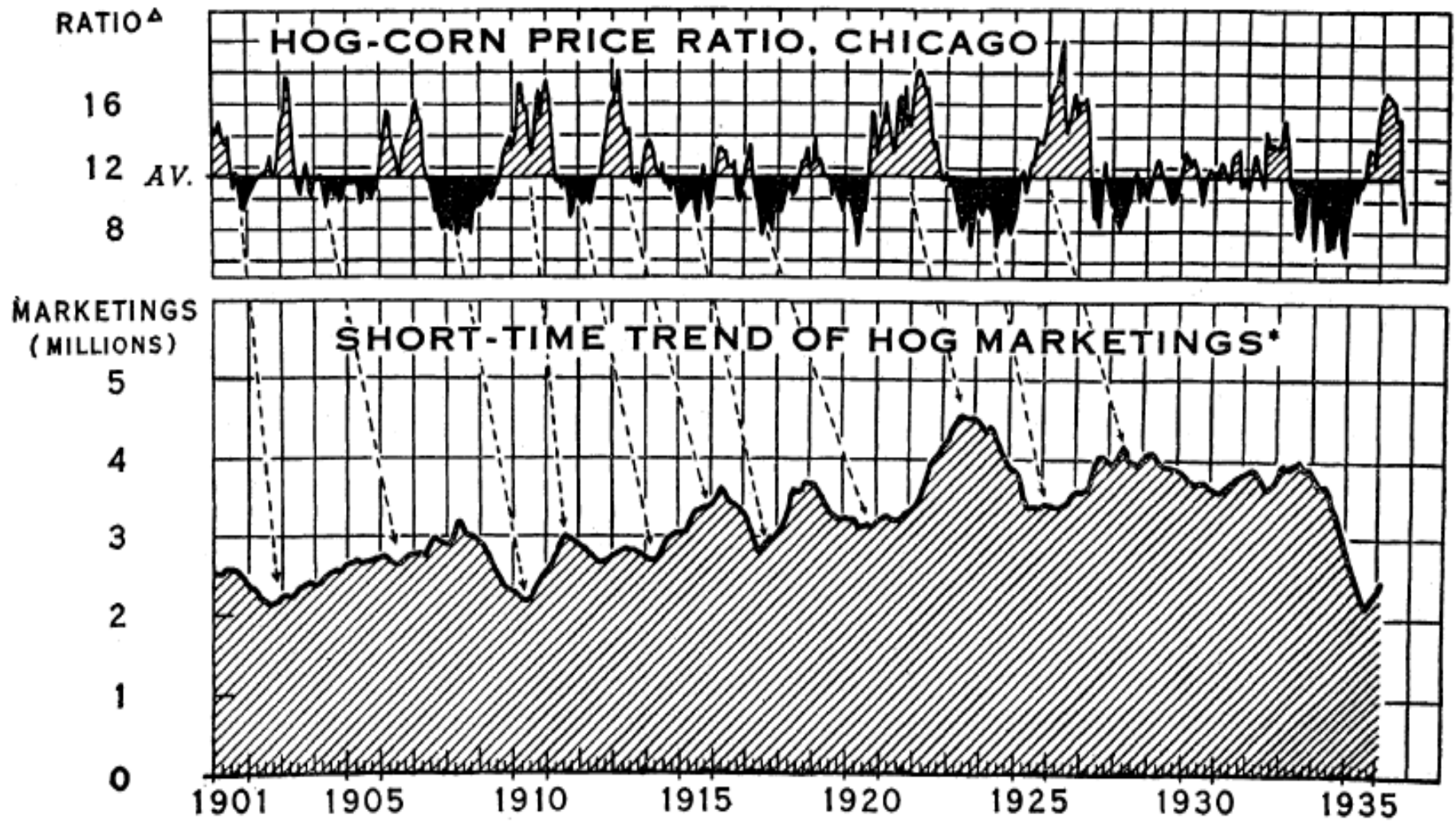


Is there a “Pig Cycle” in the labour supply of doctors? How training and immigration policies respond to physician shortages

*IMI International Conference: “The Changing Face of Global Mobility”
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Yasser Moullan, IMI, University of Oxford and IRDES
Xavier Chojnicki, University of Lille and CEPII

HOG-CORN PRICE RATIOS AND HOG MARKETINGS



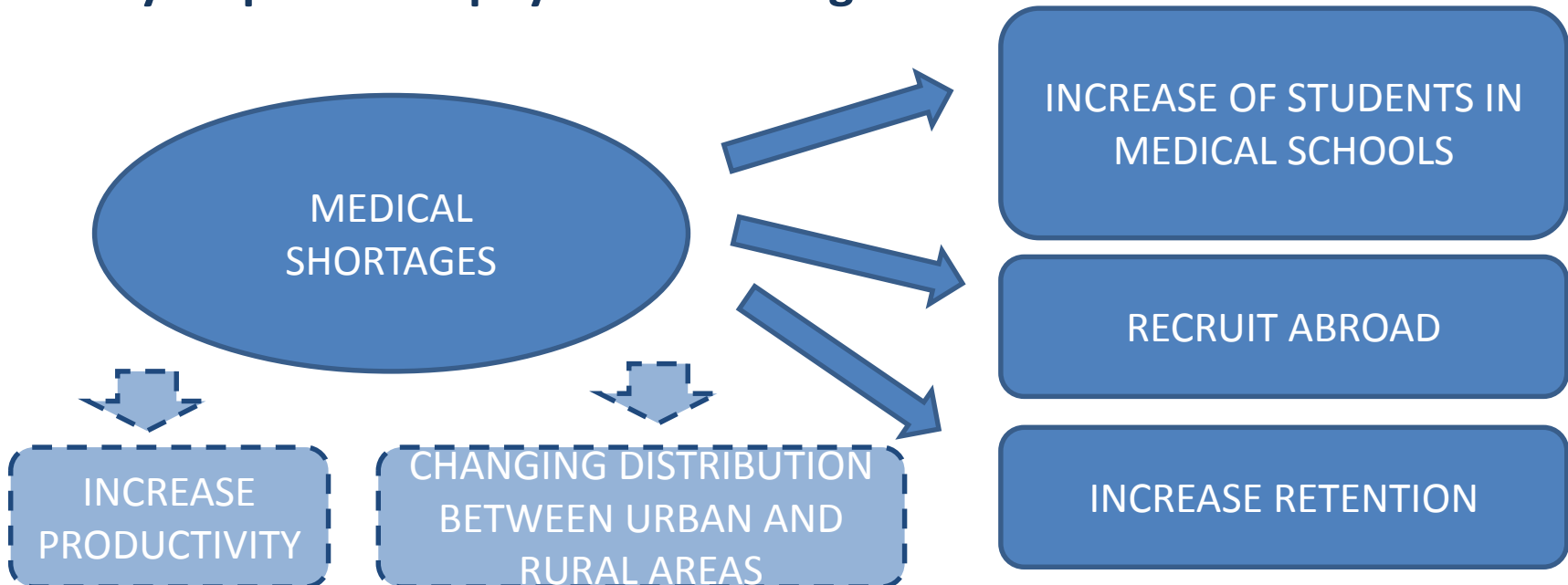
*12-MONTH MOVING AVERAGE OF HOG SLAUGHTER, FEDERALLY INSPECTED
 ^ AVERAGE PRICE OF HOGS AND NO. 3 YELLOW CORN

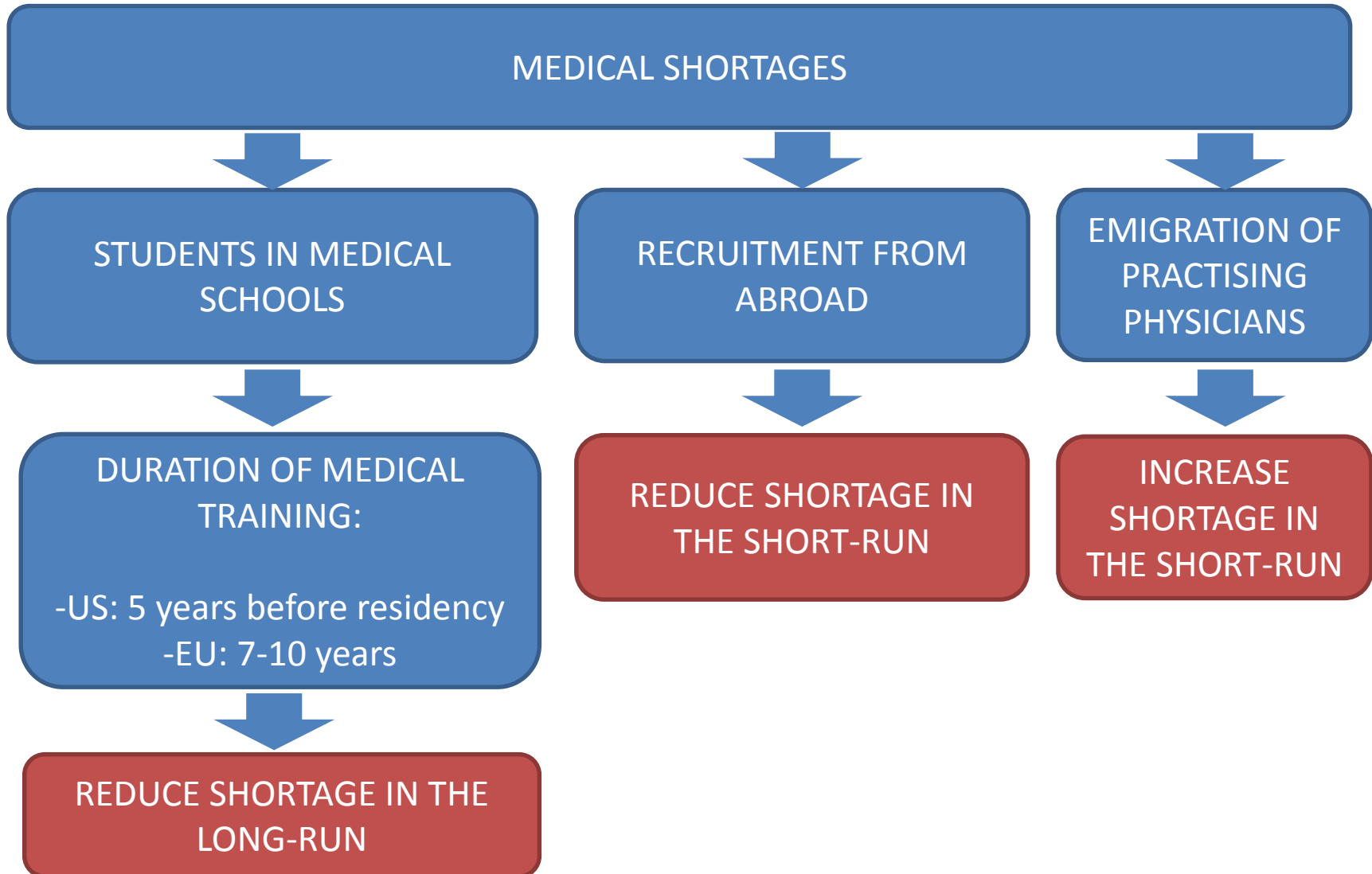
What about medical doctors?

Appearance of medical shortages in OECD countries

- US: Deficit of 200,000 physicians for 2020-2025 (Cooper, 2004)
- UK: Estimated shortage of 20% for 2020 (Wanless, 2002)
- France: Supply should decrease until 2025

Policy responses of physician shortages





- 1. How do policy makers react to shortage of physicians ?**
 - Training investment in medical schools
 - Recruitment of foreign-trained physicians
 - What about the practising physician workforce?
- 2. What is the magnitude of these policies' responses?**
- 3. When are these policies effective in addressing medical shortages?**

1. Medical graduates from 1991 to 2012 (Health OECD data)
 - Number of medical graduates over 1,000 physicians

2. Immigration and emigration from 1991 to 2004 (Bhargava et al. 2011)
 - Country of qualification as definition
 - Collection from OECD medical associations
 - Immigration= Foreign-trained/physicians
 - Emigration rate= Physicians abroad/(physicians + physicians abroad)

3. Shortage of physicians from 1991 to 2004
In the literature:
 - Different definitions: needs, demand, service
 - Different level: country, regional (urban/rural), city level
 - Measure: number of physicians over 1,000 population (WHO, WDI data)

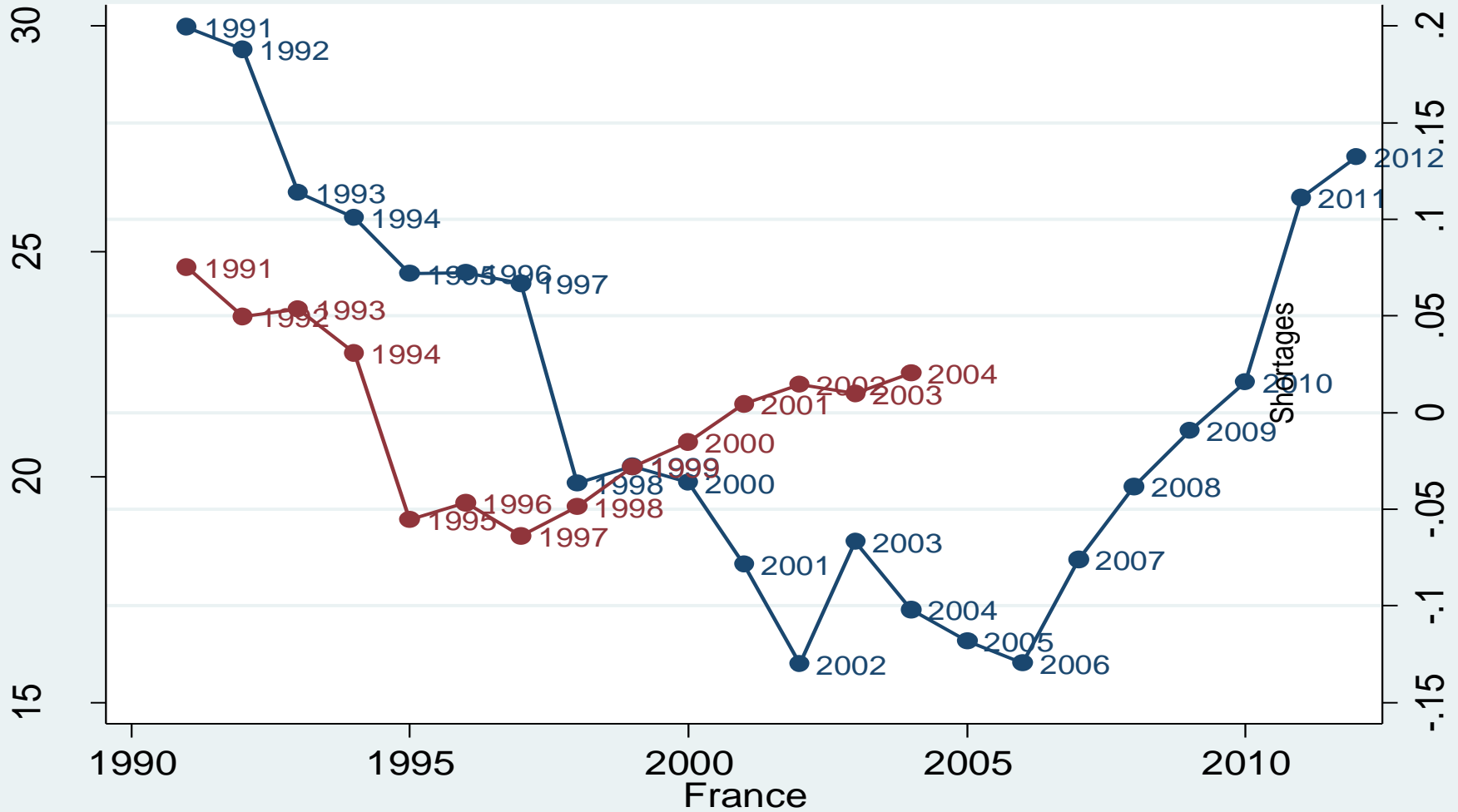
Definition

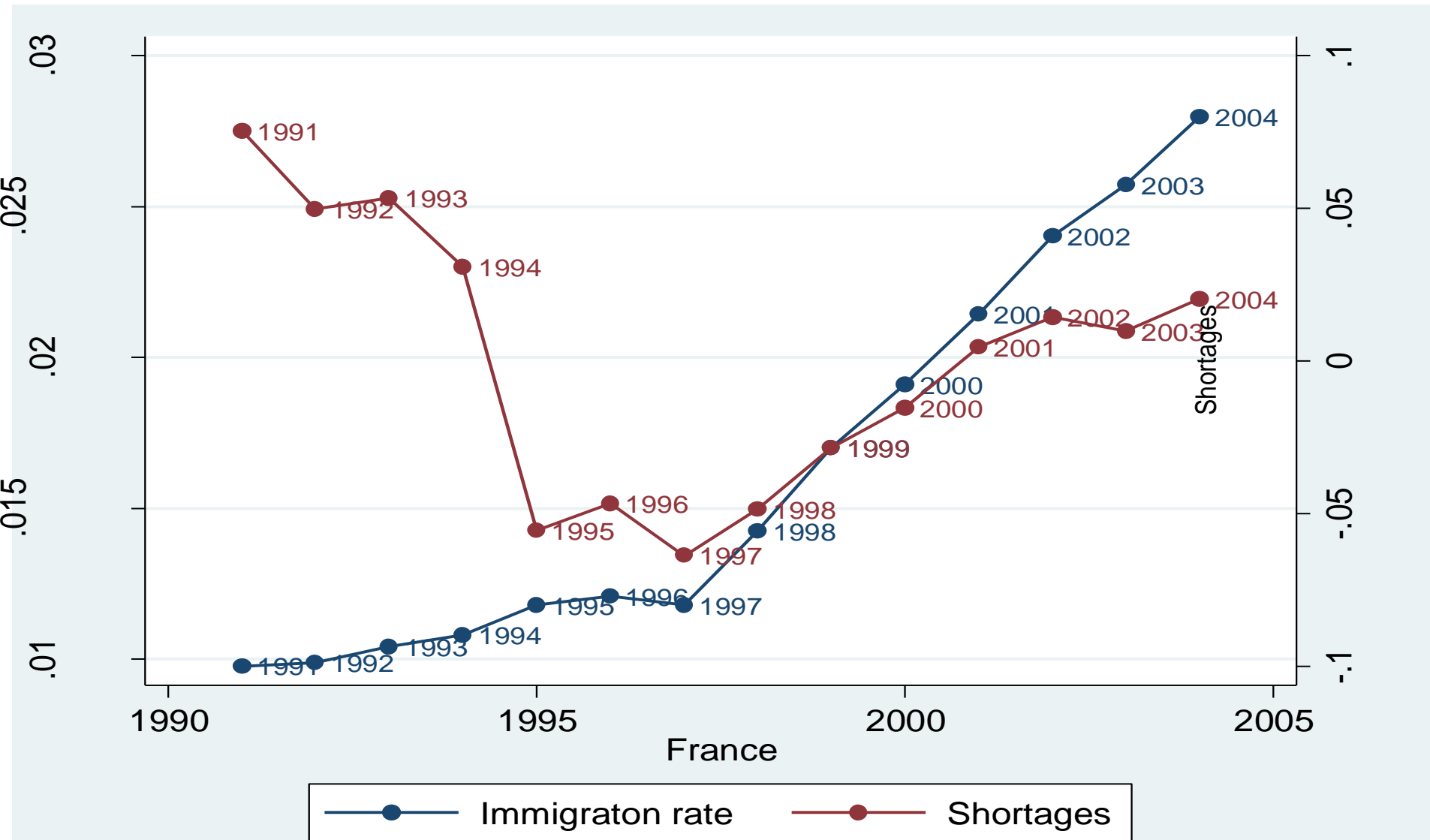
- Demand of physicians is the best predictor of the GDP per capita (Cooper et al. 2003, Scheffler et al. 2008)

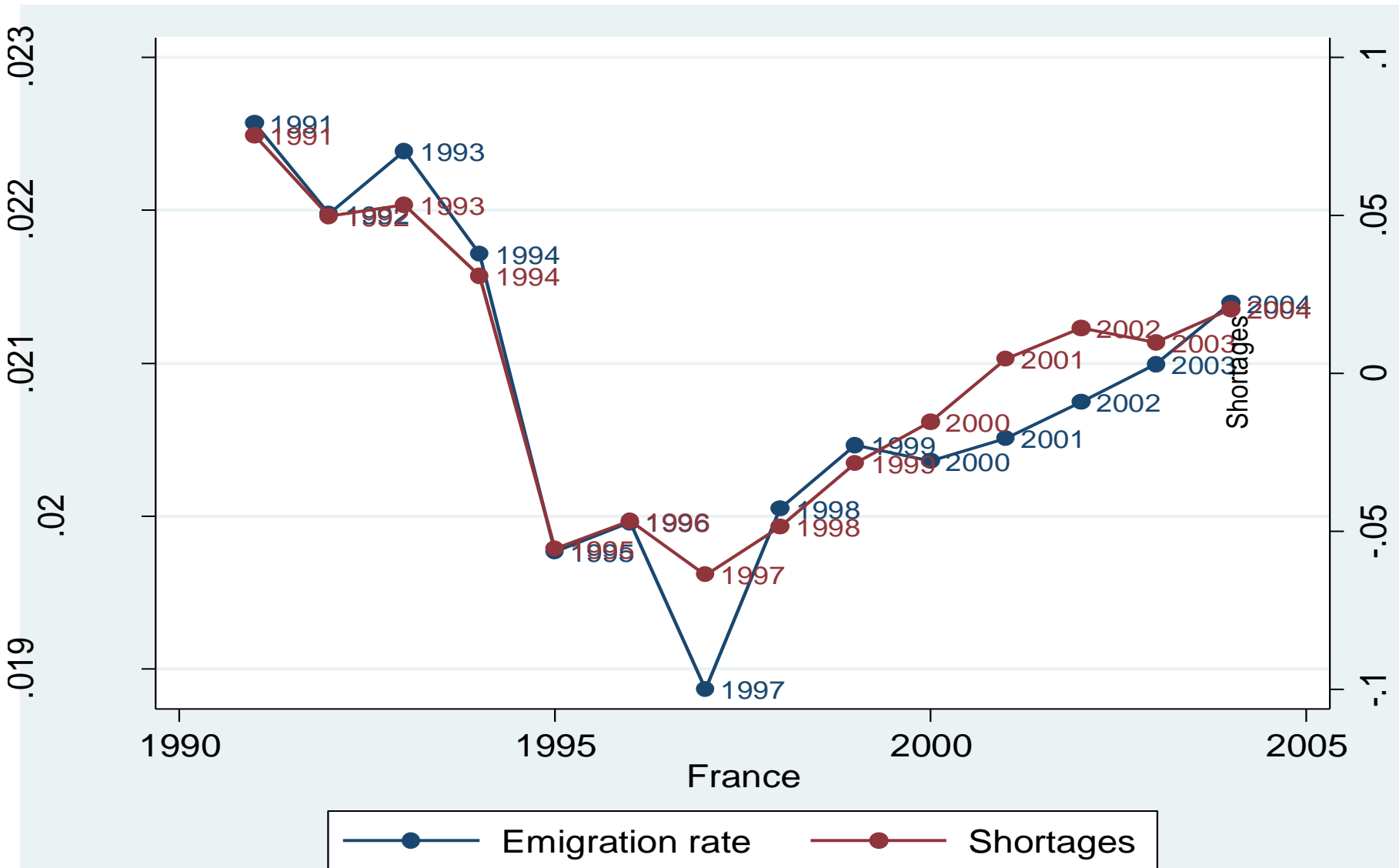
Measurement

- $\ln(\text{Actual Physicians per 1000}_{j,t}) = \alpha_0 + \alpha_1 \ln(\text{GDP per capita}_{j,t}) + \varphi_j + \varepsilon_{j,t}$
Shortage_{j,t} = $\ln(\text{Predicted Physicians per 1000}_{j,t}) - \ln(\text{Actual Physicians per 1000}_{j,t})$

	Average predicted density of physicians per 1,000 people	Average density of physicians per 1,000 people	Shortage in level= predicted density-observed density
1991	2,610	2,554	0,057
1992	2,636	2,620	0,016
1993	2,655	2,668	-0,013
1994	2,700	2,717	-0,018
1995	2,742	2,749	-0,007
1996	2,778	2,810	-0,032
1997	2,824	2,789	0,035
1998	2,861	2,844	0,017
1999	2,906	2,966	-0,060
2000	2,972	3,041	-0,069
2001	3,006	3,085	-0,079
2002	3,040	3,021	0,018
2003	3,062	3,021	0,040
2004	3,111	3,021	0,090







$$\left\{ \begin{array}{l} \ln \left[\left(\frac{\text{Medical graduates}}{\text{Physicians}} * 1,000 \right)_{j,t+\gamma} \right] = \beta_0 + \beta_1 \text{Shortages}_{j,t} + \beta_2 \ln(X_{j,t}) + \text{FE}_j + \text{FE}_t + v_{j,t} \\ \ln (\text{Immigration rate}_{j,t}) = \beta_0 + \beta_1 \text{Shortages}_{j,t} + \beta_2 \ln (X_{j,t}) + \text{FE}_j + \text{FE}_t + \eta_{j,t} \\ \ln (\text{Emigration rate}_{i,t}) = \beta_0 + \beta_1 \text{Shortages}_{i,t} + \beta_2 \ln (X_{i,t}) + \text{FE}_i + \text{FE}_t + \mu_{i,t} \end{array} \right.$$

Controls= Age dependency ratio, social expenditure, GDP per capita, school enrolment, immigration policy

• Methodology

- Panel fixed effect analysis (country and time FE)
- Endogeneity bias: IV estimations where geographical density and ageing of physicians used as instruments
- Simultaneity bias: SURE and 3SLS for tackling endogeneity

Medical Graduates Results

VARIABLES	(1) OLS Average over t+1 and t+2 Ln(Graduates)	(2) OLS Average over t+5, t+6 and t+7 Ln(Graduates)	(3) OLS Average over t+8 and t+9 Ln(Graduates)
(Shortage)t	0.191 (0.141)	0.449*** (0.140)	0.363*** (0.136)
Ln(Tertiary school enrolment)t	-0.0647 (0.112)	-0.310*** (0.0819)	-0.215*** (0.0735)
Ln(Secondary school enrolment)t	0.305** (0.140)	0.240** (0.115)	0.177 (0.110)
Ln(Population)t	-0.645 (0.865)	-2.332*** (0.693)	-1.406** (0.701)
Ln(Age dependency)t	-1.748*** (0.432)	-0.839** (0.361)	0.779** (0.342)
Ln(GDP per cap)t	-0.903** (0.395)	0.225 (0.277)	1.203*** (0.275)
Ln(Social expenditure per cap)t	0.943*** (0.229)	0.813*** (0.164)	0.295** (0.137)
Constant	13.23 (16.42)	29.12*** (10.32)	16.87 (13.44)
Observations	213	226	224
R-squared	0.803	0.833	0.857
j	YES	YES	YES
t	YES	YES	YES
Cluster	jt	jt	jt

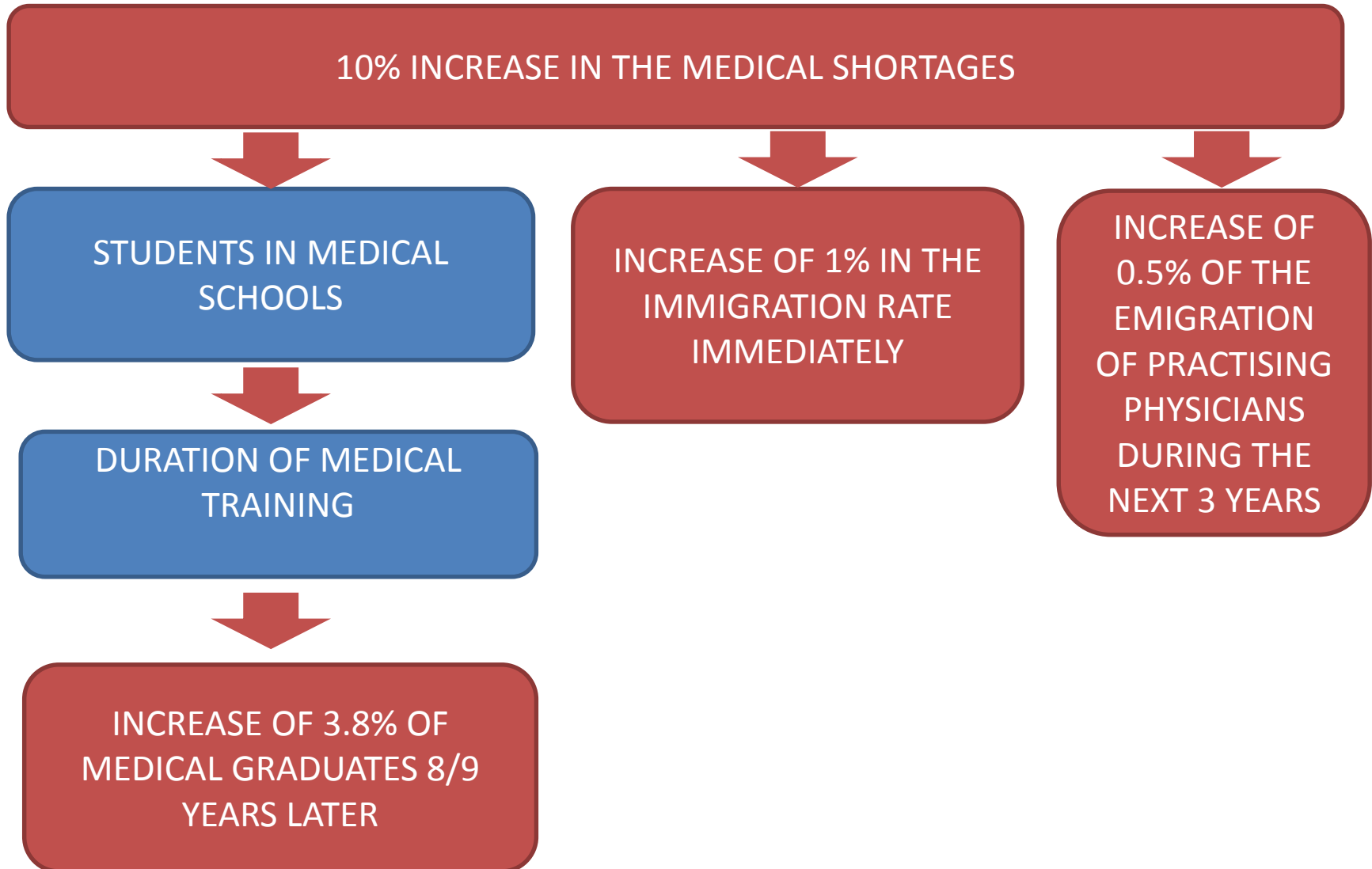
IV Estimations

VARIABLES	(1) 2SLS Second Stage Average t+5, t+6 and Ln(Graduates)	(2) 2SLS First Stage Shortage	(3) 2SLS Second Stage Average t+8 and t+9 Ln(Graduates)	(4) 2SLS First Stage Shortage	(5) 2SLS Second Stage Ln(IMR)	(6) 2SLS First Stage Shortage	(7) 2SLS Second Ln(EMR)	(8) 2SLS First Stage Shortage
(Shortage)t	0.299** (0.130)		0.398*** (0.106)		0.114*** (0.0242)		0.0539*** (0.0151)	
Ln(Tertiary enrolment)t	-0.266*** (0.0727)	-0.00357 (0.00258)	-0.297*** (0.0656)	-0.000186 (0.00251)				
Ln(Secondary enrolment)t	0.188* (0.0988)	-0.00467 (0.00346)	0.262*** (0.0939)	-0.00532 (0.00356)				
Ln(Population)t	-1.613** (0.664)	1.041*** (0.0223)	-0.408 (0.586)	1.071*** (0.0199)	0.340*** (0.0967)	1.063*** (0.0205)	-0.661*** (0.0950)	1.063*** (0.0205)
Ln(Age dependency)t	-0.920** (0.371)	-0.0270** (0.0106)	-0.189 (0.302)	-0.0250** (0.0113)	-0.105** (0.0422)	-0.0235** (0.0108)	-0.0560 (0.0360)	-0.0235** (0.0108)
Ln (GDP per cap)t	0.377 (0.276)	0.258*** (0.0145)	0.510** (0.259)	0.258*** (0.0143)	-0.281*** (0.0477)	0.260*** (0.0142)	0.0519 (0.0356)	0.260*** (0.0142)
Ln (Social exp cap)t	0.255 (0.165)	0.0140** (0.00642)	0.413*** (0.139)	0.00732 (0.00569)	0.0381 (0.0278)	0.00855 (0.00587)	-0.102*** (0.0270)	0.00855 (0.00587)
(Immig change level)t					0.00105 (0.00153)	-0.000398 (0.000347)	-0.00256 (0.00187)	-0.000398 (0.000347)
(Immig restrict)t					0.00241 (0.00341)	0.000171 (0.000786)	-0.00702 (0.00439)	0.000171 (0.000786)
Ln(Physician/geo)t		-0.994*** (0.00493)		-0.992*** (0.00539)		-0.991*** (0.00528)		-0.991*** (0.00528)
Ln(Physician dependency)t		0.00393** (0.00183)		0.00372** (0.00181)		0.00297* (0.00170)		0.00297* (0.00170)
Constant	27.35** (12.86)	-11.51*** (0.422)	2.128 (11.33)	-12.06*** (0.371)	-3.912** (1.703)	-11.97*** (0.376)	13.12*** (1.749)	-11.97*** (0.376)
Observations	193	193	188	188	195	195	195	195
R-squared	0.815		0.861		0.989		0.967	
j	YES	YES	YES	YES	YES	YES	YES	YES
t	YES	YES	YES	YES	YES	YES	YES	YES
Cluster	it	it	it	it	it	it	it	it
Hansen		1.379		1.790		1.620		1.376
P-Value (Hansen Test)		0.240		0.181		0.203		0.241
F-Test		47.28		30.32		959.7		138.3

Simultaneity bias

VARIABLES	(4) 3SLS Average over t+5, t+6 and t+7 Ln(Graduates)	(5) 3SLS Ln(IMR)	(6) 3SLS Ln(EMR)
(Shortage) _t	0.315** (0.135)	0.118*** (0.0218)	0.0337** (0.0151)
VARIABLES	(4) 3SLS Average over t+8 and t+9 Ln(Graduates)	(5) 3SLS Ln(IMR)	(6) 3SLS Ln(EMR)
(Shortage) _t	0.378*** (0.116)	0.111*** (0.0216)	0.0555*** (0.0166)

- Endogeneity
 - Similar results except for the medical graduate model
 - Coefficient of shortage is higher for average graduates between t+8 and t+9 than those between t+5 and t+7
 - “Pig Cycle” appears with 8 and 9 years delay
 - Robustness of instruments
 - Local shortage explains national shortage
 - Ageing of physician population drives up the national shortage
- Simultaneity
 - Similar results and confirm the delay of 8/9 years



Trade-off between education and development policy in OECD countries

- Education
 - Investing in medical school capacities
 - Only efficient in the long run
 - Financial cost of training

- Development policy
 - Recruitment of foreign-trained physicians from abroad
 - Risk of deprivation of origin countries of their human resources for health
 - Adoption of Code of Good Practice in WHO member states and Commonwealth area

THANK YOU FOR YOUR ATTENTION

Yasser Moullan, IMI, University of Oxford: yasser.moullan@qeh.ox.ac.uk

Xavier Chojnicki, University of Lille and CEPII: xavier.chojnicki@cepii.fr

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