



PUBLIC/POPULATION HEALTH GRADUATES FROM CANADIAN FACULTIES OF MEDICINE, 2004-2014

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Health workforce optimization assumes an adequate supply of needed health workers. Saturation of employment opportunities of MPH grads may reflect an under-developed system and/or over-productive educational system. It may result in underutilized MPH skills in the health workforce.

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PURPOSE/OBJECTIVES

This paper examines trends in graduation rates from Masters of Public Health (MPH) and PhD programs in Public/Population Health in Canadian Faculties of Medicine from 2004-14, the decade following the Naylor (2003) Report on the SARS crisis

FINDINGS/IMPACT/OUTCOMES

The indexed growth in both MPH and PhD degrees in population/public health doubled from 2004-14. There was a particularly dramatic increase in the number of MPH graduates totaling nearly one third of graduates of all Masters programs in Faculties of Medicine. The number of PhD graduates in this same time frame is lower – roughly 10% of all doctoral graduates. Although graduates of programs in Public/Population Health are not all destined for academic careers, it is notable that during this same time period there was little growth in the number and percentage of faculty positions in Population and Public Health. Indeed, there has been an approximately 50% reduction in the ratio of faculty to PhD graduates.

CONCLUSIONS

These data have important implications for health human resource planning in the public health sector, but also for the broader population and public health research and training enterprise. It is unclear whether the number of MPH graduates in particular can be absorbed by the public health infrastructure in Canada, and if so, whether their full skills will be utilized.