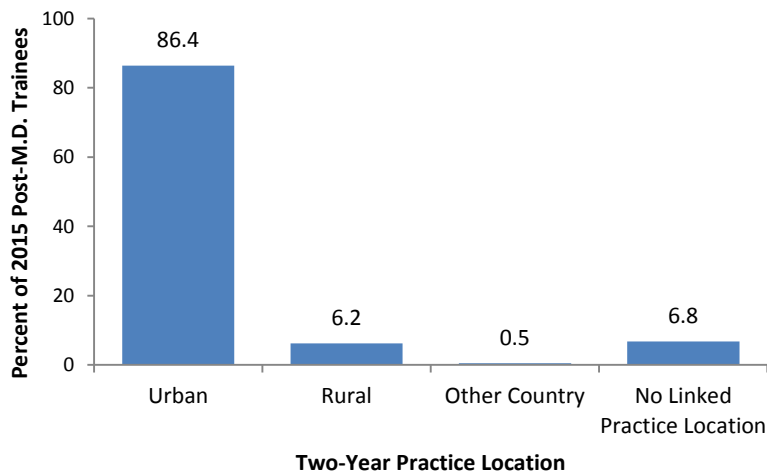


According to Statistics Canada, in 2016, there were just over 6.5 million people living in rural areas or approximately 18% of the total population.¹ It has been well-documented that rural communities have challenges both recruiting and retaining doctors.² The Canadian Post-M.D. Education Registry (CAPER) collects data on post-M.D. medical trainees during their education. This fact sheet presents data on post-M.D. trainees who exited training in 2015 with a training rank consistent with completion of training. The CAPER database was linked to the Canadian Medical Association (CMA) Masterfile and the MDSelect Database to determine where exiting trainees were practicing two years later. Only data concerning Canadian Citizens and Permanent Residents are included as visa trainees typically return to their home country after training.

Location of Practice Two Years Following Exit from Post-M.D. Training



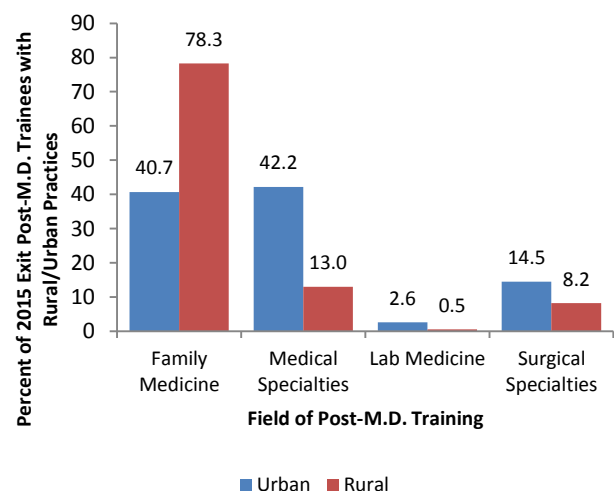
Two years after exiting post-M.D. training the majority (86.4%) of doctors were practicing in urban areas.³ In contrast, only 6.2% were practicing in a rural area.

Approximately 6.8% of post-M.D. trainees who exited training in 2015 could not be located in 2017 (i.e., No Linked Practice Location). A small proportion of trainees (0.5%) who exited training in 2015 were linked to a practice located outside of Canada two years later.

Field of Post-M.D. Training and Location of Practice Two Years Following Exit from Post-M.D. Training

For post-M.D. trainees who exited in 2015, whose practice could be identified two years later as either urban or rural, the majority (78.3%) trained in Family Medicine compared to only 40.7% of their urban counterparts. Although rural doctors are represented in all remaining fields of post-M.D. training, a much smaller percentage of them were in other fields relative to urban doctors.

The ability to link data concerning a post-M.D. trainees education with their later practice location places CAPER in a unique position to address longitudinal research questions about factors that influence physician's choice to practice in underserved rural areas.



¹ Statistics Canada. Table 17-10-0117-01 Selected population characteristics, Canada, major drainage areas and sub-drainage areas

² Bosco, C., Oandasan, I. *Review of family medicine within rural and remote Canada: Education, Practice, and Policy*. Mississauga, ON: College of Family Physicians of Canada; 2016.

³ The postal code of the doctor's practice location was submitted to the Postal Code Conversion File (PCCF) from Statistics Canada. Records with a Statistical Area Classification (SAC) Type of 1-3 were classified as urban and all other SAC types as rural.