts on workload.

The IWFF echoed these priorities, emphasizing that nurses must play a central role in shaping AI adoption and ensuring that technological innovation supports, rather than replaces, the core professional aspects of nursing (ICN 2026).

## **Conclusion**

The 2026 IWFF provides a compelling global call to action, while Canadian policy frameworks and workforce data offer a clear pathway for implementation. The alignment between CNA priorities and IWFF recommendations demonstrates that Canada is well-positioned to lead in nursing workforce transformation.

However, achieving this potential will require sustained commitment to policy reform, strategic investment and leadership development. Addressing workforce shortages, optimizing the scope of practice, improving working conditions and advancing equity are all essential components of a comprehensive strategy.

This article establishes the foundation for a broader series exploring targeted solutions, including the integration of IENs and the mental health and well-being of the nursing workforce. Together, these efforts aim to support a resilient, equitable and sustainable future for nursing and health systems in Canada and globally.

*Correspondence may be directed to Valerie Grdisa by e-mail at [executive.office@cna-aiic.ca](mailto:executive.office@cna-aiic.ca).*

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