DOCTORS

Access to high-quality health services depends crucially on the size, skill mix, geographic distribution and productivity of the health workforce. Health workers, and in particular doctors and nurses, are the cornerstone of health systems.

Many OECD countries are concerned about current or looming doctor shortages. Forecasting the future supply and demand of doctors is difficult, because of uncertainties concerning overall economic growth, changes in physician productivity, advances in medical technologies, changing roles of physicians versus other care providers, as well as changes in the health needs of the population.

Definition

Practising physicians are defined as the number of doctors providing care to patients. General practitioners include

Overview

In 2009, there were just over three doctors per 1 000 population across OECD countries. Greece had by far the highest number of doctors per capita, followed by Austria, Chile, Turkey, Korea and Mexico had the lowest number, with between one and two doctors per 1000 population. The number of doctors per capita is lower in some of the major emerging economies, with less than one doctor per 1000 population in Indonesia, India and South Africa

From 2000 to 2009, the ratio of practising physicians per 1 000 population has grown in most OECD countries. On average across OECD countries, physician density grew at a rate of 1.7% per year. The growth rate was particularly rapid in countries which started with lower levels in 2000 (Turkey, Chile, Korea and Mexico) as well as in the United Kingdom and Greece. There was no growth in the number of physicians per capita in Estonia, France, Israel and Poland, and there was a marked decline in the Slovak Republic. The decline in the Slovak Republic can be explained at least partly by a reduction in the number of medical graduates since the late 1990s. In France, following the reduction in the number of new entrants into medical schools during the 1980s and 1990s, the number of doctors per capita began to decline since 2006. This downward trend is expected to continue.

In 2009, 43% of doctors on average across OECD countries were women, up from 29% in 1990. This ranged from highs of more than half in central and eastern European countries (Estonia, Slovenia, Poland, the Slovak Republic, the Czech Republic and Hungary) and Finland to lows of less than 20% in Korea. The share of women physicians increased in all OECD countries over this time period with particularly high increases in the United States, Spain and Denmark.

The balance in the physician workforce between general practitioners and specialists has changed over the past few decades, with the number of specialists increasing much more rapidly. Although health policy and research emphasises the importance and cost-effectiveness of generalist primary care, on average across OECD countries, general practitioners made up only a quarter of all physicians in 2009. There were more than two specialists for every general practitioner in 2009, while this ratio was one-and-a-half in 1990. Specialists greatly out-number generalists in central and eastern European countries and in Greece. However, some countries have maintained a more equal balance between specialists and generalists, such as Australia, Canada, France, and Portugal, where generalists made up nearly half of all doctors. In some countries, for example in the United States, general internal medicine doctors are categorised as specialists although their practice can be very similar to that of general practitioners, resulting in some underestimation of the capacity of these countries to provide generalist care.

doctors assuming responsibility for the provision of continuing care to individuals and families, as well as other generalist/non-specialist medical practitioners. Specialists include paediatricians, obstetricians/gynaecologists, psychiatrists, medical specialists and surgical specialists. Other physicians include interns/residents if not reported in the field in which they are training, and doctors not elsewhere classified. The numbers are based on head counts.

Comparability

In several countries (Canada, France, Greece, Iceland, Ireland, the Netherlands, and Turkey), the data include not only physicians providing direct care to patients, but also those working in the health sector as managers, educators, researchers, etc. This can add another 5-10% of doctors. Data for Portugal refer to all physicians who are licensed to practice (resulting in a large overestimation). Data for Spain include dentists and stomatologists, while data for Belgium include stomatologists. Data for Chile include only doctors working in the public sector.

Not all countries are able to report all their practising physicians in the two broad categories of specialists and generalists. For example, specialty-specific data may not be available for doctors in training or for those working in private practice.

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DOCTORS

Practising physicians

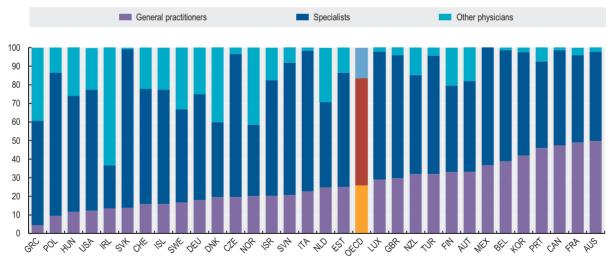
Per 1 000 inhabitants



StatLink http://dx.doi.org/10.1787/888932508034

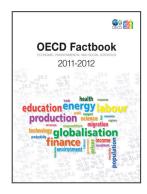
Distribution of physicians

As a percentage of total physicians, 2009 or latest available year



StatLink http://dx.doi.org/10.1787/888932508072

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