

Trends among specialist physician unemployment in Canada: gaining understanding of this new phenomenon

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Purpose of study

Evidence persists of employment challenges among some newly certified medical specialists in Canada. This multi-objective, longitudinal study seeks, among others, to identify existence of any trends among disciplines where employment challenges are reported.

Methods

Quantitative data has been collected since 2011 through an online survey administered to every specialist and subspecialist certified by the Royal College of Physicians and Surgeons of Canada, the national certifying body for all medical and surgical disciplines other than family medicine and associated areas of added competence (year 2011 N=2002, year 2012 N=2231, year 2013 N=2346 with response rates of 33%, and 32% and 40% respectively; 2014 data collection for subspecialists ongoing). The survey instrument is designed to identify the employment status of newly certified specialists and subspecialists, the disciplines among which new certificants are reporting employment problems, and the reasons why job seekers report they can't find work.

Key findings

Three years of data collection reveals consistent trends among the percentage of newly certified specialists and subspecialists reporting they have not found employment and the disciplines where employment challenges are most prevalent. Overall, between 14% and 18% of new certificants report not having secured a job posting 6-24 weeks after confirmation of certification in their field (2011: 14%; 2012: 18%; 2013: 18%). Most impacted disciplines continue to be those which are resource-intensive, requiring specialized infrastructure, resources and personnel: cardiac surgery, hematological pathology, nuclear medicine, neurosurgery, orthopedic surgery, otolaryngology, obstetrics and gynecology, radiation oncology and urology. Between 20% and 66% of new certificants in these disciplines reported having "no job placement", with some year-over-year variation. Interestingly, collected data shows one marked change among anesthesiologists reporting employment challenges, down to 2% in 2014 from 20% in 2011.

Implications

Data collection to date has identified patterns related to disciplines experiencing employment challenges. Ongoing data collection will validate these patterns, changes over time and the length of time to secure employment. Such information will help inform future specialists and subspecialists of employment trends in various discipline, and medical workforce planning efforts.