

Feb 2026

# Local 196 SPOTLIGHT



## Immigration in Alberta: Politics & Public Health

On Feb 19, 2026, Premier Danielle Smith announced that there will be an Alberta referendum on October 19, 2026, with nine questions covering immigration and constitutional reform.



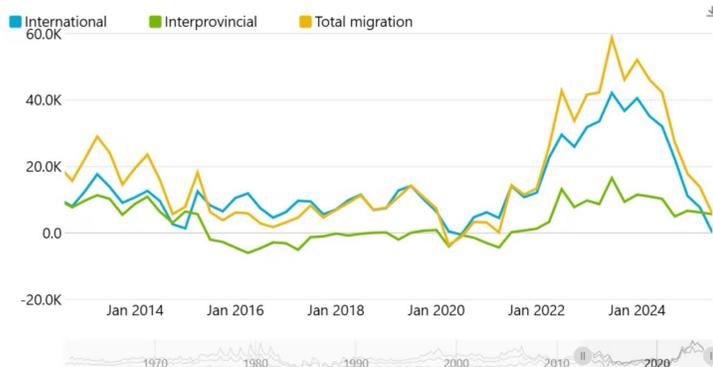
The referendum's **non-constitutional** questions would ask Albertans whether the province should:

- Take increased control over immigration selection and intake.
- Require a one-year residency before people can access provincial social support programs.
- Charge non-permanent residents fees for health care and education; and require proof of Canadian citizenship in order to vote in provincial elections.

## Facts about Immigration in Alberta

- Alberta promoted growth through its “**Alberta is Calling**” campaign, which actively encouraged workers from other provinces to relocate to Alberta during labour shortages. Alberta led all Canadian provinces in attracting residents from other parts of Canada.
- International migration accounted for over 70% of Alberta's population growth.
- Immigrants make up a significant portion of the workforce in accommodation and food services (40.7%), manufacturing (39.4%), and health (34.1%).
- Temporary residents accounted for nearly 60% of net international arrival.
- Over the last five years, Alberta has consistently attracted a high proportion of immigrants from Philippines and Nigeria, alongside India and China.
- Calgary and Edmonton attract more than 80% of all immigrants to the province.

Net Migration by Type



Trends in net migration levels of interprovincial and international newcomers (Source: Government of Alberta website)



**““We have allowed people (into) our province. If we don’t provide a service or support they need to give back to the community, we are doing a disservice to everyone – not only immigrants, but to all of us.”.”**

Sally Zhao

The Immigrant Education Society, president and CEO

### Immigration and Social Policy Questions

In her address, Premier Smith attributed mounting pressures on housing, health care, and education to what she described as “disastrous open-border immigration policies.” She argued that Alberta must have more authority to manage population growth and protect the sustainability of public services.

Critics, however, note that the province has simultaneously promoted growth through its “Alberta is Calling” campaign. The juxtaposition has prompted debate about the consistency of the government’s messaging and policy direction.

Non-permanent residents contribute to both provincial and federal tax systems. Implementing this policy would effectively require them to pay again for services that are already funded through the taxes they contribute.

### Cost and Economic Questions Left Unanswered

The Alberta government has not yet calculated how much could be saved in health care and education if the proposed service restrictions were implemented or how many newcomers would be affected. It has been suggested that children of temporary residents have accounted for roughly \$500 million annually in K-12 costs in recent years. Smith has said the pace of newcomers entering Alberta has outstripped the supply of housing, schools and hospitals.

### Responses From Newcomer-Serving Organizations

Nketti Johnston-Taylor of the Calgary-based Centre for Newcomers (as reported through media coverage) said the referendum debate itself risked stoking discrimination and hostility that immigrant communities have already reported experiencing. She warned that adding fees or premiums for essential services like health care could lead some families to delay treatment, avoid prescriptions or incur high debts, creating a pathway toward poverty and hardship rather than protection.

The Institute for Canadian Citizenship said publicly that policies restricting access to services would make life “harder for newcomers – some of whom work in the very sectors”. The organization emphasized that immigration is not simply an act of generosity but a strategy to ensure Canada has the talent and labour needed for public services and economic growth.

Peter Veress, president of the immigration consulting firm Vermax Group Inc., warned that framing immigration as the source of Alberta’s challenges “appears designed to mobilize a specific constituency rather than solve the complex policy challenge that immigration is.” He emphasized that Alberta still actively promotes economic investment and needed labour, and that fleeting political messaging could undermine that appeal.

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## How the Proposed Changes Could Impact Health Care and Community Nurses

### Reduced Access to Care for Temporary Residents

Many individuals could delay or avoid seeking necessary care due to cost barriers. Community nurses often serve as the first point of contact for individuals with chronic conditions, mental health needs, and preventive care, especially in community clinics across Edmonton.

Added financial hurdles for patients could lead to increased severity of health issues by the time care is sought; place additional burden on nurses to manage more complex and advanced cases; and increase emergency department presentations for conditions that could have been prevented with earlier care.

### Strain on Community Health Resources

Limiting access to publicly funded services for certain residents could shift patients toward alternative access points, such as walk-in clinics or emergency services.

This could disrupt continuity of care and increase workloads as nurses seek to coordinate care across settings.

### Workforce Implications

Alberta's health care workforce includes many internationally trained nurses and health professionals who themselves hold non-permanent status during credentialing.

Policies perceived as unfriendly to temporary residents could have downstream effects on recruitment and retention, making it harder to attract qualified nurses.

### Impact on Public Health Programs

Community health initiatives — including immunization campaigns, sexual health clinics, chronic disease management, home care, and refugee health programs — rely on stable funding and universal access. Mandatory fees for certain populations could:

- Reduce participation in public health initiatives
- Limit preventive care uptake
- Complicate the ability of nurses to track and manage community health needs effectively.



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