

FREE AND UNIVERSAL? DISPARITIES IN INTERNATIONAL STUDENT HEALTH CARE IN CANADA

January 2026



MADHU VERMA
MIGRANT JUSTICE CENTRE

AUTHORS

Canadian Health Coalition, founded in 1979, is composed of frontline health care workers, community groups and experts committed to universal public health care. A key priority of the Canadian Health Coalition is ending systemic racism in health care.

Madhu Verma Migrant Justice Centre is dedicated to advancing migrant justice and supporting migrants with precarious status in New Brunswick, including migrant workers, refugee claimants, international students and people with irregular status.

RESEARCH SUPPORT

Citizens for Public Justice (CPJ) is a national progressive organization of members inspired by faith to act for social and environmental justice in Canadian public policy. CPJ's work focuses on poverty in Canada, climate justice, and refugee rights.

Pro Bono Students Canada, founded in 1996 at the University of Toronto Faculty of Law, with chapters at 22 law schools throughout Canada, provides free legal support to people and communities facing barriers to justice.

ACKNOWLEDGEMENTS

Authored by Tracy Glynn with research contributions by Michaela De Groot, Itoro Ekanem, Samantha Ho, Divine Bright, Kailin Rourke and Sarah Vu.

The authors wish to thank Aditya Rao, Y.Y. Chen, Diwa Marcelino, Lindsay Larios, Ryan MacRae, Noah Schulz, Lutfunnessa Tania, Hassan Mehmood, Jovial Osundu Orlachi, Judith Smith, Trisha Estabrooks and Neena Saxena for reviewing the report. Any errors in the report are the author's.

Design by Natalia Evdokimova.

Suggested citation: Glynn, T. (2026). *Free and universal? Disparities in International Student Health Care in Canada*. Canadian Health Coalition and the Madhu Verma Migrant Justice Centre.

TABLE OF CONTENTS

Executive summary	4
List of abbreviations	6
Introduction	8
Social determinants of health	11
Provincial/territorial health care coverage for international students	14
Alberta	17
British Columbia	18
Manitoba	19
New Brunswick	20
Newfoundland and Labrador	21
Nova Scotia	22
Northwest Territories	23
Ontario	24
Prince Edward Island	25
Quebec	26
Saskatchewan	27
Yukon	28
The <i>Canada Health Act</i> and international students	29
Conclusion and recommendations	32
References	34

EXECUTIVE SUMMARY

International students in Canada are facing debilitating stress and anxiety related to being unable to pay excessive tuition fees and adapt to everchanging rules that restrict their work hours and stay in the country. Students are under immense pressure to find employment after graduation that will put them on a path for permanent residency. The stress is affecting their overall physical and mental health. At the same time, international students experience barriers to accessing public health care. International students are not afforded the same rights, protections and access to services as permanent residents or citizens. For example, international students cannot gain immediate access to public health care in many provinces and territories in Canada.

Canada's Medicare system is celebrated for being free and universal. When Canadians need health care, they are able to go to a doctor or a hospital and not worry about paying a medical bill they cannot afford. Taxes pay for social services such as health care. Just like an umbrella on a rainy day, our universal public health care system is supposed to have us all covered when we need it. However, not everyone in Canada has universal and comprehensive access to public health care, including new immigrants who pay taxes that fund our public health care system (Rodriguez and Glynn, 2022).

Canada also purports to welcome immigrants, including international students wanting to settle in Canada, yet recent policy shifts have created immense uncertainty and challenges. A new federal cap on study permits and restrictions on post-graduate work permits has left international students who dreamed of a future in Canada in turmoil. Important to this report is how health and immigration policies are adversely affecting the health of international students.

This report by the Canadian Health Coalition and the Madhu Verma Migrant Justice Centre with research support by Citizens for Public Justice and ProBono Students Canada based at the University of Ottawa discusses the barriers international students face when accessing public health care in Canada.

Not all international students in Canada have access to public health care. In provinces and territories where international students are not covered under public health care plans, students must arrange private health insurance coverage for themselves. The barriers to accessing health care differ by province and territory but mostly relate to waiting periods and the costs of private health insurance. This report exposes significant inequalities in access to health care based on the immigration status of international students and where they reside in Canada.

The first part of this report provides contextual background of what is known about the health status of international students in Canada, including key social determinants of health of particular concern to international students. We situate the unequal access to health care for international students within a larger trend in Canadian immigration policies of limiting access to rights and essential services, especially for lower-income and racialized migrants.

The second part of the report provides the most updated information available on health care coverage for international students in each province and territory, focusing on what is covered during studies and post-graduation and the costs.

The third part of the report discusses how principles of the *Canada Health Act*, namely universality, portability and accessibility, can be used to argue for better public health care for international students.

We conclude with key policy recommendations for more equitable access to health care for international students in Canada.

We recommend provincial and territorial governments:

- Provide Medicare (public health insurance) to international students for the entire duration of their stay in Canada. This includes extending access to health care in between permits and applications and for individuals on maintained status.
- Eliminate waiting periods for international students to access public health care.

We recommend the federal government:

- Ensure provinces and territories comply with the principles of the *Canada Health Act* when it comes to providing health care for international students.
- Immediately repeal the new caps, restrictions and requirements on work and study permits affecting international students and their spouses and dependents.
- End the criteria in the Canadian Dental Care Plan that deems international students and other residents with spouses outside of Canada ineligible.
- Establish accessible pathways towards permanent status for international students. Granting permanent residence status would remove many of the barriers related to accessing health care.

LIST OF ABBREVIATIONS

AHCIP	Alberta Health Care Insurance Plan. Alberta's public health insurance.
CCPA	Canadian Centre for Policy Alternatives. An independent, non-partisan research institute for issues related to social, economic and environmental justice.
CHA	Canada Health Act. Canada's federal legislation for publicly funded health care insurance.
CHT	Canada Health Transfer. The federal transfer to provinces and territories for health care. It provides predictable funding for health care and supports the principles of the <i>Canada Health Act</i> .
DLI	Designated Learning Institutions. A post-secondary institution approved by a provincial or territorial government to host international students under the International Student Program.
IRCC	Immigration, Refugees and Citizenship Canada. Government department responsible for matters dealing with immigration to Canada, refugees, and Canadian citizenship.
ISHF	International Student Health Fee. A mandatory monthly fee of \$75 charged to all international students studying in British Columbia on a valid study permit for at least six months of the year.
MCP	Medical Care Plan. The Newfoundland and Labrador publicly funded health care plan.
MISHP	Manitoba International Student Health Plan. Private primary health insurance for international students in Manitoba.
MSI	Medical Services Insurance. Nova Scotia's public health insurance.
MSP	Medical Services Plan. British Columbia's public health insurance.
NWTHC	Northwest Territories Health Care. Northwest Territories' public health insurance.
OHIP	Ontario Health Insurance Plan. Ontario's public health insurance.
PGWPs	Post-Graduation Work Permits. An open work permit for international students who have graduated from an eligible Canadian post-secondary institution.

RAMQ	Régie de l'assurance maladie du Québec. Quebec's public health insurance agency that manages the Quebec Health Insurance Plan for medical services and the Public Prescription Plan for medications for residents
SOWP	Spousal Open Work Permit. A permit allowing the spouse or common-law partner of certain foreign nationals in Canada to work for any employer.
UHIP	University Health Insurance Plan. A private health insurance plan for international students in Ontario.

INTRODUCTION

Some international students in Canada go home in body bags. Others never go home, dying before they get to don a graduation cap and gown. Naiqi Helen Guo, from China, was studying at the University of Toronto when she died in a rooming house fire in 2018 at the age of 18 (Kwong, 2018). Guo's death shone a light on the unsafe housing conditions of international students. Two landlords were later charged with negligence (CBC, 2018). While some deaths are tragic accidents, too many international students are dying due to state negligence and by suicide and from drug overdoses. Their community attribute their suicides and drug overdoses to loneliness and mental distress of not being able to afford food and housing (Canadian Press, 2024; CBC, 2023; Hune-Brown, 2022). And yet, this group is often denied Medicare when they arrive in Canada.

Upon arrival to Canada, international students are among the immigrants who often report better health outcomes compared to Canadians. However, this health advantage tends to diminish over time, linked to stress and other difficulties immigrants face in adjusting to a new environment. This phenomenon is described as the 'healthy immigrant effect' (Gagnon et al., 2022).

One recent study of international and domestic students in Canada found international students had comparable or lower rates of clinically significant anxiety, depression, and insomnia. However, international students were more likely to report having attempted suicide. The researchers linked the suicide attempts to international students feeling less connected to the university community and to lower academic performance (King et al., 2023). Previous studies have noted international students are less likely to seek counselling support at universities (Baghoori et al., 2024). Another study of international students in Manitoba reported that international students are less likely to talk about their hardships compared to domestic students. The researchers recommended the provision of culturally-adapted supports that consider ethnolinguistic differences, religious practice, and mental health literacy to better meet the needs of international students (de Moissac et al., 2020).

While the combination of academic and immigration pressures often places international students at risk for poor physical and mental health (Baghoori et al., 2024; Gagnon et al., 2022; King et al., 2023), they struggle to access public health care in Canada (Larios et al., 2023). Across the country, there are disturbing stories of international students dying by suicide, living in substandard housing, and relying on food banks to survive (Canadian Press, 2024; Di Cintio, 2025; Hune-Brown, 2022). In provinces such as Manitoba that have no public health care access to students, the media has reported students paying hefty medical bills. In 2021, the media told the story of Calvin, an international student Manitoba, saddled with a medical bill of more than \$123,000 (Larios et al., 2023; Lilley, 2021).

Not every international student has wealthy parents who can afford their child's tuition and living expenses in Canada. Many international students come from families that have sold their homes, land and belongings, investing everything in their child's education in Canada. Many have taken on debt to pay immigration and education consultants to send their child to school, and sometimes,

that's still not enough money to pay for an education in Canada (Hune-Brown, 2022; Kataria and Mohsina, 2024). When the Canadian government increased the proof of financial support needed to obtain a study permit, from \$10,000 to \$22,895 in 2025, it shut the door on many of the world's students from middle and lower classes or it levelled a debt burden onto students and their families, making them vulnerable to social and economic predation.

International students in Canada already pay exorbitant tuition. Tuition varies at each university but on average in Canada, in the 2025-2026 academic year, international students will pay \$41,746 per year for an undergraduate degree and an average \$24,028 per year for a graduate degree (Statistics Canada, 2025). Now, the Canadian government has imposed additional financial requirements, fewer hours of work, new language tests and spousal bans and restrictions on them (IRCC, 2023). Banning family members and work permits of spouses is a callous move that strips international students of familial, emotional and financial support. Students are also under immense strain to find work after graduation as they strive for permanent residency. Now, many are being told that such pathways to permanent residency are closing as the government tries to limit immigration numbers.

The Canadian government capped the number of new international students in 2024 and again by 10 per cent in 2025, resulting in 150,220 (60 per cent) fewer students arriving in Canada between January and September 2025 compared to the same period in 2024 (IRCC, 2025a, 2025b). As of September 30, 2025, 473,860 people hold study permits in Canada and 251,300 hold both a work and study permit (IRCC, 2025a). More reductions in new international student numbers are expected as part of the government's 2026-2028 Immigration Levels Plan.

The Canadian government has justified caps and other restrictions on international students in the name of protecting them (IRCC, 2023; 2024). However, international students and their advocates say the restrictions actually harm the students and that governments are treating international students like cash-cows, using their hefty tuition to keep the lights on at post-secondary institutions when they should be publicly funding education at adequate levels.

International students are not only in Canada studying. They are among those teaching our classes, providing care to our loved ones and serving us food. Some international students in New Brunswick have shared with the Madhu Verma Migrant Justice Centre that they are experiencing wage theft and living in overcrowded, substandard units. They are fearful of speaking up. Instead of addressing the increasing commodification of health care, housing, food, and energy, the Canadian government is scapegoating international students and other immigrants for a polycrisis of affordability, social polarization and geopolitical conflict while also denying them access to essential services such as health care.

The COVID-19 pandemic highlighted health inequities faced by migrant workers including international students. Furthermore, pandemic measures to extend public health care to everyone perpetuated a neoliberal logic that only productive members of the economy are deserving of health care (Chen, 2023). Is health care a human right for everyone or an entitlement for those contributing to the market economy?

International students face numerous barriers to accessing health care, including cultural and language differences, lack of awareness of resources available, and socio-economic barriers caused by immigration policies. During the COVID shutdowns, international students reported increased isolation, poor mental health, and loss of livelihood and inability to afford health care (Varughese & Schwartz, 2022). They also experienced delays in receiving vaccines (Zhao & Bhuyan, 2023). Those of Asian descent faced overt racism in many settings including in health care (Ngo et al., 2023).

In this report, we first discuss five social determinants of health that apply to international students. We then summarize the health care coverage offered to international students in each province or territory in Canada. We then discuss how principles of the *Canada Health Act* relate to the health care of international students and how these principles are being met or not met. When it comes to international student health care, we find that several provinces and territories have failed to meet certain principles of the *Canada Health Act* required for federal funding, namely the principles of universality, portability and accessibility. We conclude with recommendations for the federal and provincial and territorial governments to implement to ensure that the right of international students to health care is guaranteed.

SOCIAL DETERMINANTS OF HEALTH

Social determinants of health are the economic and social conditions, including income, education, housing, employment, food security, and discrimination, that shape health outcomes (Public Health Agency, 2024). For example, people with lower socioeconomic status, racialized peoples and those who live and work in toxic environments tend to have poorer health outcomes. A number of social and economic factors affect the health of international students. This section will focus on how international students are affected by inadequate health care access, housing precarity, food insecurity, income restrictions, and inadequate social supports.

To address the social determinants of health, the structural determinants of health must not be ignored, including how global capitalism and colonialism structure our societies in ways that further discriminatory conditions of international students. International students and others with precarious immigration status are especially affected by structural stigmatization and criminalization, and intermediary determinants, such as fear of deportation and health care avoidance (Gagnon et al., 2022).

In Canada, “where neocolonial and neoliberal political-economic logics for social stratification are dominant, racialized individuals and immigrant groups have limited access to social and material resources and bear a greater burden of health damaging conditions as a result” (Gagnon et al., 2022, 1030). International students in Canada must grapple with enduring colonial and racist frameworks of who belongs in Canada and who does not. Many international students are also migrant workers caught up in a dehumanizing global system of super-exploitation (Pröbsting, 2015). Government policies prioritize migrants’ economic contributions, their labour inputs, while denying them access to social services that allow them to fully realize their potential.

HEALTH CARE ACCESS

In Canada, health care coverage and costs for international students vary by province and territory. As detailed in the next section of the report, while some provinces such as Alberta offer free public health insurance to international students, others require students to obtain private insurance plans for varying periods of time. In Manitoba, international students pay an annual fee of \$1,200 for private health insurance. For those without public or private health insurance, getting sick or injured could mean thousands of dollars in medical bills. Medical charges, including hospital fees, for non-insured residents vary widely in Canada. Non-insured residents can expect to pay hundreds of dollars for emergency care and thousands of dollars for hospital stays and diagnostic services.

Mental health care in Canada is grossly underfunded and treated like a privilege available only to those who can afford it (Lowe et al., 2024). Provincial public health care plans cover some mental health care from doctors and services within hospitals/clinics, but generally services from private practice professionals like psychologists, clinical social workers, or therapists require private insurance or out-of-pocket payment. Access to mental health care also depends on where you live

in Canada and Indigenous and racialized people face the greatest barriers to care. According to a 2024 Canadian Mental Health Association report, more than half, 57 percent, of people aged 18-24 who had early signs of a mental illness said cost was an obstacle to getting mental health care (Lowe).

Depending on the province or territory where they reside, international students can experience no health care coverage during the summer and post-graduation periods when they are transitioning to a different immigration status.

The inability to pay for health care stops people who cannot afford to pay from accessing health care. Health care delayed is health care denied.

HOUSING

International students are more likely than Canadian-born students to live in inadequate housing (Stick et al., 2024). Many international students have faced difficulties securing affordable and suitable housing due to cultural differences, language barriers, and lack of knowledge of Canada's tenant rights and housing regulations (El Masri & Khan, 2022; Stick et al., 2024). Furthermore, Canada's expensive housing market makes international students vulnerable to unsafe housing conditions. Many students lack credit history which makes finding housing more challenging. Many rental accommodations targeting international students are overcrowded, unsafe, and in poor condition. International students also report being scammed, surveilled and wrongfully evicted (El Masri & Khan, 2022).

Struggling to find secure housing can significantly impact international students' health in several ways. When forced to choose between paying rent and seeking health care, students may delay or avoid necessary health care. Furthermore, exposure to unsafe environments such as overcrowded, poorly maintained housing with mold, pests, and inadequate heating and cooling can contribute to respiratory illnesses, cardiovascular disease, infections, and poor mental health outcomes such as depression and psychological distress (Rana et al., 2025; Riva et al., 2023). People with poorer mental health in Canada are 50 per cent more likely to live in inadequate housing than those reporting good mental health (Lowe et al., 2024).

FOOD SECURITY

Food security involves reliable access to sufficient, culturally safe and nutritious food (Amoyaw et al., 2022). A survey of food insecurity among post-secondary students at five Canadian universities found that 39 per cent of students experienced some level of food insecurity (Silverthorn, 2016). International students are among those students experiencing food insecurity and not eating nutritious food, which can harm their health (Hanbazaza et al., 2021).

In Canada, the rising cost of groceries has led many university students to rely on food banks to meet their basic food needs. Some food banks have turned international students away, a practice called discriminatory by the Canadian Federation of Students (Bhugra, 2023).

International students may be especially vulnerable to the harmful health effects of food insecurity because of lack of access to cultural foods while also living in precarious conditions with restricted access to rights and entitlements associated with permanent residency and citizenship, such as access to health care and unlimited work hours (Amoyaw et al., 2022).

INCOME

The ability for international students to work during their degree is important in building networks and relationships with employers, as well as to offset the high costs of tuition and relocation. However, not all international students are eligible to work in Canada, and students who are eligible may be subject to some restrictions. The ability to work is dependent on the conditions of their study permit.

As of November 8, 2024, international students with a study permit are only eligible to work for 24 hours per week off campus, but can work as many hours as they want on campus as long as they meet certain criteria (IRCC, 2025c, 2025d). International students have opposed the 24-hour per week work limit, saying they need to work more to save money to pay tuition and living expenses, including the higher proof of funds required to receive a study permit. Placing a restriction on the hours international students can work is also pushing them into undocumented work, which can be unregulated, risky and dangerous.

Besides costly tuition and restrictive work hours, other financial challenges faced by international students include fewer funding opportunities (Amoyaw et al., 2022; Maynard et al., 2018), a situation many students say is designed to keep them poor.

SOCIAL SUPPORTS

It used to be easier for international students to bring their spouses and dependent children with them to Canada. A Spousal Open Work Permit (SOWP) allows spouses to work for almost any employer without restrictions, providing social support and some financial stability to international students. However, as of January 21, 2025, spouses are only eligible for a SOWP if they are partnered with an international student in a master's program that is 16 months or longer, a doctoral program or certain professional programs (IRCC, 2025e). This change means that many spouses of undergraduate and college students will not be eligible to come to Canada with a SOWP. Restricting SOWP in this way strips many international students of familial, emotional and financial supports.

PROVINCIAL/TERRITORIAL HEALTH CARE COVERAGE FOR INTERNATIONAL STUDENTS

Each province/territory has different health care coverage for international students. For example, international students in Manitoba have no access to public health care coverage while international students in other provinces and territories must wait different periods of time before they can choose to opt in to Medicare. Alberta, New Brunswick, Saskatchewan and Prince Edward Island have the greatest access to public health care for international students. This section outlines the coverage, costs and post-graduate information for each province and territory except for Nunavut that currently does not have any international students. The information comes from government websites as of the report's publication date, January 2026. This information is subject to change and the websites should be checked for possible revisions.

SUMMARY OF INTERNATIONAL STUDENT HEALTH CARE COVERAGE BY PROVINCE/TERRITORY

Province/Territory	Access to Public Health Care	Cost of Health Care
Alberta	Yes	Free
British Columbia	Yes	\$75/month for the public MSP. \$237 prior to MSP coverage
Manitoba	No	\$1,200 for the private MISHP
New Brunswick	Yes	Free
Newfoundland and Labrador	Yes	Free. Foreign Health Insurance Plan: \$261.59/semester
Northwest Territories	Yes	Free
Nova Scotia	Yes, after one year of study	Free after one year of study. During the first year of study, costs vary depending on the university. At Dalhousie University, a basic health plan is \$303.02/year.
Ontario	No	Depends on the health plan offered by the university. UHIP's annual premium is \$792.
PEI	Yes	Free
Quebec	Yes, depending on country of origin	Free, if from a signatory country. Costs of private health plans vary. The annual Blue Cross Insurance Plan costs \$981.
Saskatchewan	Yes	Free
Yukon	No	\$565 for a full year, starting in the fall semester. \$390 for eight month coverage, starting in the winter semester.

Before summarizing the situation of international student health care in each province/territory, this next section discusses just some of the lived experiences of international students trying to access health care and the health services denied to many international students and other residents across Canada.

POLICY AND LIVED EXPERIENCE

Policies may not reflect people's experiences accessing health care. For instance, in cases where there may be no official waiting period for obtaining Medicare, waiting periods may still exist or arise from time to time for various reasons. Waiting periods for reimbursement also differ. One international student in Ontario told us she went to a walk-in clinic and paid a large amount of money up front for care. Three months later, the student is still waiting for reimbursement from her university's health plan. There have also been reports across the country of temporary residents obtaining wrong or unclear information from service or plan providers when trying to access health care. Notably, international students who are pregnant or have children or dependents report uncertainty, fear and frustration when trying to access care.

Perinatal care, including prenatal, delivery, and postpartum services, is covered under public health insurance. However, if international students do not have access to public health care, they must rely on what perinatal coverage is found in their school or private insurance plans. For example, UHIP, the insurance plan used by most of Ontario's universities, covers all pregnancy-related medical expenses regardless of the date of conception. However, most college insurance plans restrict coverage to pregnancies that begin after the policy start date or up to 30 days before, which means that pregnant international college students whose date of conception is before the cut-off date set by their insurer do not have coverage for any pregnancy and birth-related costs. Many international students struggle with these costs, which can total tens of thousands of dollars. They may either delay or avoid going to the hospital to give birth (LEAF, 2020).

If wrongly denied or charged for a service that should be covered in the public system, international students are encouraged to contact the province or territory's Medicare office. However, international students have busy schedules and it can be difficult to advocate for themselves when unfairly denied health care.

WHAT MEDICARE DOES NOT COVER

Unfortunately, Medicare in Canada does not cover all kinds of health care services that people require for a healthy life. Medicines, dental care, vision care, physiotherapy and rehabilitation services and mental health care are just some of the services not fully covered in the public system, leaving people to pay out-of-pocket for this care or to rely on employer-provided benefits or private health plans. In 2025, Canada expanded public health care in two areas: pharmacare and dental care. However, coverage is still limited to many people in Canada, including international students who may not be eligible.

PHARMACARE

Canada passed universal pharmacare legislation in 2025. The legislation currently covers contraceptives and diabetes drugs and plans to expand to include more essential medicines. As of January 2026, only Manitoba, Prince Edward Island, British Columbia and Yukon have signed a pharmacare agreement with Ottawa to be able to cover contraceptives and diabetes medication for its residents. Manitoba and PEI rolled out pharmacare in 2025 while B.C. and Yukon plan to roll out pharmacare in 2026. To be eligible for pharmacare, one must be eligible for Medicare in their province or territory. In Manitoba, international students are not eligible for the Manitoba Enhanced Pharmacare Program (MEPP) launched April 15, 2025, that provides free coverage for birth control, diabetes medications (including devices/supplies), and HIV treatments since they don't have a Manitoba Health Card. In PEI, international students and temporary foreign workers are not considered residents under the Drug Cost Assistance Program and therefore do not qualify for drug coverage (Prince Edward Island, 2024). In B.C., international students will be eligible for pharmacare as long as they have access to the public MSP.

DENTAL CARE

Unlike pharmacare that is a universal program, the Canadian Dental Care Plan aims to fill the gaps in coverage. That means one must qualify for coverage. The plan is available for Canadian residents who have filed income taxes in the previous year, have a household net income under \$90,000, and do not have access to private dental insurance (from work, school, or pension). Disqualifying many international students is the criteria that those who have spouses, married and common-law, outside of Canada are not eligible to apply. International students will also have had to file income taxes in the previous year (Government of Canada, 2025).

ALBERTA

In Alberta, international students have access to the public Alberta Health Care Insurance Plan (AHCIP) if they are 18 or older, have a study permit for at least 12 months, are enrolled in a designated post-secondary institution, and intend to reside in Alberta for at least 183 days in 12 consecutive months.

COVERAGE

AHCIP covers basic and primary health care such as doctor visits, lab tests, and hospital stays and limited dental services. It does not cover routine dental care, eye care, and prescription medication. International students can supplement AHCIP coverage with private insurance or apply for government-sponsored supplementary insurance based on specific socio-economic criteria such as income.

Full-time international students are eligible for coverage as soon as they arrive in Alberta but they must apply for coverage within 90 days of arriving in the province. Coverage applies retroactively from their first date of arrival in Alberta.

Students under 18 years old may apply for AHCIP as a dependent of a guardian. Students who have a study permit less than 12 months may apply for AHCIP as long as they can show they intend to reside in Alberta for 12 months or more. International students who do not qualify for AHCIP coverage can apply for private health insurance.

COSTS

AHCIP coverage is free for international students.

POST-GRADUATION

AHCIP coverage ends with the expiration of a study permit. Students can apply for a one-time only temporary extension of AHCIP coverage while waiting for an extension of a study permit. Those with a new immigration status must complete a Notice of Change/Update form to continue coverage under a different immigration status such as a work permit. Upon approval, coverage is applied retroactively, meaning that costs incurred for medical services during the break in insurance will be reimbursed provided a claim is submitted and approved.

For more information, including eligibility criteria and applications, [visit this page](#).

BRITISH COLUMBIA

International students planning to study in British Columbia for at least six months are eligible for BC's public Medical Services Plan (MSP). However, this coverage is not free and there is a three-month waiting period. During the waiting period, students can purchase temporary student travel insurance for Canada through iMED. Residents new to British Columbia are required by law to enroll in MSP if they intend to live in the province for at least six months.

COVERAGE

The MSP covers basic and emergency medical care. Surgeries, specialist consultations, or specialized diagnostics tests require pre-authorization from the MSP. The MSP does not cover routine dental or vision care, or prescription medication.

Once students receive MSP coverage, they will have it until their study permit expires. However, if a student who has received MSP coverage leaves BC for an extended period of time, more than six months, the student may need to re-apply for MSP and rejoin the waiting list. If a student moves to another province to study, they can apply to continue to use their MSP plan for three months.

iMED is the University of British Columbia's temporary health insurance program for international students while they wait for their application with the MSP to be processed. iMED is required during the three-month waiting period for the MSP. It covers basic hospitalizations and medical services but will require authorization for some procedures including simple surgeries, specialists, and specialized diagnostics. Some medical facilities may not recognize iMED coverage, but students can submit a claim to iMED International to receive reimbursements in these circumstances.

COSTS

International students must pay the BC government a monthly fee of \$75/month for the MSP. If accessing iMED, students must pay \$237 for the first three months.

POST-GRADUATION

MSP coverage can be extended without gaps if a student obtains a new study permit or a post-graduation work permit. If a student's current permit expires before they receive a new study or work permit, they can submit an application to be considered as having "maintained status." Maintained status is the legal permission for temporary residents in Canada to stay in the country while their application for an extension of their work, study, or visitor permit is being processed, as long as they applied before their current status expired and remain in Canada. If not approved for MSP temporary coverage, an extension of the MSP or reapplication for MSP is needed.

For more information, including eligibility criteria and applications, [visit this page](#).

MANITOBA

International students in Manitoba do not have access to public Medicare and are required to buy private health insurance as of 2018. Manitoba requires international students to subscribe to the Manitoba International Student Health Plan, offered by Manitoba Blue Cross, or the private insurance plan offered by their institution (e.g. Guard.me).

Manitoba was the first province to take advantage of funds from the national pharmacare program and implement a pharmacare deal on April 15, 2025. The Manitoba Enhanced Pharmacare Program provides coverage for free contraceptives, diabetes medication and hormone therapies (Manitoba Health, 2025). However, only Medicare holders are eligible for pharmacare which means international students cannot access the free medication currently available to other residents in the province.

COVERAGE

International students at the University of Manitoba, University of Winnipeg, International College of Manitoba, and Brandon University have the MISHP. The MISHP provides primary health coverage such as emergency medical care, hospitalization, doctor visits, and X-rays. It also includes coverage for diagnostic services, laboratory tests, and some prescription medications. Coverage may not include pre-existing conditions, which may include pregnancy-related costs depending on gestation. Students must also apply for secondary, extended coverage offered through student unions. This secondary coverage covers vision care, dental care, prescription drugs and physiotherapy. All other colleges and universities in the province offer other, often less comprehensive options.

Some health service locations are set up for direct billing where students just have to show their health card, while others require students to pay up front for services and then submit a claim for reimbursement within 15 days of the payment.

Coverage under the MISHP begins on the first day of a study term and continues for the year. Students can apply for emergency early coverage if they arrive early in Manitoba.

COSTS

For international students on the MISHP, they must pay an annual fee of \$1,200. Other plans have different fees, which are often cheaper, but less comprehensive.

POST-GRADUATION

International students with MISHP coverage have it for four months after they graduate. Coverage also extends to family or dependents enrolled with that student's plan.

For more information, including eligibility criteria and applications, [visit this page](#).

NEW BRUNSWICK

Since 2017 eligible international students and their spouses and dependents have access to public Medicare in New Brunswick during the period of the student's study permit. International students must be enrolled in a full academic year.

COVERAGE

International students coming to New Brunswick from outside the country are eligible for Medicare coverage on either the first day of classes or on the effective date of their study permit, whichever is later. International students who move to New Brunswick from another province are subject to the three-month waiting period provided they had coverage in the previous province, and continue to be covered by that province for three months after their move to New Brunswick. New Brunswick Medicare covers medically required services provided by a physician and hospital services including hospital stays, drugs administered in hospital, surgical facilities, certain diagnostic services deemed necessary, certain therapies and routine surgical supplies. For services not covered by Medicare such as dental care, vision care, and prescription drugs, private health insurance is available through institutions.

For students who must take a leave of absence from their studies due to the birth of a child, they and their child will retain Medicare coverage. If a student must take a leave of absence for a situation outside of their control, they must contact New Brunswick Medicare immediately and have their case reviewed.

COSTS

There is no cost to obtain New Brunswick Medicare coverage. Until the student receives Medicare coverage, they typically pay for private insurance through their university. International students at the University of New Brunswick are automatically enrolled in an emergency health insurance plan. The costs of private health insurance plans vary. UNB's emergency health insurance plan is \$200/person for a four-month term.

POST-GRADUATION

Once a student graduates and obtains a new study permit or a work permit, they will have to submit the new permit to New Brunswick Medicare to continue Medicare coverage. If the student does not have another permit or immigration document allowing them to reside in New Brunswick, their Medicare coverage will terminate. This also includes the coverage for their dependents. If coverage is terminated, students are responsible for paying for health care. If a new permit is obtained and eligibility has been determined, original receipts for health care charges can be submitted to New Brunswick Medicare for consideration of reimbursement provided the eligible services fall within the dates of coverage.

For more information, including eligibility criteria and applications, [visit this page](#).

NEWFOUNDLAND AND LABRADOR

All international students, enrolled full-time for at least 12 months, are automatically registered for the Foreign Health Insurance plan and are eligible for the public Newfoundland and Labrador Medical Care Plan (MCP).

COVERAGE

The MCP for international students covers basic health care such as pre-operative and post-operative care, physician consultations, maternity care, radiology interpretive services and certain surgical-dental procedures deemed medically necessary to be performed in hospital. A full list of covered services can be found in the Medical Care Insurance Insured Services Regulations. International students can supplement the MCP with private insurance. International students also receive coverage for certain inpatient and outpatient hospital services under Newfoundland's Hospital Insurance Plan and may supplement these services through private insurance.

MCP coverage extends to dependents of international students that reside within the same residence.

COSTS

MCP application and coverage are free for qualifying international students. All registered international students are automatically enrolled in the Foreign Health Insurance Plan at Memorial University. Once MCP is obtained, international students are eligible to opt out of the Foreign Health Insurance Plan with their student union. The cost of the Foreign Health Insurance Plan is \$261.59 per semester.

POST-GRADUATION

Post-graduation, international students covered under the MCP will continue to receive coverage until their permanent exit date, their study permit expires or 90 days after their degree or study program ends, whichever is earliest. To extend health coverage, graduating students must submit a new application form and meet the requirements under their new immigration status.

To maintain MCP coverage, international students must remain within the province during the term of their post-secondary program except for programs with credited out-of-province work requirements. Any student who wishes to leave the province must obtain an Out-of-Province Coverage certificate to receive out-of-province health coverage within the specified MCP criteria. However, the period spent outside the province must not exceed 183 days.

For more information, including eligibility criteria and applications, [visit this page](#).

NORTHWEST TERRITORIES

International students studying in Northwest Territories are eligible to apply for the public Northwest Territories Health Care (NWTHC) if they are enrolled in a program of 12 months or longer and plan to reside in the territory for at least 153 days in a calendar year.

COVERAGE

The NWTHC provides coverage for essential services such as doctor visits, hospital care, and some emergency services. It does not extend to non-medically required services and services such as vision, dental care, medical supplies, and out-patient prescriptions. International students that seek coverage for these services are allowed to supplement their public insurance with plans from private insurance companies.

A NWTHC health card is typically valid for three years and students can renew their health card after that period if they have an updated study permit.

COSTS

NWTHC is free for qualifying international students.

POST-GRADUATION

Since the NWTHC is also the public insurance scheme for those with a work permit, international students who have received their post graduate work permit should notify the NWT Health Services Administration about changes in their immigration status. This allows for continued coverage without interruption under the NWTHC plan.

For more information, including eligibility criteria and applications, [visit this page](#).

NOVA SCOTIA

International students in Nova Scotia are only eligible for Nova Scotia's Medical Services Insurance (MSI) after they have resided in the province for a period of 12 months. Students may apply for coverage 90 days before the end of the 12-month period.

COVERAGE

Coverage for the first 12 months for international students varies depending on the insurance plan offered by the post-secondary institution.

MSI provides coverage for medically required hospital services as well as limited dental and optometric services. For travel within Canada, except for Quebec, medically necessary services will be covered by the host province when the student shows their provincial health card. If a student is required to pay for any services, they may submit their receipts to MSI to be considered for reimbursement. MSI will also provide short-term temporary out of country coverage for emergencies, including hospitalization resulting from an accident or sudden illness. MSI will pay \$525 per day and 50 per cent of ancillary fees for in-patient services. Out-patient services, prescription medications, dental care and vision care are not covered.

To maintain MSI coverage, international students must provide a valid study permit and sign a declaration each year to demonstrate that they meet the status qualification for the MSI. They also must physically reside in Nova Scotia for at least 183 days each calendar year.

Spouses and dependents under the age of 19 are eligible for MSI coverage for the same period of time as the student.

COSTS

The costs of health coverage during the 12-month period before MSI qualification depends on the insurance plan offered by the post-secondary institution. At Dalhousie University, health/dental plan coverage from September to August for each individual is \$488.86. Like other provincial public health care plans, MSI coverage is free.

POST-GRADUATION

Graduates who obtain a post-graduate work permit must notify the province of their updated immigration status to renew their MSI health coverage.

For more information, including eligibility criteria and applications, [visit this page](#).

ONTARIO

International students in Ontario are not covered under the public Ontario Health Insurance Plan (OHIP). Students enrolled in post-secondary education in the province are often required to enroll in the private insurance plans provided by their institutions. Most universities use the University Health Insurance Plan (UHIP), while colleges use other providers.

COVERAGE

Coverage and the period of coverage depends on the insurance plan purchased. UHIP is one health insurance plan purchased by international students in universities in Ontario. It is compulsory for qualifying students and seeks to match coverage and prices to the coverage provided by the public OHIP. Coverage under this plan lasts for the duration of the school year from September 1 to August 31. UHIP coverage remains active while students are registered in classes.

COSTS

The cost for private health insurance available to international students in Ontario is dependent on the plan offered by the respective post-graduate institutions. For example, UHIP annual premium in 2025, covering services from September to August, was \$792, and insurance with a dependent cost \$1,584. This insurance is typically included in university fees.

POST-GRADUATION

Typically, insurance coverage ends with the school year, and an international student is only able to renew coverage under the same plan if they meet the enrollment criteria for that institution. Some private insurance companies like Guard.me offer some form of temporary insurance coverage to assist new graduates transition to an independent insurance plan.

For more information, including eligibility criteria and applications, [visit this page](#).

PRINCE EDWARD ISLAND

Only international students who have a study permit that enables them to work off campus are eligible for public health care and can be given a PEI Temporary Health Card. PEI's residency requirement for public health care is six months plus one day.

COVERAGE

If international students are not eligible to work off campus, they will need to obtain private health insurance or opt-in to further coverage at their learning institution.

The PEI Temporary Health Card offers basic coverage for doctor visits, emergency services, and hospital care. Students may still need to purchase supplemental health insurance for services such as, routine dental, routine vision, appliances such as hearing aids and artificial limbs and prescription medications. This coverage may be included in their tuition fees at their educational institution. Eligible students will receive coverage for the duration of their study permit. Spouses and dependents under the age of 18 of international students can also receive a PEI Temporary Health Card.

PEI Medicare will cover the cost of out-of-province emergencies of sudden-illness health services. For travel exceeding one month, students should notify PEI Medicare to avoid any delays in payment. For travel outside of Canada, students should purchase private health insurance. PEI Medicare will pay for medical services at PEI rates in Canadian currency, but students will be responsible for paying the difference, which may be considerably higher.

COSTS

The PEI Temporary Health Card is free. Educational institutions may require students to have other forms of private health insurance at varying costs.

POST-GRADUATION

The student is responsible for the renewal of their Temporary Health Card upon extension of study permit, which they can do online on the Prince Edward Island government website by providing proof of enrolment and the valid updated study permit.

For more information, including eligibility criteria and applications, [visit this page](#).

QUEBEC

International students have access to Quebec's public health insurance plan (RAMQ) as soon as they arrive as long as they hold a valid study permit, are full-time students, and are from one of the countries that have signed a social security agreement with Quebec. Signatory countries include Belgium, Denmark, Finland, France, Greece, Luxembourg, Norway, Portugal, Romania, Serbia and Sweden. Students who do not qualify for Quebec's public health insurance must buy private health insurance offered at their university or other private health insurance.

COVERAGE

Qualifying international students for RAMQ can apply before they arrive in Quebec. Coverage will typically begin a maximum of three months after the application is submitted. Quebec recommends students have private insurance before RAMQ coverage takes effect. RAMQ covers medically necessary health services. And like other provinces, dental care and other supplemental care is not covered.

COSTS

RAMQ is free for international students from signatory countries. Supplemental plans costs vary based on coverage. For example, Blue Cross Insurance Plan that has similar coverage as RAMQ, from September 1 to August 31, costs \$981.00.

POST-GRADUATION

If a student obtains an open three-year post-graduation work permit (PGWP), they will automatically be eligible for RAMQ. Students must obtain the PGWP before they can register for RAMQ. There is a waiting period of three months for RAMQ applications. Students may still have coverage from their educational institution for the remainder of the academic year and should check with their institution to confirm how long coverage lasts.

For more information, including eligibility criteria and applications, [visit this page](#).

SASKATCHEWAN

International students in Saskatchewan with a valid study permit for at least six months at a Saskatchewan designated learning institution are eligible for the public Saskatchewan Health Card.

COVERAGE

Students can apply for their Saskatchewan Health Card once they arrive in Saskatchewan and have proof of full-time enrolment at a designated learning institution. Students can also register their spouse/partner and dependents at the same time as they register.

With a Saskatchewan Health Card, students have full coverage for essential health services, including doctor visits, hospital care, and diagnostic services, maternity care, some immunizations, and mental health services provided through the Saskatchewan Health Authority.

Students may still want to buy private insurance for coverage for prescription drugs, routine dental services, routine vision services, medical appliances, ground and air ambulance transportation, and paramedical services.

COSTS

The Saskatchewan Health Card is free to qualifying international students.

POST-GRADUATION

The Saskatchewan Health Card expires with the end of a study permit. Students who wish to extend their study permits must apply for their extension before their current study permit expires. Once students receive their study permit extension, they must update their health card information and immigration documents, including the new study permit, on the eHealth Saskatchewan website. Students who receive a post-graduate work permit must also update their documents on eHealth Saskatchewan.

For more information, including eligibility criteria and applications, [visit this page](#).

YUKON

Yukon has only one designated learning institution, Yukon University. There is no public health insurance for international students in the territory. International students who enroll at Yukon University are required to purchase a mandatory group health insurance plan that provides coverage to international students during their study permit. Students can only opt out of this group plan if they can show proof they are covered under a government health insurance plan.

COVERAGE

Students are automatically enrolled in the Yukon University health and dental plan. This plan provides health and dental care coverage for either a full year if the student starts in the fall term, or for eight months if the students start school in the winter term. It includes coverage for the entire summer up until August 31 of that school year.

Students who have a spouse or dependent can pay additional fees directly to the insurance company to cover the family members.

COSTS

International students pay about \$565 for a health plan for a full year, starting in the fall semester, and \$390 for eight-month coverage, starting in the winter semester.

POST-GRADUATION

International students in the Yukon are not eligible for the mandatory group health insurance plan with the expiration of study permits. After graduation, students may need to purchase other private health insurance. Students may also apply for a post-graduate work permit. With a post-graduate work permit, they can then apply for the public Yukon Insured Health Program.

For more information, including eligibility criteria and applications, [visit this page](#).

THE CANADA HEALTH ACT AND INTERNATIONAL STUDENTS

The *Canada Health Act* is Canada's federal legislation pertaining to publicly funded health care insurance. The Act sets out the primary objective of Canadian health care policy, which is "to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers."

The Act establishes criteria and conditions related to public insured health services that provinces and territories must fulfill to receive a full federal cash contribution for health care known as the Canada Health Transfer (CHT). The CHA requires that for a province or territory to fully receive their CHT, they must satisfy the following criteria: public administration, comprehensiveness, universality, portability and accessibility.

The CHA aims to ensure all eligible residents of Canadian provinces and territories have reasonable access to medically necessary hospital and physician services on a prepaid basis, without charges related to the provision of insured health services. Under the CHA, a resident is a person who is lawfully allowed to be in Canada and makes that province their home, and excludes tourists, transients, or visitors to a province. Provinces and territories decide who is a resident for health care purposes (Health Canada, 2025). As a result, international student health care coverage differs across Canada with only some provinces and territories providing health care to international students. As Larios et al. (2023) noted in their CCPA report on international student health care in Manitoba, immigration status is being used against international students and other temporary residents to justify and sustain disparities in access to resources, rights, and social protections, such as health care.

When it comes to the CHA principles of universality, portability, and accessibility, some provinces are particularly failing international students. This failure relates to CHA not defining residents as well as tourists, transients and visitors for the purposes of Medicare eligibility (Chen, 2015). Provinces and territories have their own legislation that determines Medicare eligibility. Some provinces and territories treat international students as residents for the purposes of Medicare while others do not.

UNIVERSALITY

For a province to comply with the CHA principle of universality, it must ensure that their health care insurance plan applies to every insured person in the province under the same terms and conditions for each person. An insured person under the CHA includes residents, if they have completed the minimum waiting period or residence period for that province, not exceeding three months. CHA defines "residents" as excluding tourists, transients, and visitors. Tourists, transients and visitors are not defined in the CHA, which leaves legal uncertainty and has resulted in disparities in international student health coverage across Canada.

Alberta and New Brunswick, which require international students to reside in the province for at

least 12 months, adhere to the spirit of CHA's universality principle. The exclusion of international students in Ontario, Manitoba and Yukon runs counter to the universality principle, seeing as it takes no consideration of the residency of international students.

Nova Scotia, Newfoundland, and Northwest Territories require international students to have a 12-month study permit to qualify for their provincial/territorial health plan. This 12-month requirement does not seem to clearly contradict the CHA's universality principle, if such a requirement is meant to limit Medicare coverage to residents and not visitors. A shorter 6-month study permit as opposed to a 12-month study permit could be used to confirm one's residency in a province/territory, but unfortunately, the CHA provides no clear answer (Chen, 2015).

Manitoba, Ontario and Yukon require all international students to pay for private health insurance, completely excluding them from provincial health insurance plans. Quebec does not allow every international student to be a part of the provincial plan. To qualify for RAMQ, students need to be from specific countries that have signed reciprocal agreements with the province. This rule excludes international students from other countries from public health insurance. In PEI, only international students with study permits enabling them to work off campus are eligible for provincial health care coverage.

Furthermore, each post-secondary institution has their own private health plan. This further undermines the principle of universality, as these plans differ significantly in their terms, conditions, duration, and degree of coverage.

In March 2020, during the onset of COVID, the Ontario Government enacted a temporary directive that granted public health care coverage for all, including migrant workers and international students. Providing OHIP coverage for the uninsured had positive outcomes, such as reduced delays in accessing care, better access to emergency care, improved access to treatment for chronic conditions, improved access to mental health care, improved outcomes and experiences for prenatal/obstetrics/postnatal care, more accessible end of life care, and reduced financial and psychological stress (Schmidt et al., 2023). However, despite the benefits, the Ontario Ford government ended OHIP coverage for all on March 31, 2023 (Balintec, 2023).

PORABILITY

The *Canada Health Act* principle of portability states that residents should have continuous coverage for medically necessary hospital and physician services when they are temporarily absent from their home province or territory, or when they move, have no longer than a three-month wait for new coverage to start.

Nova Scotia is failing international students on the principle of portability. According to the CHA, provinces cannot impose a waiting period or minimum period of residence in the province for the provincial health care plan that is longer than three months. However, Nova Scotia requires that international students be in the province for 12 months before they can apply to be covered by the provincial health plan.

Some provinces pay a portion of the coverage they would pay for the same services in their respective provinces. Alberta, Saskatchewan, Quebec and New Brunswick pay a maximum of \$100 per day for in-patient hospital services which does not include the day of discharge and a maximum of \$50 per day for out-patient visits. Manitoba residents are reimbursed only up to the rates provided in the Medical Services Insurance regulation and the hospital services Insurance and Administration Regulation. Since foreign medical expenses often exceed these rates, residents are left responsible for the balance. For residents of British Columbia, reimbursement for out-of-country emergency hospital services is a maximum of \$75 per day. Nova Scotia does not cover out-patient services out-of-country. Finally, Newfoundland and Labrador pay a maximum amount of \$350 per day for in-patient hospital care, if the insured services are provided by a community hospital, \$465 per day for in-patient hospital care if services are provided by a highly specialized facility and \$62 per visit for out-patient services.

The portability principle as applied in provincial health plans is usually of little benefit to international students.

ACCESSIBILITY

The accessibility criterion of the *Canada Health Act* requires that provincial plans not impede reasonable access to health services either directly or indirectly and that they provide reasonable compensation for all insured health services rendered by medical practitioners. Provinces have used long wait times as a reason to rely increasingly on private providers, which others argue just adds another barrier to access for those who cannot pay (Longhurst, 2023).

In the 2021-2022 *Canada Health Act* Annual report, Newfoundland and Labrador, New Brunswick, Ontario, and British Columbia had extra billing charges of \$1,723, \$64,850, \$6,560 and \$13,275,823 respectively which were deducted from each of the province's 2022 Canada Health Transfer (CHT). The Health Canada report noted that residents in British Columbia, Alberta, Manitoba, Quebec, New Brunswick, and Nova Scotia were paying out-of-pocket to access medically necessary diagnostic services which are insured health services. Violation of this criterion of the CHA affects everyone residing in the province including international students. Meanwhile international students in some provinces must also pay for public health care. In British Columbia, international students must pay out-of-pocket for medical services while waiting for the MSP coverage and then pay \$75 every month for that coverage. All these factors can also be considered indirect barriers to access that contravene the accessibility criterion.

Whether or not international students have accessible health care depends on whether they are considered residents or tourists, transients or visitors as outlined in the CHA. If a province or territory considers international students to not be residents, then they fall outside the scope of the CHA. If they are considered to be residents, then any out-of-pocket charges for medically necessary services paid by international students amounts to extra-billing and/or user charges (Chen, 2015).

CONCLUSION AND RECOMMENDATIONS

Overall, provinces and territories in Canada have work to do to make sure that their coverage for international students follows the criteria and conditions of the *Canada Health Act*. The federal government should also ensure that provinces and territories comply with the Act to receive funding from the federal health transfer.

Public health care coverage for international students varies across Canada. New Brunswick, Newfoundland and Labrador, Northwest Territories, Prince Edward Island, Saskatchewan and Alberta provide public health care to international students. In British Columbia, international students pay a monthly fee to access the public health care system. Quebec has an agreement with some European countries which grants public health care to international students of those countries. In Nova Scotia, international students are eligible for public health care after one year of study. Most concerning are the three jurisdictions that do not provide public health care to international students: Ontario, Yukon, and Manitoba.

Inadequate access to health care can have serious implications on health outcomes. International students and other precarious migrants report delays in seeking care due to costs or fear of deportation. Delaying care can lead to undiagnosed chronic diseases with serious complications and prolonged illnesses and even premature death (Larios et al., 2023).

While our report is focused on what the federal and provincial and territorial governments can do to ensure the well-being of international students in Canada, we call on universities and college administrators to be advocates for international students and make their campuses more healthy for everyone. Researchers recommend administrators develop integrated support programs between international student services and campus health centres, and provide opportunities that bring international and domestic students together to support adjustment and a sense of belongingness (Baghoori et al., 2024).

We conclude with key policy recommendations to work towards equitable access to health care.

We recommend provincial and territorial governments:

- Provide public health insurance to international students for the entire duration of their stay in Canada. This includes extending access to health care in between permits and applications and for individuals on maintained status.
- Eliminate waiting periods for international students to access public health care.

We recommend the federal government:

- Ensure provinces and territories are complying with the principles of the *Canada Health Act* when it comes to providing health care for international students.
- Immediately repeal the new caps, restrictions and requirements on work and study permits

affecting international students and their dependents.

- End the criteria in the Canadian Dental Care Plan that deems international students and other residents with spouses outside of Canada ineligible.
- Establish accessible pathways towards permanent status for international students. Granting permanent residence status would remove many of the barriers related to accessing health care.

We salute the work of the Canadian Federation of Students in Manitoba and the Healthcare for All Coalition in advancing public health care for international students. We hope that this report contributes to health equity and justice.

REFERENCES

Amoyaw, J., Pandey, M., Maina, G., Li, Y., & Nkrumah, D.O. (2022). Food insecurity among postsecondary international students: a scoping review protocol. *BMJ*, 12(10), e060952.

Baghoori, D., Roduta Roberts, M., & Chen, S.P. (2024). Mental health, coping strategies, and social support among international students at a Canadian university. *Journal of American College Health*, 72(8), 2397-2408.

Balintec V. (2023, March 25). *Ontario extended medical care coverage to uninsured patients during pandemic, but that's ending*. CBC. <https://www.cbc.ca/news/canada/toronto/ontario-ends-uninsured-health-care-program-1.6791164>

Bhugra, S. (2023). 'No International Students!!' As need grows, Brampton food bank turning some away. CBC. <https://www.cbc.ca/news/canada/toronto/no-international-students-as-need-grows-brampton-food-bank-turning-some-away-1.7024375>

Canada Health Act, RSC 1985, c. C-6. <https://laws-lois.justice.gc.ca/eng/acts/c-6/page-1.html>

Canadian Press. (2024, March 15). *International students face growing mental distress in Canada, advocates warn*. CTV News. <https://www.ctvnews.ca/health/article/international-students-face-growing-mental-distress-in-canada-advocates-warn/>

CBC. (2018, September 10). *2 people face 22 charges in connection with fatal Scarborough house fire*. CBC. <https://www.cbc.ca/news/canada/toronto/scarborough-rooming-house-fire-1.4817402>

CBC. (2023, May 24). *Funeral home unsettled by rising number of international student deaths*. CBC. <https://www.cbc.ca/player/play/video/1.6854009>

Chen, Y. Y. (2015). Extending health care entitlement to lawful non-transient international migrants: Untapped potential of the universality principle in the Canada Health Act. *UBCL Rev.*, 48, 79.

Chen, Y. B. (2023). "8: Beyond the Rhetoric of Essentiality: Canada's Neoliberal Migrant Worker Policy during the COVID-19 Pandemic". In *Beyond the Virus*. Bristol, UK: Bristol University Press.

de Moissac, D., Graham, J., Prada, K., Gueye, N. & Rocque, R. (2020). Mental Health Status and Help-Seeking Strategies of International Students in Canada. *Canadian Journal of Higher Education*, 50(4), 52–71.

Di Cintio, M. (2025, Oct. 22). Canada Held the Door Open for International Students. Then Slammed It in Their Face. *The Walrus*. <https://thewalrus.ca/canada-held-the-door-open-for-international-students-then-slammed-it-in-their-face/>

El Masri, A., & Khan, N. (2022). International Students' Lived Experiences: A Review of Literature. *CGEI Resources and Reports*, 1.

Gagnon, M., Kansal, N., Goel, R., & Gastaldo, D. (2022). Immigration status as the foundational determinant of health for people without status in Canada: A scoping review. *Journal of Immigrant and Minority Health*, 24(4), 1029-1044.

Global Affairs Canada. (2025, December 1). *Study costs for international students in Canada*. Government of Canada. https://www.educanada.ca/programs-programmes/education_cost-cout_education.aspx?lang=eng

Government of Canada. (2025). Canadian Dental Care Plan. Do you qualify. <https://www.canada.ca/en/services/benefits/dental/dental-care-plan/qualify.html>

Hanbazaza, M., Kebbe, M., Perez, A., Ball, G. D., Farmer, A. P., Maximova, K., & Willows, N. D. (2021). Food insecurity among international post-secondary students studying on a Canadian campus: A qualitative description study. *Canadian Journal of Higher Education*, 51(2), 33-45.

Health Canada. (2021). *Canada Health Act Annual Report 2019-2020*. Health Canada. <https://www.canada.ca/en/health-canada/services/publications/health-system-services/canada-health-act-annual-report-2019-2020.html>

Health Canada. (2023). *Canada Health Act Annual Report 2021-2022*. Health Canada. <https://www.canada.ca/en/health-canada/services/publications/health-system-services/canada-health-act-annual-report-2021-2022.html>

Health Canada. (2025). *How publicly funded health care coverage works*. Government of Canada. <https://www.canada.ca/en/health-canada/services/health-care-system/canada-health-care-system-medicare/canada-health-act/how-publicly-funded-coverage-works.html>

IRCC. (2023, December 7). *Revised requirements to better protect international students*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/news/2023/12/revised-requirements-to-better-protect-international-students.html>

IRCC. (2024, September 18). *Strengthening temporary residence programs for sustainable volumes*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/news/2024/09/strengthening-temporary-residence-programs-for-sustainable-volumes.html>

IRCC. (2025a, December 1). *Understanding student and temporary worker numbers in Canada*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/corporate/reports-statistics/statistics-open-data/immigration-stats/students-workers.html>

IRCC. (2025b, January 24). *2025 provincial and territorial allocations under the international student cap*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/news/notices/2025-provincial-territorial-allocations-under-international-student-cap.html>

IRCC. (2025c, February 3). *Work off campus as an international student*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/work/work-off-campus.html>

IRCC. (2025d, August 12). *Work on campus*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/work/work-on-campus.html>

IRCC. (2025e, February 19). *Help your spouse or common-law partner work in Canada*. Government of Canada. <https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/work/help-your-spouse-common-law-partner-work-canada.html>

Kataria, A.K. & Mohsina, M. (2024, Nov. 21). *Families in Punjab have borrowed, sold and sacrificed to send their kids to school in Canada. Now Ottawa's new rule has shattered their Canadian dream*. Toronto Star. https://www.thestar.com/news/canada/families-in-punjab-have-borrowed-sold-and-sacrificed-to-send-their-kids-to-school-in/article_290f1c46-7a95-11ef-9317-fb4931ed9625.html

King, N., Rivera, D., Cunningham, S., Pickett, W., Harkness, K., McNevin, S.H., Milanovic, M., Byun, J., Khanna, A., Atkinson, J., & Saunders, K.E. (2023). Mental health and academic outcomes over the first year at university in international compared to domestic Canadian students. *Journal of American College Health*, 71(9), 2663-2672.

Larios, L. (2023). *Healthcare is a Human Right: International Students Speak Out on Healthcare Inaccessibility in Manitoba*. Canadian Centre for Policy Alternatives. <https://www.policyalternatives.ca/wp-content/uploads/attachments/International-Student-Healthcare.pdf>

LEAF. (2020). *Advocacy Brief: Pregnancy as a pre-existing condition for international college students in Ontario*. <https://www.leaf.ca/submission/advocacy-brief-pregnancy-as-a-pre-existing-issue-for-international-college-students-in-ontario/>

Manitoba Health. (2025). *Manitoba Enhancement Pharmacare Agreement*. Government of Manitoba. <https://www.gov.mb.ca/health/pharmacare/mepp.html>

Longhurst, A. (2023). *At What Cost? Ontario hospital privatization and the threat to public health care*. Canadian Centre for Policy Alternatives. <https://policyalternatives.ca/sites/default/files/uploads/publications/Ontario%20Office/2023/11/AtWhatCost-FINAL-November%202023.pdf>

Lowe, Leyna, Danielle Fearon, Ammar Adenwala and Deb Wise Harris (2024). *The State of Mental Health in Canada 2024: Mapping the Landscape of Mental Health, Addictions and Substance Use Health*. Toronto, ON: Canadian Mental Health Association. <https://cmha.ca/wp-content/uploads/2024/11/CMHA-State-of-Mental-Health-2024-report.pdf>

Maynard, M.S., Meyer, S.B., Perlman, C.M., et al. (2018). Experiences of food insecurity among undergraduate Students: "You Can't Starve Yourself Through School." *Canadian Journal of Higher Education*, 48, 130–48.

Ngan, J. and Shafiq, T. (2025, April 9). What Happens after a Death on Campus. *The Walrus*. <https://thewalrus.ca/death-on-campus/>

Ngo, V.H., Pasaraba, L.J., Wu, S. & Lau, W. (2023). *Anti-Asian Racism in Canada: Lived Experiences, Impact on Mental Health, and Access to Services and Support*. The ACCT Foundation. <https://acctfoundation.ca/wp-content/uploads/2023/10/Anti-Asian-Racism-in-Canada-Lived-Experiences-Impact-and-Access-to-Services-and-Support.pdf>

Prince Edward Island. (2024). *Drug Cost Assistance Act*. https://www.princeedwardisland.ca/sites/default/files/legislation/d-14-1-drug_cost_assistance_act.pdf

Pröbsting, M. (2015). Migration and super-exploitation: Marxist theory and the role of migration in the present period of capitalist decay. *Critique*, 43(3-4), 329-346.

Public Health Agency. (2024). *Social determinants of health and health inequalities*. Government of Canada. 2024. <https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html>

Rana, K., Kent, J.L. & Page, A. (2025). Housing inequalities and health outcomes among migrant and refugee populations in high-income countries: a mixed-methods systematic review. *BMC Public Health*, 25, 1098.

Riva, M., Kingunza Makasi, S., O'Sullivan, K.C., Das, R.R., Dufresne, P., Kaiser, D., & Breau, S. (2023). Energy poverty: an overlooked determinant of health and climate resilience in Canada. *Canadian Journal of Public Health*, 114(3), 422-431.

Rodriguez, E. & Glynn, T. (2022). *Work, Study, Pay Taxes, But Don't Get Sick*. Citizens for Public Justice. <https://cpj.ca/report/work-study-pay-taxes-but-dont-get-sick/>

Schmidt C, Suleman S, Da Silva D, Gagnon M, Marshall S, Toletino M. (2023). *A bridge to universal healthcare: The benefits of Ontario's program to make hospital care accessible to all residents of the province*. Health Network for Uninsured Clients. <https://static1.squarespace.com/static/63aeecc46560bfa003a5030f6/t/64179ae782bfa26c01352025/1679268584210/A+Bridge+to+Universal+Healthcare.pdf>

Silverthorn, D. (2016). *Hungry for knowledge: assessing the prevalence of student food insecurity on five Canadian campuses*. Toronto: Meal Exchange, 2016.

Statistics Canada. (2025). Table 37-10-0045-01 *Canadian and international tuition fees by level of study (current dollars)*. <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3710004501&cubeTimeFrame.startYear=2025%2F+2026&cubeTimeFrame.endYear=2025%2F+2026&referencePeriods=20250101%2C20250101>

Stick, M., Hou, F., and Zhang, H. (2024). *Housing international students: Housing suitability across municipalities*. Statistics Canada. <https://www150.statcan.gc.ca/n1/pub/36-28-0001/2024005/article/00001-eng.htm>

Varughese, A. & Schwartz, S. (2022, April 1). The pandemic exposed the vulnerability of international students in Canada. *University Affairs*. <https://universityaffairs.ca/opinion/the-pandemic-exposed-the-vulnerability-of-international-students-in-canada/>

Zhao, K., & Bhuyan, R. (2024). Assembling social determinants of health: COVID-19 vaccination inequities for international students in Canada. *International Social Work*, 67(2), 423-436.