The Conference Board of Canada
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The Market Profile of Physiotherapists in Canada.

At a Glance

- Physiotherapist employment has risen sharply over the past few years—at the end of 2014 there were approximately 20,130 physiotherapists employed in Canada.
- Physiotherapists represent just over 16 per cent of the larger rehabilitation and mobility market in Canada, which includes professions focusing on improving quality of life or on achieving functional independence of Canadians.
- The number of Canadians who have consulted a physiotherapist has been steadily increasing across Canada, although the average number of visits per patient has been trending downward.
- There is not an abundant supply of physiotherapists to satisfy a dramatic rise in demand; the unemployment rate among physiotherapists was 0.3 per cent in 2014.
- About 90 per cent of Canada's physiotherapists are employed in an urban area, and there are significant challenges in recruiting physiotherapists to non-urban centres.

BRIEFING MARCH 2017

Executive Summary

As the demand for health care grows in Canada, delivering high-quality, effective, and sustainable services is a top priority and one of the most pressing challenges facing governments and businesses. Physiotherapists have an important role to play in addressing these challenges by promoting active lifestyles and rehabilitation for both seniors and the general population, thus contributing to optimizing health system performance.

Physiotherapy has demonstrated effectiveness in all areas of practice by increasing quality of life, improving various health outcomes, and decreasing hospital length of stay and future health care use among patients. Physiotherapists can also contribute to creating a more efficient health care system through a focus on primary care, injury prevention, and rehabilitation.

While physiotherapist employment has risen sharply over the past few years, there has also been a shift in physiotherapy service delivery from hospitals to community-based providers. As such, the area of practice for physiotherapists in most provinces/territories is divided between general practice and musculoskeletal practice. Provinces with a younger total population tend to have a higher share of physiotherapists employed in musculoskeletal practice. Conversely, jurisdictions with a larger share of population above 50 years of age generally have the highest proportion of physiotherapists employed in general practice. More often than not, these provinces also have a larger share of physiotherapists employed in hospitals.

Even though physiotherapy is a key part of all sectors of health care, it forms part of a larger rehabilitation and mobility market in Canada. This market is a complex system whereby patients and clients interact with health professionals to assist with activities involved in daily living, participate in exercise or sport, improve quality of life, or achieve

Physiotherapy is positioned as a strong player that complements the range of health services to enhance the mobility of Canadians.

functional independence. Massage therapists make up the largest share of the market, with physiotherapists representing more than 16 per cent and physiotherapist assistants roughly 9 per cent.

The number of Canadians who have consulted a physiotherapist has been steadily increasing in Canada, going from 2.16 million (8.4 per cent of the adult population) in 2001 to 3.49 million (11.6 per cent of the adult population) in 2014. Although growth in the supply of physiotherapists has also been strong, this has normally occurred in the urban areas of Canada's most populated provinces. But elsewhere, a physiotherapist shortage is looming, especially in the Atlantic provinces and in the rural and remote areas of all provinces. All in all, the unemployment rate of the physiotherapy profession was 0.3 per cent in 2014, so there is not a surplus of physiotherapists to ease the rising demand and exhausted supply in some areas of the country.

The sizable market share of physiotherapists and the steady growth in consultations suggest there is strong representation for physiotherapy nationally. The profession has benefited from the liberalization of the market in the early 2000s, which increased access for patients in the private sector. However, while there is competition in the market, physiotherapy is positioned as a strong player that complements the range of health services to enhance the mobility of Canadians. The main challenge going forward is how access to physiotherapy can be improved for those that need it most.

Introduction

With the growing demand for health and health care in Canada, there is concern about the sustainability of the health care system and the ability to meet Canadians' health care needs. Delivering high-quality, effective, and sustainable services is a top priority and one of the most pressing challenges facing governments and businesses as they look to balance health care service demands and costs in the context of an aging population.

The Role of Physiotherapy in Canada Research Series

This research series includes three reports that aim to address each of following objectives:

1. provide a general understanding of the role of physiotherapy within the Canadian health care system and serve as a primer to the subsequent reports;
2. provide a market analysis of the physiotherapist profession;
3. identify opportunities for physiotherapists in the context of changing population needs, with a focus on seniors' services, particularly in home and continuing care.

The aging population has a direct impact on the increase in the number of Canadians who could potentially benefit from physiotherapy services. Indirectly, the rise in life expectancy rates makes interventions in this field even more relevant, since they improve the quality of life of elderly people for an increasingly larger proportion of their life.

The Conference Board research series *The Role of Physiotherapy in Canada* aims to provide an understanding of the value of physiotherapists today and in the future, taking into account changing demographics and opportunities for physiotherapists to promote healthy active living (exercise and mobility) in primary care as part of a family health team.

The first report in this series, *Contributing to a Stronger Canadian Health Care System*, provides an understanding of the role of physiotherapists within the Canadian health care system. The purpose of this briefing is to present a profile of the physiotherapy market in Canada, as well as quantify the demand and supply of physiotherapy services. This will be achieved not only by looking at physiotherapy employment, but also by examining areas of practice, physiotherapy demand, access to physiotherapists, and potential shortages in the market. Although some of the findings are similar to those outlined in the first report, this briefing expands on those findings.

Under the supervision of a physiotherapist, PTAs may deliver treatment and physical interventions.

Background

Physiotherapists are self-regulated, primary health care professionals who aim to prevent, assess, and treat the impact of injury, disease, and/or disorders in movement and function. They work in private and public settings, providing health interventions as well as management, education, research, and consultation services.[1]

Becoming a physiotherapist in Canada requires completion of a master's-level university degree in an accredited physiotherapy program. Successful completion of 1,025 supervised clinical practice hours is also required, as is the successful completion of the national Physiotherapy Competency Examination (except in Quebec, which has its own assessment process, and parts of New Brunswick where physiotherapists from Quebec universities can follow Quebec's assessment process). Following this, the qualified physiotherapist must register with a provincial or territorial regulatory organization and maintain the competency to practise based on the provincial/territorial regulatory requirements.[2] The scope of practice for physiotherapists is articulated in provincial/territorial regulatory legislation, which outlines the range of responsibilities of their professional practice.

Under a care plan established by and under the supervision of a physiotherapist, physiotherapist assistants (PTAs) may also deliver treatment and physical interventions for patients and clients.[3] Although PTAs are not regulated by a provincial/territorial body, they are eligible to join the National Physiotherapist Assistant Assembly of the Canadian Physiotherapy Association, which advocates on behalf of physiotherapist assistants. Because PTAs are not governed by a regulatory body, they must work under the supervision of a physiotherapist, who accepts responsibility and accountability for the PTA.

In Quebec, physical rehabilitation therapists (PRTs) complete a three-year college degree and are registered professionals in Quebec. PTAs complete a two-year college program in physical rehabilitation therapy

1 Canadian Physiotherapy Association, *Physiotherapy in Canada*.
2 Canadian Institute for Health Information, *Physiotherapists*.
3 Nova Scotia Physiotherapy Association, *Physiotherapy Assistants*.

or a two-year PTA program and supervised practical training. In most provinces, PTAs receive training through a dual occupational therapist assistant/physiotherapist assistant (OTA/PTA) program in a community college or private college.[4]

Data and Sources

Estimating the characteristics of the physiotherapy market requires a synthesis of data from a range of sources, including the Canadian Institute for Health Information (CIHI) and Statistics Canada. The Health Workforce Database, maintained by CIHI, includes information for 30 groups of health care professionals in Canada. The data are submitted to CIHI by national professional societies and associations, provincial/ territorial regulatory bodies and governments, and educational institutions.

To increase the availability of standardized value-added information for health human resources, CIHI has developed five new national supply-based databases for detailed professional groups within the Health Workforce Database. The Physiotherapist Database (PTDB) is one of these newly developed databases, making available a new source of timely, quality information about physiotherapists in Canada. The PTDB aims to provide standardized comparative data and reports on the demographic, education, geographic, and employment information of all physiotherapists in Canada. The data for the PTDB are supplied by the 10 provincial physiotherapy regulatory bodies and the Government of Yukon, which are responsible for data collection. As a result, in the PTDB, physiotherapists are defined as those who are registered and/ or licensed or otherwise part of the available health workforce within the specific jurisdiction. For the Northwest Territories and Nunavut, physiotherapists must register with one of the other provincial/territorial regulatory bodies, normally in Alberta and British Columbia.[5]

An additional source of data is the Labour Force Survey (LFS), administered monthly by Statistics Canada. This survey provides

4 Statistics Canada, *National Occupational Classification*.

5 Canadian Institute for Health Information, *Physiotherapist Database Manual*.

In the NOC, occupations are identified and grouped according to work usually performed.

estimates of standard Canadian labour market indicators such as the level of employment, the unemployment rate, and the participation rate, among others. The LFS also provides employment estimates by industry and occupation, broken down by a variety of demographic characteristics. Estimates are produced for Canada, the provinces, the territories, and a large number of sub-provincial regions. The LFS covers the civilian, non-institutionalized population 15 years of age and over. Excluded from the survey's coverage are persons living on reserves and other Aboriginal settlements in the provinces, full-time members of the Canadian Forces, the institutionalized population, and households in extremely remote areas with very low population density.[6]

The main difference between the PTDB and the LFS is the definition of a "physiotherapist." The PTDB includes all physiotherapists registered in Canada, defined by the 10 provincial physiotherapy regulatory bodies and the Government of Yukon. Conversely, the LFS is a survey of approximately 54,000 Canadian households, whose self-reported results are used to estimate physiotherapy employment in Canada. In the LFS, the definition of a physiotherapist is based on the National Occupational Classification (NOC), a framework developed by Human Resources and Skills Development Canada and Statistics Canada. In the NOC, occupations are identified and grouped according to work usually performed, such as tasks, duties, and responsibilities of the occupation.[7] (See "Physiotherapy and the National Occupational Classification.") Although there is a unique occupational classification for physiotherapists, a unique occupational classification for physiotherapist assistants does not exist in the NOC. Consequently, physiotherapist assistants are combined with similar occupations.

Another data source in this briefing is the National Physician Survey, which is a collective effort of The College of Family Physicians of Canada (CFPC), the Canadian Medical Association (CMA), and the Royal College of Physicians and Surgeons of Canada (Royal College). Data were also retrieved from Statistics Canada's National Household Survey (NHS), Canadian Community Health Survey (CCHS), and Job

6 Statistics Canada, *Labour Force Survey*.

7 Statistics Canada, *National Occupational Classification*.

Vacancy and Wage Survey (JVWS). In 2011, the NHS replaced the traditional long-form questionnaire as part of the census of Canada. The NHS was a voluntary survey considered less reliable than the long-form questionnaire, although the data are considerably more dependable at the national and provincial levels. Meanwhile, like the Labour Force Survey, the CCHS is administered to 65,000 Canadians annually and asks questions related to the health status, health care utilization, and health determinants for the Canadian population. Finally, the JVWS is a new quarterly survey providing comprehensive information on job vacancies by detailed occupations for Canada. The JVWS responds to key labour market information needs by providing critical data on current and emerging labour market demand and is the largest survey on job vacancies ever conducted by Statistics Canada.[8]

Physiotherapy and the National Occupational Classification

3142—Physiotherapists

Physiotherapists assess patients and plan and carry out individually designed treatment programs to maintain, improve, or restore physical functioning, alleviate pain, and prevent physical dysfunction in patients. Physiotherapists are employed in hospitals, clinics, industry, sports organizations, rehabilitation centres, and extended care facilities, or they may work in private practice.

Physiotherapists may focus their practice in particular clinical areas such as neurology, oncology, rheumatology, orthopaedics, obstetrics, pediatrics, and geriatrics; in the treatment of patients with cardiovascular and cardiopulmonary disorders, burns, or sports injuries; or in the field of ergonomics. A university degree in physiotherapy and a period of supervised practical training are required. A licence or registration with a regulatory body is required to practise physiotherapy in all provinces and territories. Completion of the national Physiotherapy Competency Exam, administered by the Alliance of Physiotherapy Regulatory Boards, is required in all jurisdictions, with the exception of Quebec and parts of New Brunswick.

8 Statistics Canada, *Job Vacancy and Wage Survey*.

3237—Other technical occupations in therapy and assessment

This unit group includes workers, not elsewhere classified, who perform various technical therapy and assessment functions. Some may assist professionals such as audiologists, speech-language pathologists, ophthalmologists, physiotherapists, and occupational therapists. They are employed in hospitals, clinics, extended care facilities, rehabilitation centres, educational institutions, and in the private practices of the professionals they assist. Physiotherapy assistants and occupational therapy assistants, under the direction of physiotherapists and/or occupational therapists, carry out treatment programs such as thermotherapy, traction, hydrotherapy, and electrotherapeutic techniques to rehabilitate patients with various injuries or disabilities to maximize their ability to independently manage daily activities.

More information on physiotherapy and the National Occupational Classification can be found at: www23.statcan.gc.ca/imdb/p3VD.pl?Function=getVDPage1&db=imdb&dis=2&adm=8&TVD=122372.

Source: Statistics Canada, *National Occupational Classification (NOC) 2011.*

Physiotherapist Employment

Physiotherapists have a university-based education that provides a foundation of modern science for the profession. Post-graduate certifications relevant to the profession are also available at many universities. Fifteen universities in Canada offer a fully licensed physiotherapy program. These are:

- Dalhousie University
- McGill University
- Université de Montréal
- Université de Sherbrooke
- Université Laval
- Université du Québec à Chicoutimi
- McMaster University
- Queen's University
- University of Ottawa
- University of Toronto

Physiotherapist employment has risen sharply the past few years.

- University of Western Ontario
- University of Manitoba
- University of Saskatchewan
- University of Alberta
- University of British Columbia

Although these programs have a training capacity of about 1,000 students, 789 new physiotherapists graduated from these programs in 2011—87 per cent from a master's of physiotherapy program that is generally a two-year program. But as of 2012, students enrolled in a physiotherapy program must graduate with a master's-level education before they write the national Physiotherapy Competency Examination. However, the exact number of new physiotherapists in a given year may be lower than the number of graduates due to the failure rate of the competency exam, to those who continue university to pursue another degree, or to those who move out of country.

Still, physiotherapist employment has risen sharply the past few years. At the end of 2014, there were approximately 20,130 physiotherapists employed in Canada. This represents a 3.1 per cent average annual growth rate since 2009. Broken down by region, Newfoundland and Labrador and Saskatchewan experienced the strongest annual growth in physiotherapists, at 5.5 per cent and 4.8 per cent, respectively. Meanwhile, Nova Scotia saw the slowest growth in physiotherapists during that time (1.7 per cent), with Manitoba experiencing a decline in the number of physiotherapists since 2009. Table 1 and Chart 1 show the regional breakdown of physiotherapists across Canada. As a proportion of the population, British Columbia has the most physiotherapists (6.86 per 10,000 adult population), followed by Nova Scotia and New Brunswick at 6.48 per 10,000 adult population. Saskatchewan and Alberta are also above the Canadian average of 5.66 per 10,000 adult population. The proportion of physiotherapists is lowest in Newfoundland and Labrador and Prince Edward Island. Compared with the provinces, Yukon is a special case; there are only 36 PTs in the territory (9.73 per 10,000 adult population), and they are all located in Whitehorse but serve the whole territory.[9]

9 Canadian Institute for Health Information, *Physiotherapists, 2014*.

Table 1

Physiotherapist Workforce in Canada

(number)

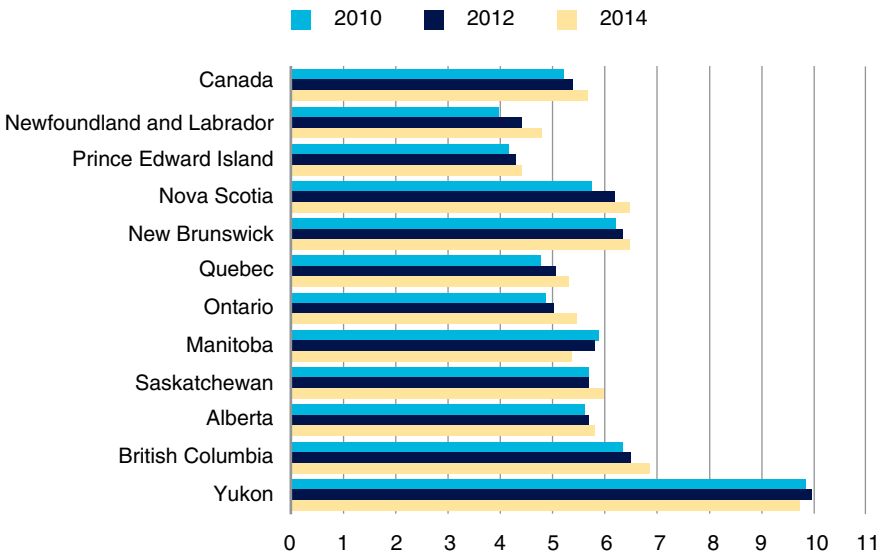
	2009	2010	2011	2012	2013	2014
Canada	17,312	17,738	18,078	18,725	19,253	20,134
Newfoundland and Labrador	194	207	223	232	242	254
Prince Edward Island	54	59	62	75	64	—
Nova Scotia	562	542	571	584	594	611
New Brunswick	447	467	462	479	475	489
Quebec	3,758	3,793	3,828	4,079	4,175	4,358
Ontario	6,391	6,389	6,529	6,735	6,950	7,454
Manitoba	693	719	728	726	674	688
Saskatchewan	530	598	622	618	653	671
Alberta	1,997	2,097	2,138	2,211	2,310	2,389
British Columbia	2,651	2,833	2,879	2,950	3,081	3,184
Yukon	35	34	36	36	35	36

Source: Canadian Institute for Health Information.

Chart 1

Physiotherapist Workforce

(per 10,000 population)



Sources: Canadian Institute for Health Information; Statistics Canada.

Just over 75 per cent of all physiotherapists are female, which is consistent across all provinces. However, males commonly hold full-time positions—about 94 per cent of males work full-time compared with only 77 per cent of females.[10] About 62 per cent of physiotherapists worked full-time in Canada in 2014, from a high of 92.5 per cent in Newfoundland and Labrador to a low of 44.4 per cent in Yukon.

Generally, a full-time equivalent (FTE) physiotherapist works between 1,500 and 1,750 hours in a year, depending on the province. But across the country, there is a large number of physiotherapists working more hours than the FTE suggest. For example, 38.1 per cent of physiotherapists in Canada worked more than 1,750 hours in 2014. Physiotherapists in Ontario and Manitoba had the highest proportion working more than 1,750 hours (43.8 per cent and 42.4 per cent, respectively) of the provinces/territories. (Quebec data were not available.)[11]

Physiotherapist Renewals

Physiotherapists are required to renew their registration every year to continue to practise. If they do not, they will need to re-apply with the provincial/territorial regulatory body if they wish to resume working as a physiotherapist. Those who newly register with the provincial/territorial regulatory body are termed as "inflow." This can represent a newly graduated physiotherapist entering the profession, an experienced physiotherapist who moved from another province/territory, or a physiotherapist who is getting back into the profession after leaving the workforce for a period of time.

The age breakdown of physiotherapist inflow reveals that, on average, about 70 per cent of the inflow of physiotherapists in Canada from 2009 to 2013 was under the age of 40.[12] This percentage can be volatile from year to year—it went as low as 52 per cent in 2012 to a high of 90 per cent the following year. The relatively young age of newly registered

10 Statistics Canada, CANSIM table 282-0154.

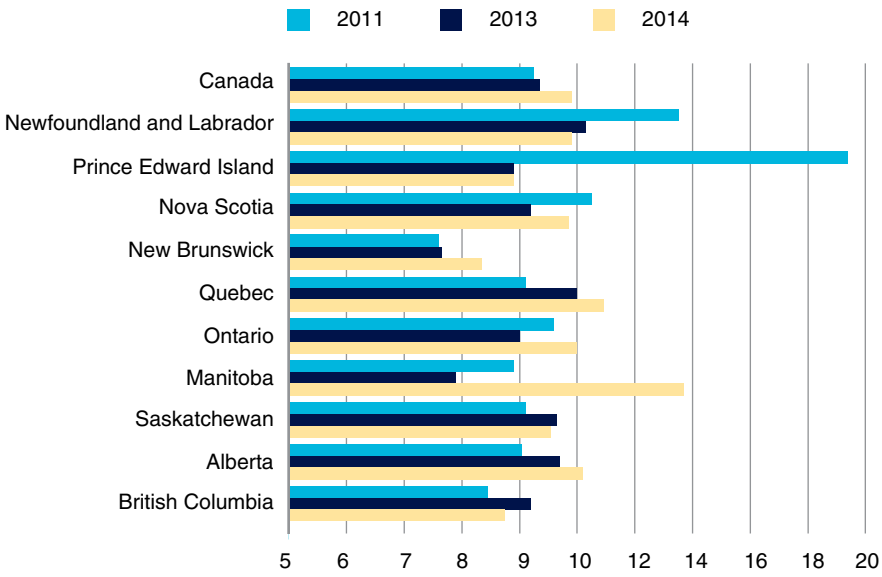
11 Canadian Institute for Health Information, *Physiotherapists, 2014*.

12 Ibid.

physiotherapists (inflow) is not surprising since it consists of new physiotherapy graduates, those returning from maternity leave, or those moving provinces for new work opportunities.

Chart 2 shows the regional breakdown of physiotherapist inflow as a share of total population. Relatively speaking, inflow was greatest in Quebec and Nova Scotia from 2009 to 2014, mostly because of a surge in inflow in 2009 and 2010 (Nova Scotia) and 2012 (Quebec) that resulted from a change to the master's program in both provinces. Across Canada, inflow generally ranges from 0.5 to 1 new physiotherapist per 10,000 population, although Prince Edward Island's inflow climbed to 2 in 2012 and Manitoba's inflow reached 1.37 in 2014. (Data for Yukon were suppressed.)[13]

Chart 2
Physiotherapist Inflow, as a Share of Total Physiotherapists
(per cent)

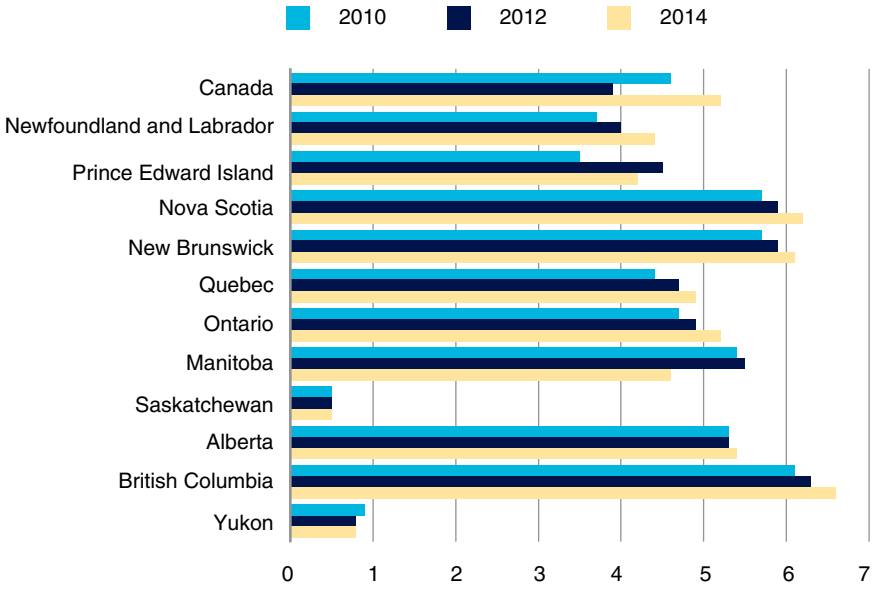


Source: Canadian Institute for Health Information.

13 Ibid.

Clearly, renewals (i.e., those who renew their physiotherapy registration) still make up the largest portion of the physiotherapist workforce. Roughly 90 per cent of physiotherapists are employed in the practice in the same province/territory as in the previous year.[14] Unfortunately, data are somewhat suppressed for Saskatchewan and Yukon, explaining the low renewals totals. (See Chart 3.)

Chart 3
Physiotherapist Renewals
(per 10,000 population)



Sources: Canadian Institute for Health Information; Statistics Canada.

Normally, renewals among those under the age of 60 make up about 90 per cent of all renewals, with the proportion of renewals among 40- to 59-year-olds (50 per cent) slightly higher than renewals among those 40 years and under (42 per cent). Even though the highest rates of inflow and outflow occur in the <40 age range, the higher average age of renewals means the average age of physiotherapists is 42.[15]

14 Ibid.
15 Ibid.

The split between physiotherapists who work in a hospital and those in professional practice is nearly even.

Meanwhile, average job tenure for the physiotherapist profession is 113 months (10 years). This is fairly consistent among males and females (104.7 months for males and 128.5 months for females).[16]

Outflow refers to the number of physiotherapists who do not renew their registration with the same provincial/territorial regulatory body as the year before. This includes those exiting the profession, those migrating out and registering in another Canadian jurisdiction or foreign country, and those going on extended leave from the profession. Similar to the inflow figures, a majority (about 60 per cent) of the outflow of physiotherapists is under the age of 40. This ratio is fairly common across all regions of Canada, except in New Brunswick, where just under 35 per cent of the outflow is under 40 years of age.

Physiotherapist Areas of Practice

For Canada as a whole, the split between physiotherapists who work in a hospital and those in professional practice (for instance, a clinic or independent practice) is nearly even, although a greater proportion is employed in hospitals. However, some regional variations exist. (See Chart 4.) For instance, the share of physiotherapists working in a hospital is highest in the east, with Quebec and Newfoundland and Labrador at about 50 per cent. In Alberta and British Columbia, the ratio of physiotherapists working in a hospital setting is much lower, at 32.2 and 25.9 per cent, respectively, while the ratio of physiotherapists in professional practice (48 per cent and 48.5 per cent in 2014) is much higher.[17] A much smaller portion of physiotherapists is employed in a community setting such as a residential care facility or community health centre. Distinctively, Ontario generally has a larger share in the "other" category, like post-secondary educational institutions, associations, government, and industry.[18]

16 Statistics Canada, CANSIM table 282-0150.

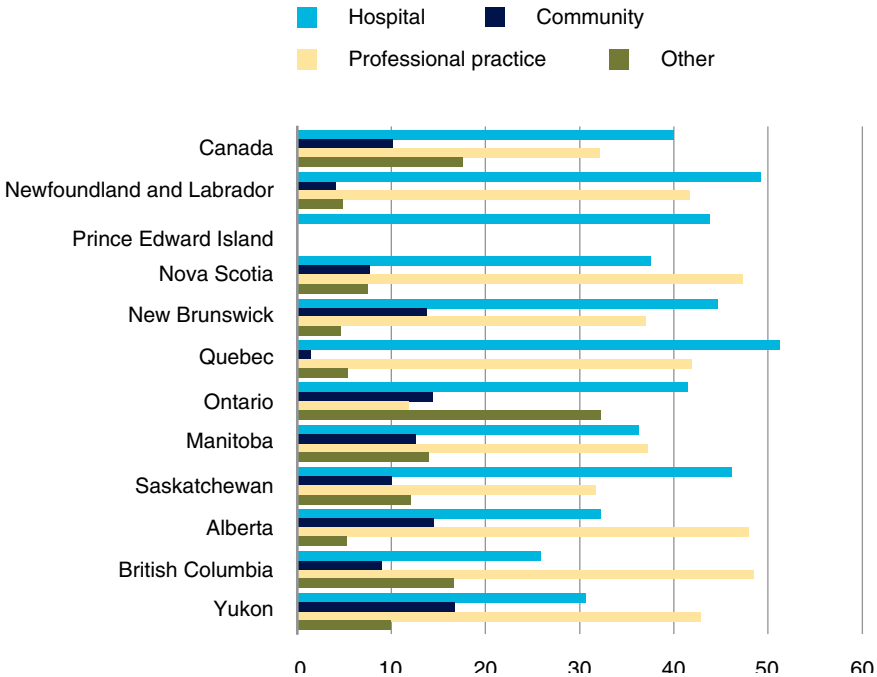
17 Canadian Institute for Health Information, *Physiotherapists, 2014*.

18 Ontario recently made changes that did not map to CIHI's reporting system, resulting in many of the places of work being transferred to "Other." This is why there was such a large shift in numbers. It appears that many PTs moved away from group professional practice to emerging workplaces, which are grouped into the "Other" category. The following are considered to be part of "Other": children's treatment centre (CTC), other pediatric facility, board of health or public health, cancer centre telephone health advisory services, spa fitness centre, other.

Chart 4

Physiotherapist Workforce, by Place of Employment, 2014

(per cent)



Source: Canadian Institute for Health Information.

In recent years, there has been a shift in physiotherapy service delivery from hospitals to community-based providers. This was originally introduced to reduce pressure on hospitals.[19] But oddly enough, physiotherapist employment in a hospital setting has actually increased in some provinces. Since 2009, Quebec and Saskatchewan have witnessed an upward trend in the proportion of physiotherapists employed in a hospital setting. In all other provinces the proportion of physiotherapists employed in a hospital setting has remained stable or trended downward.

Nationally, the breakdown of physiotherapists in the public versus the private sector (which includes self-employed) is also evenly split. But interestingly, Ontario is the only province where the public/private split

19 Canadian Institute for Health Information, *Health Care in Canada*, 2012.

matches the national average. For instance, the proportion of public physiotherapists is largest in Yukon (61.2 per cent), while the proportion of private physiotherapists is largest in British Columbia (48.2 per cent).[20]

For the purpose of illustration, Table 2 compares the breakdown of physiotherapists by sector of employment and by place of employment. Across the country, some interesting patterns emerge. For the most part, provinces with a high degree of public sector physiotherapist employment normally have a greater proportion of physiotherapists employed in hospitals (Quebec, Saskatchewan, and Newfoundland and Labrador, for example). However, there are some exceptions: Alberta and Manitoba's high degree of public employment and lower hospital employment means a greater number of physiotherapists are employed in publicly funded clinics.[21] Only Nova Scotia and British Columbia have more physiotherapists employed in the private sector than in the public sector, and at the same time a lower share employed in hospitals.

Table 2
Physiotherapists, by Sector of Employment, 2014
(per cent)

		Physiotherapist workforce			
	Ratio of public to private physiotherapists*	Hospital	Professional practice	Community	Other
Canada	45 : 44	40.0	32.1	10.2	16.6
Newfoundland and Labrador	54 : 46	49.2	41.7	4.1	–
Prince Edward Island	52 : 48	43.8	48.4	–	–
Nova Scotia	43 : 47	37.5	47.3	7.7	6.4
New Brunswick	52 : 46	44.6	37.0	13.7	4.3
Quebec	58 : 42	51.2	41.9	1.4	5.3
Ontario	41 : 43	41.5	11.9	14.4	30.7
Manitoba	54 : 40	36.2	37.2	12.6	9.2
Saskatchewan	52 : 37	46.1	31.7	10.1	6.9
Alberta	54 : 46	32.2	48.0	14.5	5.2
British Columbia	42 : 48	25.9	48.5	9.0	16.4
Yukon	58 : 31	30.6	42.9	16.7	22.2

*ratios may not sum to 100 because of missing values in the data
Source: Canadian Institute for Health Information.

20 Canadian Institute for Health Information, *Physiotherapists, 2014*.

21 Manitoba's publicly funded clinics are located in the Winnipeg area only.

What does this all mean? Each province/territory is unique in the delivery of physiotherapy services that depends on the demands and regulations for services in each province/territory. This can be the result of funding, public programs and policies, population needs, or even the use of other providers. (See the next section, "The Rehabilitation and Mobility Market.") Yukon provides a very interesting example, having a large proportion of physiotherapists employed in the public sector but a relatively low number employed in its hospital. Here, physiotherapists are employed in community and other settings funded by the territorial government.

According to the data from CIHI, the area of practice for physiotherapists in most provinces/territories is divided between general practice and musculoskeletal practice. Normally, general practice is defined as services on a range of general physical health issues, while musculoskeletal includes sports medicine, orthopaedics, rheumatology, burns and wound management, plastics, and pelvic floor. Typically, these two areas comprise 70 to 80 per cent of the physiotherapy areas of practice in most provinces and the territories. The remainder is divvied up between neurological and non-clinical practice. Neurological practice includes neurology and vestibular rehabilitation, while non-clinical practice includes client service management, consultant, administration, teaching, continuing education, other education, research, and sales.[22] Other areas of importance include multisystem in Quebec, which comprises more than 17 per cent of all provincial physiotherapists. This area of practice involves amputations, oncology, and palliative care,[23] though it is very likely the same as general practice in the rest of the country (a possible reason why general practice employment is so low in Quebec).

Generally, there is a strong relationship between area of practice and public/private sector of employment. (See Table 3.) New Brunswick and Prince Edward Island have the highest ratio of physiotherapists in general practice, and also have a greater proportion working in hospitals and in public organizations. Meanwhile, Manitoba has the lowest proportion of physiotherapists in general practice but a high degree in

22 Canadian Institute for Health Information, *Physiotherapists, 2014*.

23 Ibid.

non-clinical practice.[24] Furthermore, Alberta has the highest proportion in musculoskeletal and high numbers employed in professional practice. (See professional practice data in Table 2.) In fact, provinces with a higher proportion of physiotherapists in the private sector have a higher proportion in musculoskeletal practice and are employed in a professional practice. This is especially true for British Columbia, Nova Scotia, and Alberta.[25]

Table 3
Physiotherapists, by Area of Practice, 2014
(per cent)

	Ratio of public to private physiotherapists*	Physiotherapist workforce		
		General practice	Musculoskeletal	Other
Canada	45 : 44	32.3	39.8	27.9
Newfoundland and Labrador	54 : 46	42.9	39.4	17.7
Prince Edward Island	52 : 48	54.7	29.7	15.6
Nova Scotia	43 : 47	40.4	41.4	18.2
New Brunswick	52 : 46	54.4	35.0	10.6
Quebec	58 : 42	8.6	48.3	43.0
Ontario	41 : 43	29.7	38.5	31.8
Manitoba	54 : 40	28.8	38.8	32.4
Saskatchewan	52 : 37	29.8	38.9	31.3
Alberta	54 : 46	33.8	42.8	23.4
British Columbia	42 : 48	32.8	41.6	25.7
Yukon	58 : 31	50.0	27.8	22.2

*ratios may not sum to 100 because of missing values in the data
Source: Canadian Institute for Health Information.

There appears to be a relationship between the age distribution of the population and the area of practice for physiotherapists. Certainly, provinces with a younger total population tend to have a higher share of physiotherapists employed in musculoskeletal practice. Manitoba, Saskatchewan, and Alberta have the lowest share of the population >50 years of age and generally have a larger proportion of physiotherapists in musculoskeletal practice. Similarly, the jurisdictions where the share of population >50 years of age is greatest (New Brunswick, Prince Edward

24 Non-clinical practice included in the “Other” category.

25 Unfortunately, in Table 3, data for Quebec end in 2011 and are not included in the comparison with other provinces.

Island, and Newfoundland and Labrador) have the highest proportion of physiotherapists employed in general practice. More often than not, these provinces also have a larger share of physiotherapists employed in hospitals. (See Table 4.) Again, Yukon is an exception; its relatively young population is serviced by a larger proportion of physiotherapists categorized under general practice.

Table 4
Demographics and Physiotherapists in General Practice and Employed in Hospitals, 2014
(per cent)

		Physiotherapist workforce			
		Area of practice		Place of employment	
	Proportion of population > 50 years of age	General practice	Musculoskeletal	Hospital	Professional practice
Canada	36.8	32.3	39.8	40.0	32.1
Newfoundland and Labrador	41.7	42.9	39.4	49.2	41.7
Prince Edward Island	40.6	54.7	29.7	43.8	48.4
Nova Scotia	41.7	40.4	41.4	37.5	47.3
New Brunswick	41.8	54.4	35.0	44.6	37.0
Quebec	39.0	8.6	48.3	51.2	41.9
Ontario	36.6	29.7	38.5	41.5	11.9
Manitoba	34.3	28.8	38.8	36.2	37.2
Saskatchewan	34.2	29.8	38.9	46.1	31.7
Alberta	30.4	33.8	42.8	32.2	48.0
British Columbia	38.6	32.8	41.6	25.9	48.5
Yukon	34.3	50.0	27.8	30.6	42.9

Sources: Canadian Institute of Health Information; Statistics Canada.

The Rehabilitation and Mobility Market

Physiotherapists and physiotherapist assistants in Canada often work in interprofessional teams, where patient outcomes are driven by the work of the team rather than the performance of the individual professional. However, changes in the public and private health services sector have fueled some concerns about overlapping scopes of practice and market competition. Given the many different regulated and unregulated professionals working in health, mobility, and rehabilitation, the scope of this market is challenging to define—it includes fitness or personal trainers and exercise professionals (i.e., fitness and mobility for health and prevention), as well as orthopaedic surgeons, sports medicine

Many regulated health professionals and other care providers work in mobility or rehabilitation.

doctors, physiotherapists, kinesiologists, exercise physiologists, athletic therapists, osteopaths, chiropractors, massage therapists, and occupational therapists.

The rehabilitation and mobility market in Canada is a complex system whereby patients and clients interact with regulated and unregulated health professionals to be physically active or mobile in order to conduct activities of daily living, participate in exercise or sport, improve quality of life, or achieve functional independence. The concept of rehabilitation and mobility is vast because of the many suppliers of goods and services that sit in multiple market spaces, straddling the line of publicly funded health providers, private sector business, regulated and unregulated health professionals, and the many areas of practice of those offering physical and virtual goods and services. More easily measured is the regulated health professionals working in mobility or rehabilitation (e.g., physiotherapists, occupational therapists, chiropractors) who are registered through professional colleges, which provide a fairly accurate annual measure of workforce supply. Similarly, medical specialists, such as orthopaedic surgeons and sports medicine physicians, are included for their role in mobility and function and their collaboration with other rehabilitation professionals for the conservative management of pain, improved function, and post-surgical rehabilitation.

However, there are many other care providers that Canadians rely on for their health and mobility. For example, one would be remiss to exclude exercise physiologists, rehabilitation assistants such as physiotherapist assistants and occupational therapist assistants, massage therapists, personal trainers, kinesiologists, and athletic therapists in the measure of supply. Unfortunately, indicators for the labour force supply of this group are less defined and require a mixed-method approach that includes unregulated providers, some of which are not specific to mobility and rehabilitation.

Fortunately, efforts to define the rehabilitation and mobility market lead to the inclusion of most of the professions detailed above. Taking these into account signifies that about 117,400 health professionals are part of the market.[26] Massage therapists make up the largest share of the market

26 Canadian Institute for Health Information, *Canada's Health Care Providers*; CFPC, CMA, and Royal College, *2014 National Physician Survey*; Statistics Canada, *Labour Force Survey*.

at 22.6 per cent. This leaves physiotherapists at approximately 16.4 per cent of the market, occupational therapists at about 13.8 per cent, and chiropractors at 7.4 per cent. Of the other common mobility and rehabilitation health professions in Canada, kinesiologists and PTAs[27] each comprise approximately 9 per cent of the market nationally, with some regional variation. Meanwhile, orthopaedic surgeons and sports medicine physicians come in at just under 3 per cent.[28] (See Table 5.)

Table 5
The Rehabilitation and Mobility Market, 2014

	Mobility and rehabilitation market (number of employees)	Chiropractors (%)	Orthopaedic surgeons, sports medicine physicians, and related family physicians (%)	Physiotherapists (%)	Occupational therapists (%)	Physiotherapist assistants (%)	Massage therapists (%)
Canada	117,417	7.4	2.9	16.4	13.8	9.3	22.6
Newfoundland and Labrador	1,345	4.8	4.2	18.0	16.0	9.7	18.3
Prince Edward Island	265	3.0	4.6	24.1	20.8	11.3	9.7
Nova Scotia	3,097	4.5	3.5	19.2	15.3	7.1	21.5
New Brunswick	2,403	2.8	3.2	19.8	15.3	8.3	17.3
Quebec	27,236	4.8	3.2	15.3	15.8	6.7	25.0
Ontario	42,453	10.6	3.0	16.4	13.1	10.9	21.7
Manitoba	3,622	7.6	3.2	18.6	18.2	10.4	29.5
Saskatchewan	3,526	5.6	2.6	18.5	10.8	10.8	26.9
Alberta	15,402	6.6	2.6	15.0	12.9	9.3	25.0
British Columbia	15,564	7.4	2.9	19.8	14.1	10.8	21.1

Sources: Canadian Institute for Health Information; Statistics Canada; The College of Family Physicians Canada; Canadian Medical Association; Royal College of Physicians and Surgeons of Canada.

Taking a closer look at the market by region reveals that, on average, physiotherapists make up between 15 and 25 per cent of the rehabilitation and mobility market in all provinces. This share is highest in Prince Edward Island, due mostly to fewer massage therapists. However, this share is also higher in British Columbia, in part due to a lower number of orthopaedic surgeons and sports medicine physicians than

27 The kinesiologist and PTA figures were calculated using NOC codes 3144 and 3237, respectively, which include more than just kinesiologists and PTAs. As a result, the numbers presented are an overestimation.

28 The orthopaedic surgeons and sports medicine physicians category, the occupational therapist category, and the respiratory therapist category include family physicians whose practice is focused in sport and exercise medicine, occupational medicine, and respiratory medicine, respectively. Combined, these categories account for 10.8 per cent of all family practitioners according to the 2013 National Physician Survey.

The number of Canadians who have consulted a physiotherapist has been steadily increasing.

other jurisdictions. Meanwhile, physiotherapists make up just over 15 per cent of the market in Quebec and Alberta, which is the result of more respiratory therapists (especially in Quebec) working in those provinces than in other jurisdictions. (Alberta also has a relatively higher number of kinesiologists.)

Physiotherapist Demand

So far the focus of this briefing has been on the supply of physiotherapists in Canada. But what about demand? With the data currently available, it is difficult to get a clear representation of the need for physiotherapy services. Fortunately, the CCHS provides some insight. In this survey of 65,000 Canadians, two questions related to physiotherapy are asked: "Did you see a physiotherapist in the last 12 months?" and "How many times did you see a physiotherapist in the last 12 months?" However, there is nothing in the survey about wait times for physiotherapy and whether there are patients needing care who cannot access it, which is a shortcoming.

Nevertheless, based on the results of the survey, some interesting patterns emerge. The number of Canadians who have consulted a physiotherapist has been steadily increasing across Canada. Physiotherapist consultations have gone from 2.16 million (8.4 per cent of the adult population) in 2001 to 3.49 million (11.6 per cent of the adult population) in 2014, an increase of 3.8 per cent per year.[29,30] (See Chart 5.) By way of comparison, Canada's adult population (those 15 years of age and older) has climbed by an annual average of 1 per cent since 2001.[31] However, physiotherapist employment rose by an identical 3.8 per cent average over the same period.[32] So for Canada as a whole, the employment growth of physiotherapists has kept pace with the increase in physiotherapist visits.[33]

Further analysis reveals that the strongest rates of physiotherapist employment growth are in regions with the smallest increase in

29 Statistics Canada, *Canadian Community Health Survey*, 2003.

30 Statistics Canada, *Canadian Community Health Survey*, 2014.

31 Statistics Canada, CANSIM table 051-0001.

32 Statistics Canada, CANSIM table 282-0142.

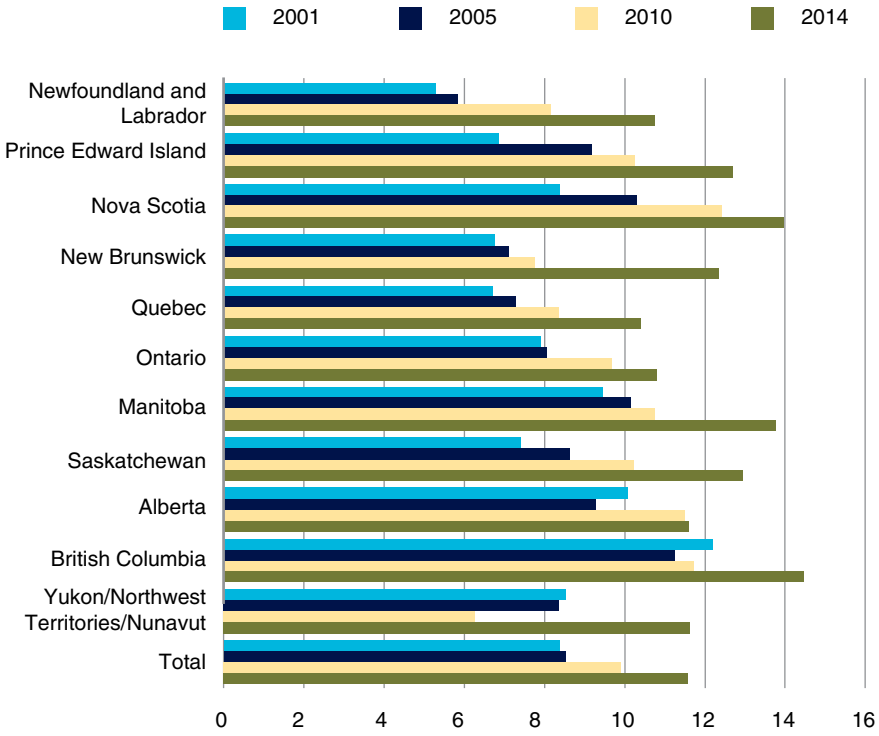
33 Please refer to the first report for a further explanation on the reasons why more Canadians are accessing physiotherapy services.

consultations. Average physiotherapist employment growth (from 2001 to 2014) was 4.5 per cent, 4.2 per cent, and 4.7 per cent, respectively,

Chart 5

Proportion of Individuals Who Consulted a Physiotherapist in the Last 12 months, by Province/Territory

(per cent)



Source: Canadian Community Health Survey.

in Ontario, Alberta, and British Columbia.[34] At the same time, visits increased by an average of 3.4 per cent in these provinces.[35,36] Meanwhile, in the remaining provinces, employment growth was a

34 Ibid.

35 Statistics Canada, *Canadian Community Health Survey*, 2003.

36 Statistics Canada, *Canadian Community Health Survey*, 2014.

The demand for physiotherapy may depend on the insurance coverage provided by the employer.

combined 2.6 per cent per year,[37] while physiotherapist consultations increased by 4.5 per cent per year.[38,39]

Another interesting trend is that even as the number of physiotherapists and consultations rises, the average number of visits (in a 12-month period) is going down. In 2001, the average number of visits in a year was 10. New Brunswick had the highest at 12 visits, while patients in the territories averaged only 7 visits.[40] In 2014, the average number of consultations went down to 8.2 per year. Nova Scotia was the highest at 9.5 visits per year, and the territories remained the lowest at 4.4 visits.[41,42]

Of those who consulted a physiotherapist in 2014, a large proportion (30.4 per cent of visits) were in the 50- to 65-year age range. However, this does not necessarily imply that the use of a physiotherapist increases with age—only 13.2 per cent of visits were for those over 70 years of age. In fact, in 2001 it was the 35- to 49-year age group that made up about one-third of all physiotherapist consults. Fifteen years later, it is these same people that are now in the 50- to 65-year age group and consulting a physiotherapist with the same frequency as in 2001.[43] (See Chart 6.)

It is worth mentioning that the demand for physiotherapy may depend on the insurance coverage provided by the employer. Normally, physiotherapy is included in the group benefits portion of a family or an individual plan, so coverage is “shared” with other services (like massage therapy or chiropractic care, for example) up to a maximum annual dollar value. Once that maximum annual dollar value is reached, the patient must pay for a physiotherapy visit out of pocket. For private insurance coverage (which excludes youth, the elderly, and those on disability), physiotherapy claims represent 5.5 per cent of the value of all claims—somewhere between $350 million and $450 million.[44]

37 Statistics Canada, CANSIM table 282-0002.

38 Statistics Canada, *Canadian Community Health Survey*, 2003.

39 Statistics Canada, *Canadian Community Health Survey*, 2014.

40 Statistics Canada, *Canadian Community Health Survey*, 2003.

41 Statistics Canada, *Canadian Community Health Survey*, 2014.

42 As stated earlier, a possible explanation for the low number of visits in Yukon is the remoteness of some patients from their physiotherapist.

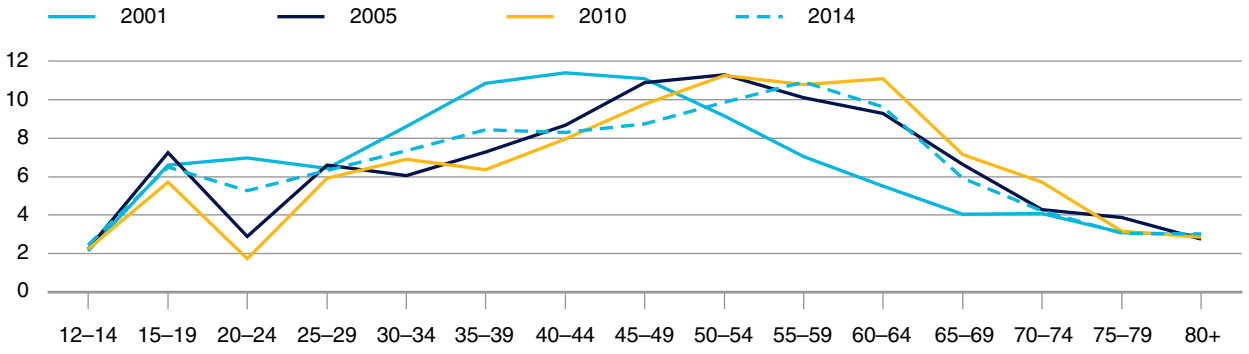
43 Statistics Canada, *Canadian Community Health Survey*, 2014.

44 Canadian Physiotherapy Association, *The Practice of Physiotherapy in Canadian Extended Health Insurance*.

Chart 6

Distribution of Individuals Who Consulted a Physiotherapist in the Last 12 Months, by Age Group

(per cent)



Source: Canadian Community Health Survey.

Physiotherapist Shortage

By comparing the supply and the demand of physiotherapists in Canada, it might be possible to determine if a physiotherapist shortage exists. Table 6 shows both the number of employed physiotherapists and the number of times Canadians consulted a physiotherapist. The data demonstrate that physiotherapists see an average of 1,680 patients in a year, mostly as repeat visits as part of a physiotherapy program. (Each patient averages about 8.2 visits per year.) As is evident in Table 6, some provinces exceed this average. With an FTE physiotherapy position normally requiring 1,500 to 1,750 hours per year, physiotherapists appear to work enough hours to satisfy patient visits, but have little time for training and administration work (presuming each session lasts approximately one hour). As well, physiotherapists who administer patients in rural areas often must provide in-house services, severely limiting the number of patients they can see in a given day. Taking these things into account suggests that the demand for physiotherapy services may be outstripping supply.

In fact, the provincial breakdown shows that a physiotherapy shortage may be more pronounced in the Atlantic provinces. Newfoundland and Labrador, Prince Edward Island, and Nova Scotia all have more than

2,000 consultations in a year. Although the numbers are lower in other parts of the country, the results show that by looking at consultations alone, physiotherapists work the maximum amount of FTE hours.

Table 6
Physiotherapist Supply and Demand, 2014
(number)

	Consultations with a physiotherapist (per 10,000 population)	Number of physiotherapists (per 10,000 population)	Number of patients per physiotherapist	Average number of visits	Total consultations per physiotherapist
Canada	1,157	5.7	204.2	8.2	1,681.5
Newfoundland and Labrador	1,075	4.8	223.8	9.0	2,011.1
Prince Edward Island	1,270	4.4	288.7	8.3	2,397.6
Nova Scotia	1,398	6.5	215.6	9.5	2,049.1
New Brunswick	1,235	6.5	190.6	7.6	1,440.9
Quebec	1,041	5.3	196.3	8.0	1,564.8
Ontario	1,078	5.4	197.9	9.0	1,782.7
Manitoba	1,377	5.4	256.3	7.3	1,861.6
Saskatchewan	1,296	6.0	216.8	6.8	1,468.1
Alberta	1,161	5.8	200.2	7.2	1,436.7
British Columbia	1,446	6.9	210.7	8.0	1,678.6
Yukon	1,163	9.7	119.4	4.4	525.2

Sources: Canadian Institute for Health Information; Canadian Community Health Survey.

But it is not as if there is a surplus of physiotherapists to help alleviate the rising demand. Even with 20,130 physiotherapists employed in Canada in 2014, there remain only 530 who are not employed in the field. Of these, a mere 10 per cent (or 60 physiotherapists) were unemployed and seeking employment in physiotherapy.[45] Taking these figures into account, the unemployment rate for physiotherapists is about 1 per cent (for physiotherapists seeking employment overall) and the unemployment rate of the profession (those seeking employment as a physiotherapist) is 0.3 per cent.[46] This compares with about 6.9 per cent for all occupations for Canada as a whole in 2014 (and 1.5 per cent for all health occupations).[47] In economic terms, this low unemployment

45 Canadian Institute for Health Information, *Physiotherapists, 2014*.
46 Ibid. The unemployment rate was calculated by The Conference Board of Canada.
47 Statistics Canada, CANSIM table 282-0002.

The physiotherapist vacancy rate in most provinces is below the national figure.

rate would be categorized as frictional[48] and actually suggests there is a shortage of physiotherapists in the country as a whole.

Another way to determine a labour shortage is by looking at wait times to see a physiotherapist or at the number of prospective patients that could not access a physiotherapist in a timely manner. Unfortunately, those data do not exist. However, one Ontario study found that a typical patient waited 15 days for occupational therapy and 29 days for physical therapy. Wait times for physical therapy in hospital outpatient departments were longer than for community care access centres, while waits for occupational therapy were similar in both settings,[49] although these results do not necessarily imply that there is a shortage.

According to CIHI, several factors can influence wait times, including hours of operation, the ability to pay for care, and geography. Variation in wait times can also be related to demographic and clinical factors, like a patient's condition, age, type of facility they are waiting for admission to, and where that facility is located. Wait times for admission to rehabilitation in an inpatient hospital setting varied by province, ranging from about 1 day in Alberta to 17 days in Nova Scotia.[50] But it is worth noting that these times do not reflect rehabilitation from a physiotherapist.

Unemployment rates and wait times, however, do not take into account the vacancies reported in specific occupational categories. For Canada as a whole, the job vacancy rate for all occupations is 2.2 per cent. In the physiotherapy profession, that figure is 2 per cent, so there are slightly fewer vacancies in physiotherapy than all other professions combined. Although reliable data are not available for all provinces, the regional breakdown shows that the physiotherapist vacancy rate in most provinces is below the national figure. Incidentally, British Columbia is the only province that is higher, at 3.5 per cent, meaning there are more vacancies in the physiotherapist profession than all other professions combined. Interestingly, British Columbia has about 28 per

48 Frictional unemployment occurs when those who are currently unemployed are in the process of moving from one job to another.

49 Passalent, Landry, and Cott, "Wait Times for Publicly Funded Outpatient and Community Physiotherapy and Occupational Therapy Services."

50 Canadian Institute for Health Information, *Health Care in Canada, 2012*.

cent of all physiotherapist job vacancies in Canada,[51] yet has the highest rate of physiotherapists per 10,000 population and the highest rate of physiotherapist employment growth since 2001. Quebec has the fewest vacancies (20), leading to a vacancy rate of 0.5 per cent.

There are anecdotal accounts of some physiotherapy businesses not posting job vacancies because they are already aware of a lack of physiotherapists.[52] This could be a reason why there are proportionately fewer vacancies in physiotherapy than all professions combined.

Access to Physiotherapy

Sometimes the demand for physiotherapy is dependent on the patient's proximity to their physiotherapist. Certainly, Canada's land mass is very large, with some segments of the population living in very remote areas. The difficulty in providing physiotherapy services to these residents can be more difficult than hiring the physiotherapist in the first place.

In fact, nearly all of Canada's physiotherapists (90 per cent) are employed in an urban area,[53,54] and there are significant challenges related to recruiting physiotherapists to non-urban centres. In August 2014, the Physiotherapy Association of British Columbia reported that vacancies across British Columbia had reached 267 positions (last audited by the profession in 2013). These 267 vacancies represent a substantial gap between the 2,897 practising physiotherapists and the need for at least 10 per cent more physical therapists to fill the immediate need.[55] At this time, the physical therapy community of British Columbia urged the Ministry of Advanced Education to immediately expand the UBC Department of Physical Therapy to 132 seats through a distributed model that better addresses the challenges for Fraser Health and Northern British Columbia.[56] There is evidence to suggest this model

51 Statistics Canada, CANSIM table 285-0003.

52 Canadian Physiotherapy Association, Key informant interviews.

53 Statistics Canada, *National Household Survey, 2011*.

54 Canadian Institute for Health Information, *Physiotherapists, 2014*.

55 Physiotherapy Association of British Columbia, *Shortage of Physical Therapists in BC*.

56 Ibid.

would provide the expanded and more stable physical therapy workforce required to meet the urgent service needs of these regions.

Although the reports from the Physiotherapy Association of British Columbia are consistent with the vacancy data published by Statistics Canada, it must be noted that British Columbia is not alone in its challenges of filling vacancies in rural and remote regions. The Manitoba Physiotherapy Association has made it a top priority to improve access to physiotherapy in rural and remote parts of the province, as there are only a handful of publicly funded physiotherapists outside the Winnipeg region.[57] Nova Scotia is also fearful of the impact of vacancies on access to necessary services, as vacancies tend to disappear if not filled.[58] Urban areas comprise only 3.6 per cent of Canada's geography, but contain 90 per cent of the nation's physiotherapists. The remaining 10 per cent of the physiotherapists in Canada service about 90 per cent of the country's land mass, creating a significant challenge to meet the mobility and rehabilitation needs of Canadians. (See Table 7.)

Table 7
Physiotherapists in Urban and Rural Areas, 2014

	Urban physiotherapists (per 100,000 urban population)	Rural physiotherapists (per 100,000 rural population)	Proportion of physiotherapists working in an urban area (%)	Proportion of population residing in an urban area (%)
Canada	67.4	40.6	89.9	82.0
Newfoundland and Labrador	82.4	43.3	83.8	48.3
Prince Edward Island	37.0	0.0	90.6	57.8
Nova Scotia	59.2	37.3	76.3	65.1
New Brunswick	64.9	50.1	69.3	61.5
Quebec	75.5	38.6	91.9	76.4
Ontario	61.9	40.2	94.7	91.2
Manitoba	71.7	28.5	86.1	68.1
Saskatchewan	96.6	40.8	76.9	59.6
Alberta	65.1	28.8	88.3	80.9
British Columbia	69.8	73.3	87.3	87.6
Yukon	–	–	100.0	76.8

Sources: Canadian Institute for Health Information; Statistics Canada.

57 Standing Committee on Health, *The Federal Role in the Scope of Practice of Canadian Healthcare Professionals*.

58 Canadian Physiotherapy Association, *Submission to the Standing Committee on Health*.

The ratio of urban physiotherapists is more than 1 to 2 in some Western provinces.

The breakdown by province is striking. Clearly, in nearly all regions, the proportion of physiotherapists working in an urban area overshadows the proportion of the population residing in an urban area. By way of comparison, the ratio of urban to rural physiotherapists (in relative terms) is more than 2 to 1 in some Western provinces, and close to that figure in Newfoundland and Labrador and Quebec. The ratio is much lower (1.3) in New Brunswick, while in British Columbia, the relative quantity of physiotherapists is higher in rural areas.[59] To be fair, the urban-rural breakdown can be somewhat misleading; in Yukon, physiotherapists who service the rural areas actually work in Whitehorse and travel outside the city to see their patients. Those home visits are also common in remote areas in Newfoundland and Labrador.

Physiotherapist Assistants

Even though physiotherapist assistants may also deliver treatment and physical interventions for patients and clients under the supervision of a physiotherapist, it is impossible to determine the exact number of physiotherapist assistants in Canada. The Labour Force Survey, which provides detailed labour force data on all occupations in Canada, does not provide detail on PTAs on their own. Instead, they are lumped together with "other technical occupations" in "Therapy and Assessment." (See "Physiotherapy and the National Occupational Classification.") As a whole, this category consisted of 10,900 workers in Canada in 2014,[60] but it is difficult to determine exactly how many are PTAs.

For the category as a whole, more than half (56.1 per cent) of this group have a bachelor's-level education. Of the remainder, 28.9 per cent have a level of education above a bachelor's, possibly from foreign-trained physiotherapists working below their credentials in Canada, while 14.1 per cent have a degree below a bachelor's level or a college diploma.[61] The average hourly wage of this category is about $23 per hour for those who work full-time, which means that average

59 Statistics Canada, *National Household Survey, 2011*.
60 Statistics Canada, CANSIM table 282-0010.
61 Statistics Canada, *National Household Survey, 2011*.

annual employment income is roughly $46,500 in Canada.[62] Regionally, employment income for this category is highest in New Brunswick, Ontario, and Alberta.

While it is true that a greater number of physiotherapist assistants (78 per cent) work in an urban area, in relative terms, supply is greater in rural areas. For instance, a greater proportion of physiotherapist assistants is in rural areas (2.5 per 10,000 rural population) than in urban areas (2 per 10,000 urban population) in Canada. The breakdown by province is even more interesting. In Nova Scotia, New Brunswick, Ontario, and British Columbia, the ratio of rural to urban physiotherapist assistants (in relative terms) is more than 2 to 1.[63] Conversely, there are twice as many physiotherapist assistants in urban areas in Manitoba than in rural areas. In all other provinces, the urban-rural breakdown (in relative terms) is fairly equal. All in all, despite being more available in rural areas, because of Canada's geography, there is still a lot of ground for physiotherapist assistants to cover. (See Table 8.)

Table 8
Physiotherapist Assistant Workforce, 2014

	Level of education, BA or above (%)	Average employment income ($)	Urban PTAs per 10,000 population ÷ rural PTAs (per 10,000 population)	Proportion of population residing in an urban area (%)
Canada	27.2	46,500	0.8	82.0
Newfoundland and Labrador	n.a.	41,771	1.1	48.3
Prince Edward Island	–	–	–	57.8
Nova Scotia	42.9	40,624	0.6	65.1
New Brunswick	23.8	49,964	0.5	61.5
Quebec	19.4	43,573	1.1	76.4
Ontario	33.4	49,558	0.5	91.2
Manitoba	24.6	45,455	1.9	68.1
Saskatchewan	12.7	45,876	1.1	59.6
Alberta	27.6	49,440	0.8	80.9
British Columbia	28.5	43,423	0.5	87.6
Yukon	–	–	–	76.8

n.a. = not applicable
Source: Statistics Canada.

62 Statistics Canada, CANSIM table 282-0070.

63 Statistics Canada, *National Household Survey, 2011.*

Conclusion

Physiotherapists are self-regulated, primary health care professionals who aim to prevent, assess, and treat the impact of injury, disease, and/or disorders in movement and function. They work in private and public settings, providing health interventions as well as management, education, research, and consultation services. Physiotherapist assistants, working under the supervision of a physiotherapist, may also deliver treatment and physical interventions for patients and clients.

Physiotherapist employment has risen sharply over the past few years. At the end of 2014, there were approximately 20,130 physiotherapists employed in Canada. As a proportion of the population, British Columbia has the most physiotherapists, while Newfoundland and Labrador and Prince Edward Island have the fewest.

In recent years there has been a shift in physiotherapy service delivery from hospitals to community-based providers. This was originally introduced to reduce pressure on hospitals. As such, the area of practice for physiotherapists in most provinces/territories is divided between general practice and musculoskeletal practice. Normally, there is a strong relationship between area of practice and public/private sector of employment. Certainly, provinces with a higher proportion of physiotherapists in the private sector have a higher share in musculoskeletal practice and are employed in a professional practice rather than in a hospital. This is especially true for British Columbia, Nova Scotia, and Alberta.

Provinces with a younger total population tend to have a higher share of physiotherapists employed in musculoskeletal practice. Conversely, jurisdictions where the share of population >50 years of age is greatest have the highest proportion of physiotherapists employed in general practice. More often than not, these provinces also have a larger share of physiotherapists employed in hospitals.

The rehabilitation and mobility market in Canada consists of patients and clients interacting with regulated and unregulated health professionals to be physically active. Roughly 117,400 health professionals are part of the market in Canada. Massage therapists make up the largest share of

The main challenge is how access to physiotherapy can be improved for those who need it most.

the market, with physiotherapists representing about 16.4 per cent and physiotherapist assistants roughly 9.3 per cent.

The number of Canadians who have consulted a physiotherapist has been steadily increasing in Canada, going from 2.16 million (8.4 per cent of the adult population) in 2001 to 3.49 million (11.6 per cent of the adult population) in 2014, an increase of 3.8 per cent per year. Although growth in the supply of physiotherapists has also been strong, this has normally occurred in the urban areas of Canada's most populated provinces. But elsewhere, a physiotherapist shortage is looming, especially in the Atlantic provinces and in the rural and remote areas of all provinces. With the unemployment rate of the profession around 0.3 per cent, it is not as if there is a surplus of physiotherapists to help alleviate the rising demand and exhausted supply in some areas of the country.

The sizable market share of physiotherapists and the steady growth in consultations suggests there is strong representation for physiotherapy nationally and that representation is fairly consistent in all provinces. The profession has benefited from the liberalization of the market in the early 2000s, which increased access for patients in the private sector. However, while there is competition in the market, physiotherapy is positioned as a strong player that complements the range of health services available to enhance the mobility of Canadians. The main challenge going forward is how access to physiotherapy can be improved for those who need it most.

The third briefing in this series will forecast the demand for physiotherapy services for seniors, using an approach that integrates the use of rehabilitation services in long-term care and home care. This will include a discussion about the specific conditions for which the aging population will require physical therapy services. The third briefing will also provide recommendations for action from different perspectives, including but not exclusive to governments, the professional associations, health providers, health administrators, and individuals.

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Acknowledgements

This report was researched and written by Greg Sutherland of The Conference Board of Canada.

The author would like to thank Kate O'Connor, Melissa Anderson, and Chantal Lauzon of the Canadian Physiotherapy Association for their guidance, support, and contributions.

I am grateful to Dr. Sharon Switzer-McIntyre, Assistant Professor, Vice-Chair of Education, Department of Physical Therapy, at the University of Toronto, and Dr. Ivy Lynn Bourgeault, Professor, Telfer School of Management at the University of Ottawa, and Canadian Institutes of Health Research Chair in Gender, Work and Health Human Resources, for their external reviews and Carole Stonebridge of The Conference Board of Canada for her internal review.

The Canadian Physiotherapy Association and the Canadian Alliance for Sustainable Health Care provided research funding.

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The Canadian Alliance for Sustainable Health Care (CASHC) was created to provide Canadian business leaders and policy-makers with insightful, forward-looking, quantitative analysis of the sustainability of the Canadian health care system and all of its facets.

The work of the Alliance is to help Canadians better understand the conditions under which Canada's health care system is sustainable—financially and in a broader sense.

These conditions include the financial aspects, institutional and private firm-level performance, and the volunteer sector. CASHC publishes evidence-based, accessible, and timely reports on key health and health care systems issues.

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APPENDIX A

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The Market Profile of Physiotherapists in Canada
Greg Sutherland

To cite this briefing: Sutherland, Greg. *The Market Profile of Physiotherapists in Canada*. Ottawa: The Conference Board of Canada, 2017.

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PUBLICATION 8695 | 8696
PRICE: Complimentary