

The Public Health Physician Workforce: Doctors in reserve but few on the front lines

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- The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

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The Public Health Doctor (Perez, 1993 depicts US Surgeon General, C. Everett Koop)



Or can just anyone declare themselves a public health doctor?



PURPOSE

- To estimate the size of the public health physician workforce
- N and proportion currently engaged in public health practice
- N and proportions who might constitute a reserve workforce in the case of a public health emergency



METHODS

- Secondary analysis of 2004 National Physician Survey (NPS)
- “Case definitions” for public health doctor:
 - Type of doctor (CMA Masterfile)
 - Area of professional activity = “Community Medicine/public health”
 - Self-reported non-medical degrees (post MD) = “core public health”
 - Self-reported certification in Community Medicine/public health



RESULTS



The image shows a screenshot of a video player window titled "RealOne Player". The address bar displays "SARS:Global Outbreak Hits Home 1:05:00". The video content features a woman, identified as Sheela V. Basrur, MD, Medical Officer of Health at Toronto Public Health. The background of the video shows the Toronto Public Health logo. The video player interface includes standard controls: play/pause, stop, previous, next, a progress bar, and a volume slider.

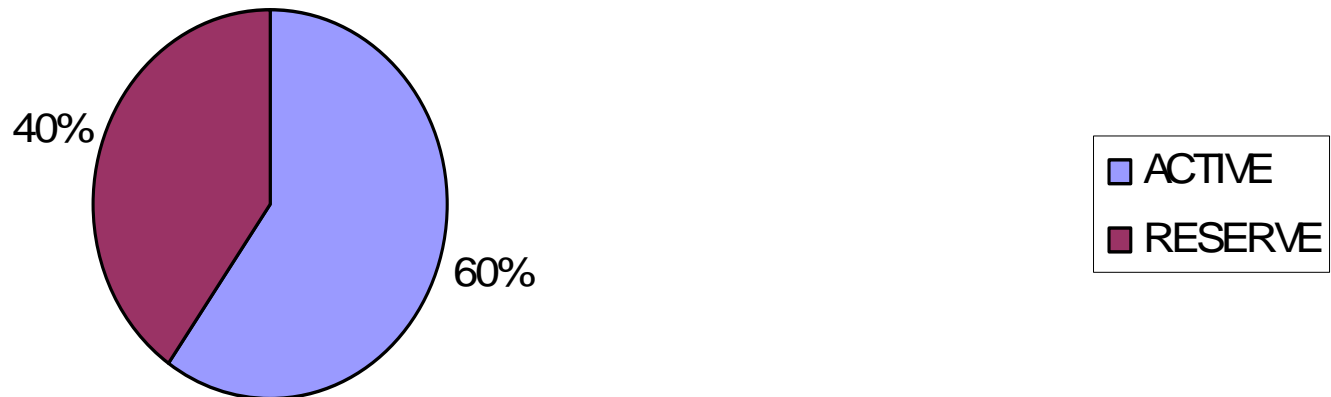
To view this program
please click on the link below.



TYPE OF DOCTOR = CM/public health

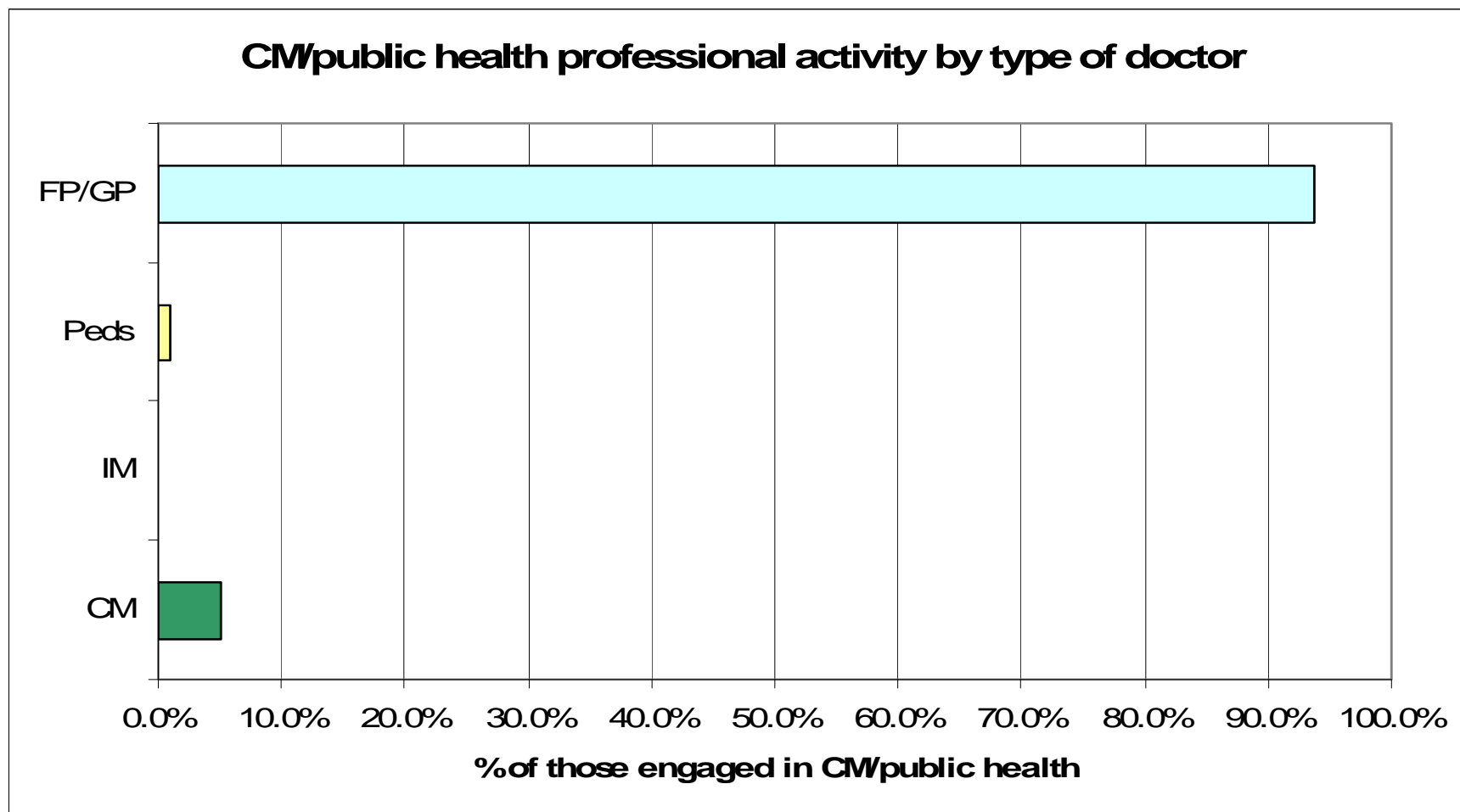
154 respondents (1.2%) ⇒ 429 adjusted for response

Reserve & active workforce: CMAfile "CM/public health"



Community medicine/public health as an area of professional activity

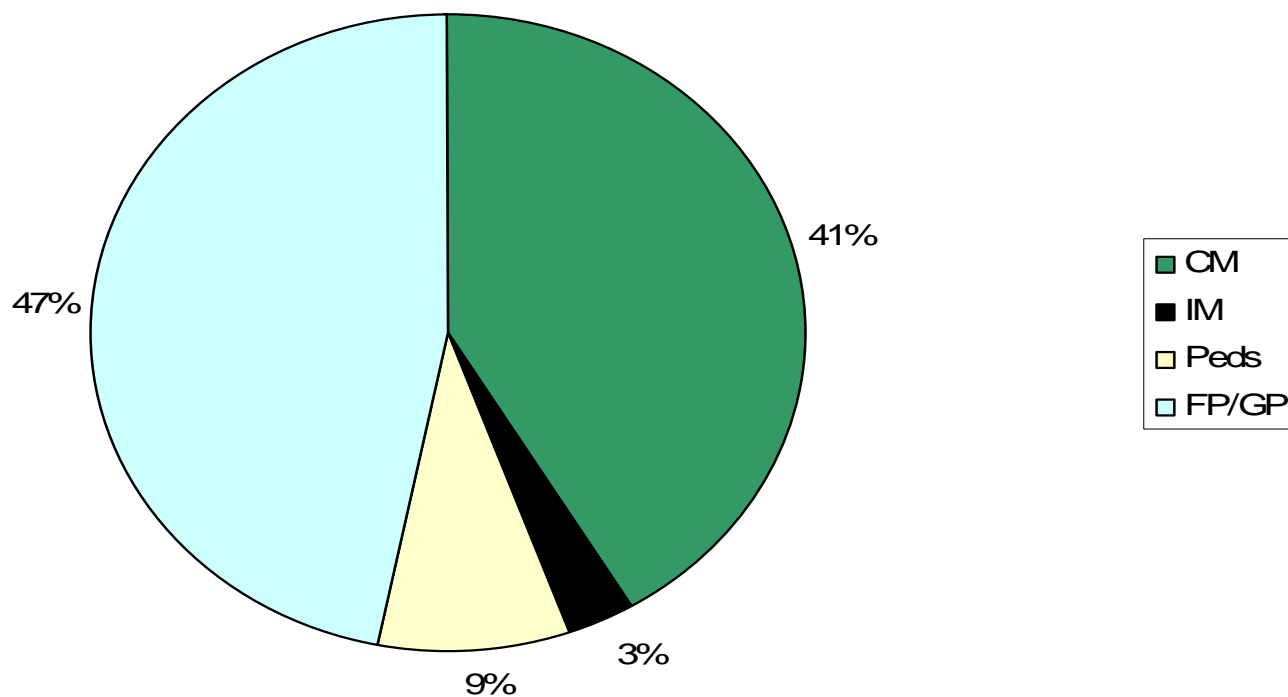
ACTIVE WORKFORCE: 1804 respondents (14.1%) ⇒ 5032 adjusting for response rate



Degree or certification in public health

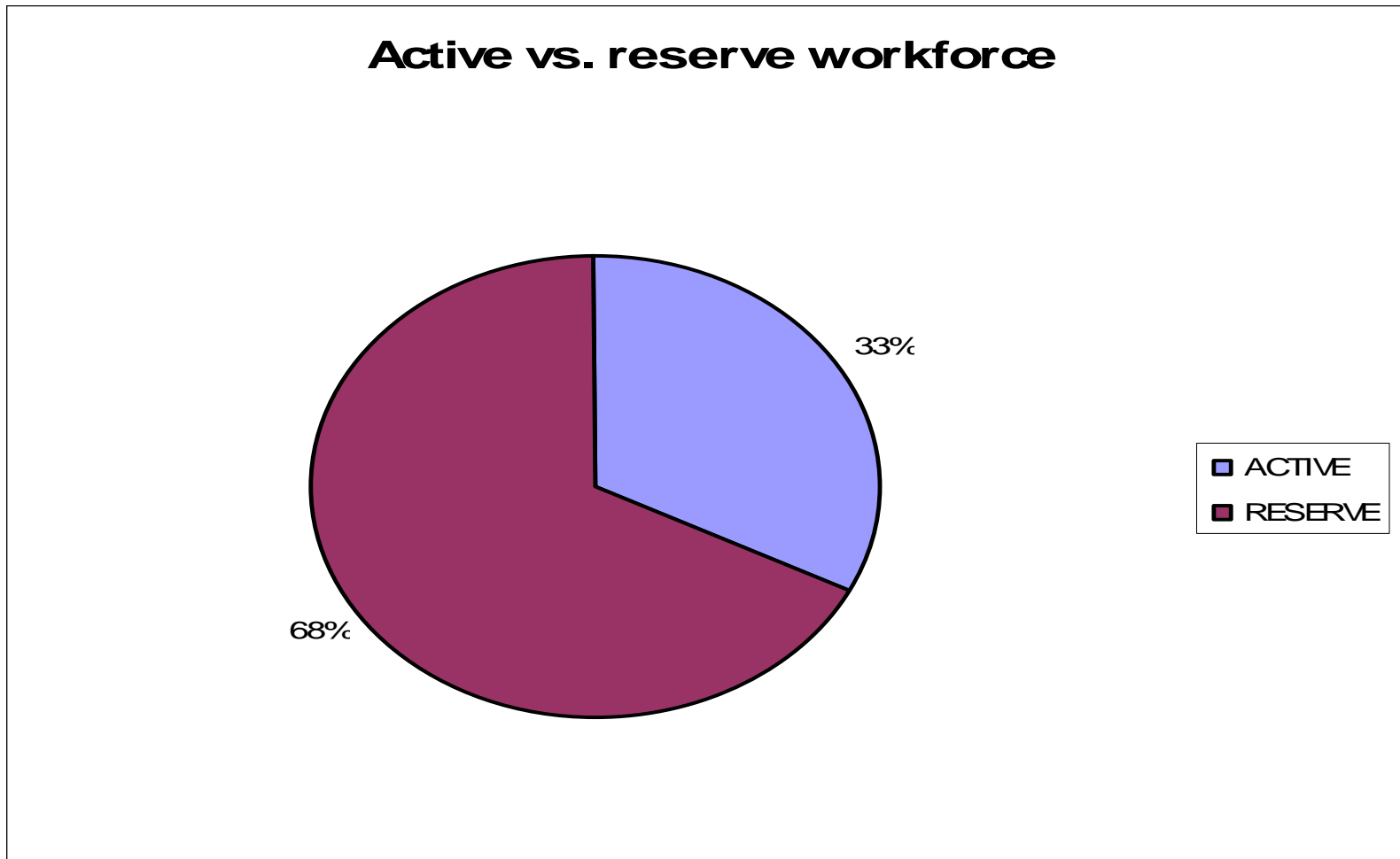
240 respondents (1.8%) ⇒ 669 adjusted for response

Breakdown by CMA type of doctor



Qualified to practice public health: active vs. reserve (all doctors)

240 respondents (1.8%) ⇒ 669 adjusted for response



ACTIVE VS. RESERVE WORKFORCE ADJUSTED FOR RESPONSE RATES

ACTIVE

256 – 5032

Min = CM practicing public health (weighted)

Max = All MD self-reporting CM/public health

RESERVE

172 - 451

Min = non-practicing CM (weighted)

Max = All non-practicing qualified MDs



DISCUSSION

- Does “Community medicine/public health” as an area of professional activity mean the same thing to all doctors? (i.e., Does interpretation vary by CMA Masterfile “type of doctor”?)
- Active qualified public health workforce small
- Qualified reserve workforce small
- Most self-reported practitioners of public health do not appear to have relevant qualifications!



CONCLUSION

- Canada must not be complacent that it has a qualified public health physician workforce either currently working in public health practice or available to be called upon in the case of a public health emergency.
- Further attention should be taken to capture our true public health physician needs for today and in the case of the next public health emergency.

