Some additional evidence supporting the claim that Canadians would be better off, on balance, if the supply of physicians’ services relative to the population increased is provided by the relatively long wait times Canadians endure for access to the services of specialist physicians, as well as media reports of Canadians who are actively—and unsuccessfully—looking for a regular physician. Also relevant is a Commonwealth Fund survey of adults in 11 countries that found that only 43% of Canadian respondents reported that they were able to get a same day or next-day appointment with a doctor or nurse when they needed medical attention—the lowest rank among all countries surveyed.

To be sure, some experts argue that a recent growth in domestically and foreign-trained physicians in Canada will reduce or even reverse Canada’s seeming relative scarcity of physicians. This study provides a forecast of the number of physicians (including residents) per 1,000 population for Canada out to the year 2030 to assess whether, given a continuation of recent trends in the main factors that determine the supply of physicians, as well as estimates of population growth, the ratio of physicians to population will increase for Canada. Our main finding is that given current trends in medical school enrollments, the projected supply of Canadian-trained physicians will only result in a small increase in the physician-to-population ratio—rising from 2.74 physicians per thousand population in 2015 to 2.84 in 2030. Furthermore, even if the supply of foreign-trained physicians continues to follow the trend of the last five years, the ratio will only improve from 2.74 physicians per thousand population in 2015 to 2.97 in 2030.
To put these projections into perspective, the present-day ratio of physicians per thousand population for OECD countries equals 3.4, an average that might well increase in the future. Expected demographic changes, particularly the changing gender and age profiles of the physician workforce, may also result in fewer hours worked by physicians. While this might also be the case for other OECD countries, it will worsen access to physicians’ services in Canada. An aging population is likely to further exacerbate access problems.

The broad policy implication of this study is that reforms and innovations in the delivery of medical services should be a public-policy priority, as a continuation of the status quo will leave Canadians with less access to physicians’ services than is arguably desirable. The study suggests a number of policy initiatives for consideration, primarily affecting supply conditions for health-care services, that might help address what our forecast identifies as a continuing shortfall of physicians’ services.

Canada continues to lag behind other OECD countries in physician supply, despite efforts to add more doctors.

Physicians per 1,000 population, 2000–2030

OECD average (2015)

Projected supply in Canada, with immigration

Historical supply of physicians in Canada