

Health personnel

5.6

In terms of function, numbers and visibility, nurses and physicians may be seen as particularly significant categories of health personnel. However, because of increasing complexity of health care and a growing concern of efficiency in health services, other occupations have multiplied in number, size and importance in recent years. Tables 5.20, 5.21 and 5.22 present selected information on health personnel in Canada. Table 5.20 includes figures for interns and residents and those involved in administration, teaching, and research, as well as those in the clinical practice of medicine.

As of December 1976, there were 40,130 active civilian physicians in Canada. More important than the total number of physicians is the population/physician ratio. There is a greater concentration of the most highly qualified health personnel in urbanized areas. In 1976, the population/physician ratio ranged from 546 residents per physician in Ontario to 1,303 in the Northwest Territories. Nationally, this ratio has improved each year since 1966, reaching a level of 578 persons per active physician in 1976. This improvement has been particularly noteworthy in some of the less heavily populated provinces.

As of December 1976, there were 137,858 registered nurses working in Canada. In viewing the ratio of population to registered nurses, there is a range from 147 residents per RN working in Ontario, Manitoba and Nova Scotia to 234 in the Yukon Territory. These figures indicate that even the sparsely populated areas of Canada have good access to nursing personnel. Data are presented in Table 5.21.

The scope of health occupations in Canada is illustrated by Table 5.22. In addition to physicians and registered nurses, there were 157,948 persons listed in other health occupations in 1976. The importance of a wide range of professional, semi-professional and support occupations is reflected in the number of groups which have formed national associations. Provincial authorities have established registration and regulatory bodies for a number of health occupations.

Government expenditure

5.7

During the six-year period 1969-74, collective federal, provincial and local government expenditure on health more than doubled, expanding from \$3,474.0 million to \$7,357.5 million. When adjusted for population growth, per capita expenditure on health was almost twice as much in 1974 as in 1969, namely \$328 compared with \$165. The proportion of all levels of government expenditure on health, net of intergovernment transfers, in relation to total government expenditure, was about the same in 1974 as in 1969, at 12.4%. When only the year-to-year trend is considered, all governments' collective expenditure on health increased by \$1,288.1 million between 1973 and 1974, compared with an increase of \$591.4 million between 1972 and 1973.

Consolidated provincial-municipal expenditure on health, including outlays financed through federal government transfer payments, experienced a growth comparable to that described above. However, health expenditure is relatively more important in total provincial-municipal expenditure than is the case when all three levels of government are considered; for instance, in 1974 it was 20.3% at the provincial-municipal level, compared with 12.4% for all levels of government as an entity. Table 5.23 gives the relevant statistics.

Sources

5.1 - 5.6 Policy Development and Co-ordination Directorate, Health Programs Branch, Department of National Health and Welfare; Health Division, Institutional and Public Finance Statistics Branch, Statistics Canada.

5.7 Public Finance Division, Institutional and Public Finance Statistics Branch, Statistics Canada.