

## Number of Physicians per Thousand People

[SELECT](#) [1]

The indicator measures the number of physicians available for 1,000 people. Physicians include generalists and specialists.

Retrieved from, <http://data.worldbank.org/indicator/SH.MED.PHYS.ZS> [2], 12.08.2014

### Data host:

World Bank

### Unit of Measurement:

Ratio (physicians/1,000 people)

### Link to Data:

<http://data.worldbank.org/indicator/SH.MED.PHYS.ZS> [2]

### Description to get data:

Enter link and access the data directly

### Type of Indicator source:

- [Intergovernmental Organisation](#) [3]

### Geographical Coverage:

Afghanistan  
Albania  
Algeria  
American Samoa  
Andorra  
Angola  
Antigua and Barbuda  
Argentina  
Armenia  
Aruba  
Australia  
Austria  
Azerbaijan  
Bahamas  
Bahrain  
Bangladesh  
Barbados  
Belarus  
Belgium

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Belize  
Benin  
Bermuda  
Bhutan  
Bolivia  
Bosnia and Herzegovina  
Botswana  
Brazil  
Brunei  
Bulgaria  
Burkina Faso  
Burundi  
Cambodia  
Cameroon  
Canada  
Cayman Islands  
Central African Republic  
Chad  
Chile  
China  
Colombia  
Comoros  
Congo (Brazzaville)  
Congo (Kinshasa)  
Costa Rica  
Croatia  
Cuba  
Curaçao  
Cyprus  
Czech Republic  
Denmark  
Djibouti  
Dominica  
Dominican Republic  
Ecuador  
Egypt  
El Salvador  
Equatorial Guinea  
Eritrea  
Estonia  
Ethiopia  
Faroe Islands  
Fiji  
Finland  
France  
French Polynesia  
Gabon  
Gambia  
Georgia  
Germany  
Ghana  
Greece  
Greenland  
Grenada  
Guam  
Guatemala  
Guinea  
Guinea-Bissau  
Guyana

Haiti  
Honduras  
Hong Kong S.A.R., China  
Hungary  
Iceland  
India  
Indonesia  
Iran  
Iraq  
Ireland  
Isle of Man  
Israel  
Italy  
Ivory Coast  
Jamaica  
Japan  
Jordan  
Kazakhstan  
Kenya  
Kiribati  
Kuwait  
Kyrgyzstan  
Laos  
Latvia  
Lebanon  
Lesotho  
Liberia  
Libya  
Liechtenstein  
Lithuania  
Luxembourg  
Macao S.A.R., China  
Macedonia  
Madagascar  
Malawi  
Malaysia  
Maldives  
Mali  
Malta  
Marshall Islands  
Mauritania  
Mauritius  
Mexico  
Micronesia  
Moldova  
Monaco  
Mongolia  
Montenegro  
Morocco  
Mozambique  
Myanmar  
Namibia  
Nepal  
Netherlands  
New Caledonia  
New Zealand  
Nicaragua  
Niger  
Nigeria

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Northern Mariana Islands  
North Korea  
Norway  
Oman  
Pakistan  
Palau  
Panama  
Papua New Guinea  
Paraguay  
Peru  
Philippines  
Poland  
Portugal  
Puerto Rico  
Qatar  
Romania  
Russia  
Rwanda  
Samoa  
San Marino  
Sao Tome and Principe  
Saudi Arabia  
Senegal  
Serbia  
Seychelles  
Sierra Leone  
Singapore  
Sint Maarten  
Slovakia  
Slovenia  
Solomon Islands  
Somalia  
South Africa  
South Korea  
South Sudan  
Spain  
Sri Lanka  
Sudan  
Suriname  
Swaziland  
Sweden  
Switzerland  
Syria  
Tajikistan  
Tanzania  
Thailand  
Timor-Leste  
Togo  
Tonga  
Trinidad and Tobago  
Tunisia  
Turkey  
Turkmenistan  
Turks and Caicos Islands  
Tuvalu  
Uganda  
Ukraine  
United Arab Emirates  
United Kingdom

United States  
Uruguay  
Uzbekistan  
Vanuatu  
Venezuela  
Vietnam  
Yemen  
Zambia  
Zimbabwe

## Geographical Level:

- [National](#) [4]

## Same/similar indicators appears in the following sets:

- [Social Situation Monitor Indicators](#) [5]
- [World Development Indicators \(World Bank\)](#) [6]
- [EU Quality of Life Indicators](#) [7]
- [European System of Social Indicators](#) [8]
- [Eurostat Quality of Life Indicators](#) [9]

## Methodological transparency:

- [Complete methodology available](#) [10]

## Temporal Coverage:

1980 to 2014

## Frequency of Updates:

- [annually](#) [11]

## Link to Methodology:

[Metadata page](#) [12]

## Aggregation level of indicator:

- [Single](#) [13]

## Data quality assesment:

- [No published quality assessment](#) [14]

## Publishing delay:

- [Less than 6 month](#) [15]

## Contribution to the green economy:

At least 2.5 physicians/1000 people is required to serve the medical needs of people. Part of the Green Economy

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mandate to improve the reach of health care is to train more health professionals. (WHO, World Health Report 2006). By extension, adding to the medical workforce helps increase wellbeing and standards of living for all, which is part of Green Economy.

## Cost of accessing data:

- [free of charge](#) [16]

**Potential misinterpretation:** More physicians does not absolutely guarantee access for all. Factors such as geographical distribution -- urban vs. rural settings and country size -- affects the overall accessibility.

**Related Indicator:** [Self reported unmet need for medical examination or treatment, by income quintile](#) [17]

**Potential misinterpretation:** Rating the availability of physicians capable of treating certain diseases/tending to certain groups may not perform the same diagnostics and treatments in other countries. Arguably, it is also up to the populace to decide if medical needs are met.

**Related Indicator:** [Satisfaction with the national health care system](#) [18]

**Potential misinterpretation:** If the number of physicians increasing, but the number of midwives is not?

**Related Indicator:** [Births attended by skilled health staff \(% of total\)](#) [19]

## Use of indicator in mandates, international agreements or legislation:

### Name of agreement or policy:

EU THIRD HEALTH PROGRAMME 2014-2020

### Name of body or organisation:

European Commission

### Link to body or organisation:

[Regulation EU 282/2014](#) [20]



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**Source URL:** <https://measuring-progress.eu/number-physicians-thousand-people>

### Links

- [1] <https://measuring-progress.eu/coll-add/nojs/1678>
- [2] <http://data.worldbank.org/indicator/SH.MED.PHYS.ZS>
- [3] <https://measuring-progress.eu/taxonomy/term/52>
- [4] <https://measuring-progress.eu/taxonomy/term/33>
- [5] <https://measuring-progress.eu/taxonomy/term/93>
- [6] <https://measuring-progress.eu/taxonomy/term/98>
- [7] <https://measuring-progress.eu/taxonomy/term/68>
- [8] <https://measuring-progress.eu/taxonomy/term/74>
- [9] <https://measuring-progress.eu/taxonomy/term/77>
- [10] <https://measuring-progress.eu/taxonomy/term/34>
- [11] <https://measuring-progress.eu/taxonomy/term/17>
- [12] <http://databank.worldbank.org/data/metadata/source/2?series=SH.MED.PHYS.ZS>
- [13] <https://measuring-progress.eu/taxonomy/term/27>
- [14] <https://measuring-progress.eu/taxonomy/term/37>
- [15] <https://measuring-progress.eu/taxonomy/term/23>
- [16] <https://measuring-progress.eu/taxonomy/term/9>
- [17] <https://measuring-progress.eu/self-reported-unmet-need-medical-examination-or-treatment-income-quintile-%C2%A0%C2%A0>
- [18] <https://measuring-progress.eu/satisfaction-national-health-care-system>
- [19] <https://measuring-progress.eu/births-attended-skilled-health-staff-total>
- [20] [http://eur-lex.europa.eu/legal-content/EN/TXT/?;jsessionid=5Qj3TvyCyBqbhfLZzzBttjDGh3gyXkQWYrjhrt36mChMJJlp02XX!2060916514?uri=uriserv%3A0J.L\\_.2014.086.01.0001.01.ENG](http://eur-lex.europa.eu/legal-content/EN/TXT/?;jsessionid=5Qj3TvyCyBqbhfLZzzBttjDGh3gyXkQWYrjhrt36mChMJJlp02XX!2060916514?uri=uriserv%3A0J.L_.2014.086.01.0001.01.ENG)