

MAPLE 2.0 Prescription Is Good Medicine for Doctor

By Gwen Pawlikowski

Since Tricia Mercado arrived in Canada in May of 2013, she has had no illusions of working in her field.

At least, not yet.

This has nothing to do with attitude. Mercado, who chats cheerfully during an interview, is family physician. Despite 10 years of experience and practice in the Philippines, she knew from careful research that working as a doctor in Canada would require three to four tough exams and a three-year residency. She wasn't, and still isn't, worried about that. She knows what she has to do and she is on her way.

However, she did hope to get a part-time job for a little money and for the chance to get to know a Canadian workplace. But how easy is it for a former doctor to look for work in a different field? The first word that springs to mind is "overqualified." How many employers will fear that a former doctor just won't fit? How does an applicant overcome that barrier?

For the first few weeks in Canada, Mercado tried on her own. But that didn't work out so well.

Then, thanks to some advice from another physician friend, Mercado found a solution at ISS of BC, where she talked with a counselor and mapped out her employment strategy in more detail. That included a visit to the MAPLE 2.0 office.

Within a short time, the smiling Mercado had been placed in an internship at a private school in Coquitlam. She worked part time for 12 to 15 hours a week as an office assistant from June to August of 2013.



"That was perfect for me!" she said of the experience.

Despite her previous work as a doctor, Mercado found she had ample to learn in her new job. In particular, she needed to skillfully operate the office equipment, including a troublesome shredder that was on its last leg, a shredder that resisted her healing powers and eventually made its way to the terminal ward.

Mercado, who speaks English fluently, also found some surprising language challenges.

"There are some phrases that are Canadian phrases...and like, OK..." (Here she lifts her eyes to a spot above and to the left to demonstrate a look of confusion.) "What does that mean? Until I interact with them and find out what it's like."

She gives the example of "wing it" which she said she had to guess means, "do your best with any awkward situation you might find yourself in."

In addition, she learned to talk about the weather as an everyday, regular,

conversational item. In the Philippines, she says, people talk about the weather only when it precedes a natural disaster or an impending evacuation.

Both expressions and weather chit-chat are part of the Canadian workplace culture she learned. She also started to feel a new sense of inclusion, thanks to the relationships she was building, which was very different from her pre-internship experience.

“It’s different because you see faces, you meet people and you feel their support and the friendship that they’re offering, especially because I’m a newcomer. That’s really helpful.”

We do have our skills when we come here...it’s just that we need time to get to know the culture of the place, get to know people, be familiar with the language, the phrases, the expressions. We just need the chance and the opportunity to learn how to work with Canadians.

Following the close of her internship, the physician-turned-office worker began to search for paid work. The response to her Canadian experience was positive and she was in a position of reviewing her options when the private school offered her a part-time job of 10 hours per week starting in October. She accepted.

“They want to help me have a job and still have time to study for the exam,” she

explained. “They know I’m a physician so they’re very supportive. The people there are wonderful!”

That position delights her. Furthermore, her workplace was able to act as a reference for her when she applied for a bank loan to help with her credentialing costs. The bank heard that she was a reliable, safe risk and the reference ensured the loan was approved.

The internship and the resulting part-time job help her to focus on her long-term goal to earn her doctor’s license here in Canada. If you have recently searched for a female family doctor in Vancouver, you know that there is a practical shortage which Mercado and other internationally-trained female doctors, could help to alleviate. Achieving her goal, though, is probably more than four years in the future. In the meantime, she needs to pay for her credentials to be evaluated, to put food on her table and pay her rent.

Mercado speaks wistfully of her work in the Philippines where she provided services in clinics, in schools and in a university. She looks forward to being a general practitioner again. She will apply whatever she learns in the three-year residency program so that she can provide care for the particular needs of Canadians.

As yet, she is not feeling the loss of status that many newcomers experience when they accept work that doesn’t fit their training. What she misses most is the relationships she developed from treating patients over a decade. And of course, she misses the day to day work.

“Being a doctor is being everyone else’s servant. You try to help them with whatever they came for. Status is not so much of an issue for me. It’s more of not using my skills and not being able to help other people that’s bothering me.”

But she has started her process, and a MAPLE 2.0 prescription—her internship—helped.