

A STUDY OF THE FACTORS DUE TO WHICH DOCTORS DO NOT GO AND WORK IN THE PERIPHERY

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SUBMITTED BY:

**DINESH SUBEDI
GANESH CHAUDHARY
MBBS 3rd YEAR
MAHARAJGUNJ CAMPUS
INSTITUTE OF MEDICINE, TU**

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EXECUTIVE SUMMARY

In Nepal only 20% of rural physician posts are filled compared to the 96% in the urban areas. More than half of the doctors registered in Nepal are practicing inside the Kathmandu valley while very few of the doctors are working in the rural areas. This Distribution Imbalance clearly reveals the picture that the rural people are destined to live a life of misery as there is no one to cure their wounds and save them dying due to various illnesses.

This cross sectional study was designed to find out the factors due to which doctors do not go and work in the periphery with the aim of making the concerned authorities aware of them and their gravity.

This study was conducted using proportionate stratified random sampling technique. Questionnaire were distributed to the doctors of various levels (interns, house officer, residents & specialists) working/studying in the various hospitals of Kathmandu and were collected later. 81 doctors were enquired.

The main reasons were inadequate development of their career, faulty government policy and their unfair implementation, underutilization of their qualification, their establishment in the Kathmandu and, family problems, no vacancy announcement. Less physical facilities and less income were not the most important reason for most of them.

For the remedy a sound working environment should be created in the periphery and for this, initiation should first be taken by government.



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INTRODUCTION

Nepal is a developing country and thus there are various difficulties in every part of the government. This is obviously true with the health care delivery system also. A very serious problem that the people are facing is the severe lack of health manpower and especially the doctors.

The World Health Report published by WHO states that in Nepal only 20% of rural physician posts are filled compared to the 96% in the urban areas. The statistics shows the total number of doctors registered to be about 2400 and among those in government service to be about 923. More than half of these doctors are practicing inside the Kathmandu valley while very few of the doctors are working in the rural areas. So the Doctor-Population ratio is very low in the periphery compared to that of the centre. This Distribution Imbalance clearly reveals the picture that the rural people are destined to live a life of misery as there is no one to cure their wounds and save them dying due to various illnesses. So one can imagine how worse the health condition of the people in periphery is.

As with the doctors why are they not serious for their profession? Don't they have any responsibilities for the sick in the periphery? So with these questions on mind we liked to investigate upon the factors that made the doctors uninterested to work in the periphery. And, thus the research study has been designed.

OPERATIONAL DEFINITIONS

- **Periphery:** Place outside Kathmandu Valley
- **Centre:** Kathmandu Valley
- **Doctors:** Persons with an MBBS or higher degree and practicing
- **Doctors who have worked in periphery:**
Doctors who have worked in Periphery for at least one year within the last 20 years.
- **Doctors who have worked only in centre:**
Doctors not meeting the above criteria
- **Specialists:** Doctors with Post Graduate degree [MD/ MS/ M.Phil/Diploma] and have worked only in the centre.
- **General Physician:** Doctors with only MBBS degree and have worked only in the centre.

METHODOLOGY

Site:

The research was conducted inside the Kathmandu valley. The selected health care delivery centers, where doctors (respondents) were enquired, were TUTH, Bir hospital, Kanti hospital, National hospital,

Type of study:

Community based descriptive study

Tool:

Questionnaire

Method:

Questionnaires were distributed to the doctors and, after being filled, were collected later.

Sampling technique and sample size:

- The research was conducted as stratified random Sampling
- The population of the study was doctor. A total of 81 doctors were inquired.
- The study population was divided into two sampling units (strata). They are
 1. Doctors who have worked in the periphery. A total of 27 such doctors were inquired.
 2. Doctors who have not worked only in the center. A total of 54 such doctors were inquired
- Strata (1) was further divided into two sub-strata as
 - 1.i. Specialists. A total of 18 such doctors were inquired.
 - 1.ii. General physician. A total of 9 such doctors were inquired.
- Strata (2) was also further divided into two sub-strata as
 - 2.i. Specialists. A total of 18 such doctors were inquired.
 - 2.ii. General physician. A total of 36 such doctors were inquired.

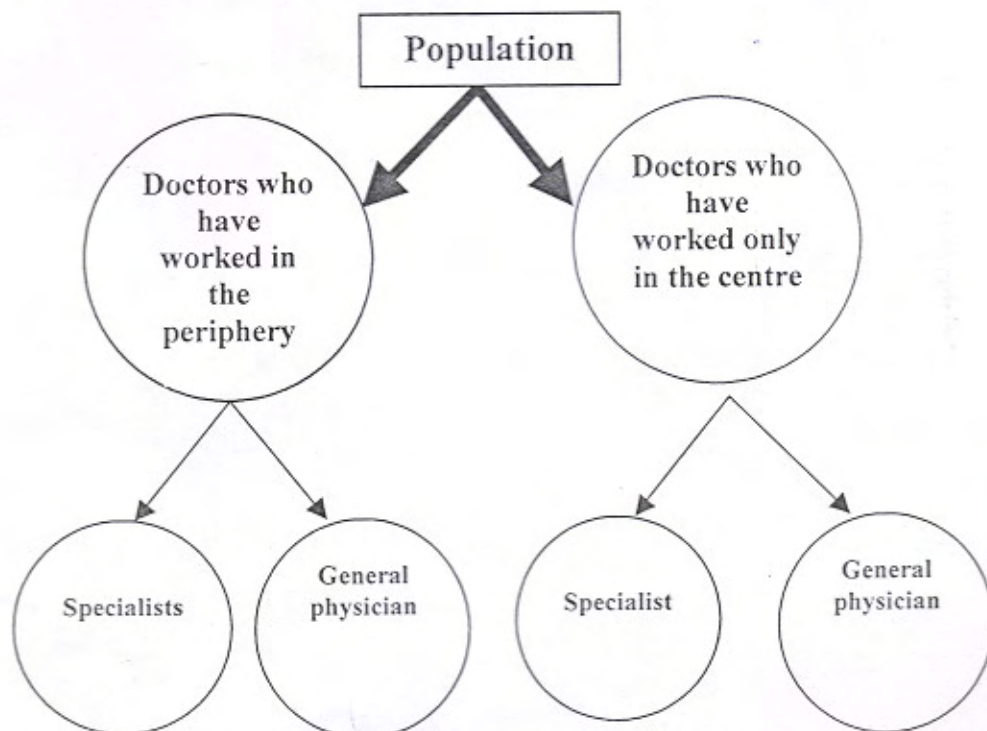


fig.- Diagrammatic presentation of sampling technique

BUDGETING

• Questionnaire development & printing	250nos.* Rs.6	Rs.1500
• Stationery		Rs.2000
• Transportation		Rs.3000
• Allowance for 20 man-days	20man * Rs.100	Rs.2000
• Report printing (25 pgs.)	36 nos. * Rs.50	Rs.1800
		<hr/>
		Total Rs.10300

FINDINGS AND DISCUSSION

- All doctors felt that the people in periphery are extreme need of doctors.
- The doctors were asked if they were interested to work in the periphery and the following result was obtained.

	YES	NO	NO IDEA
TOTAL	63%	26%	11%

According to the sex,

	YES	NO	NO IDEA
MALE	63%	21%	16%
FEMALE	62.5%	37.5%	0%

According to the marital status,

	YES	NO	NO IDEA
MARRIED	56%	33%	11%
UNMARRIED	78%	11%	11%

According to the age group,

	YES	NO	NO IDEA
< 35 yrs	70%	30%	0%
30-50 yrs	75%	25%	0%
>50 yrs	54%	23%	23%

According to the qualification,

	YES	NO	NO IDEA
PG	58%	42%	0%
MBBS	67%	13%	20%

According to the previous work in the periphery,

	YES	NO	NO IDEA
WORKED	67%	33%	0%
NOT WORKED	61%		

The most important reason for their interest to work in periphery was as follows:

	To serve the deprived people	To enrich the experience	Too many doctors in Kathmandu	Others
TOTAL				
WORKED	66%	0%	17%	17%
NOT WORKED	57%	29%	14%	0%
TOTAL	60%	20%	15%	5%

They were interested to work there for following years.

	1yr	1-2 yrs	2-5yrs	>5 yrs	Not certain
WORKED	0%	16%	34%	34%	16%
NOT WORKED	9%	18%	46%	0%	27%
TOTAL	6%	17%	41%	12%	24%

3. All the doctors worked in the periphery while they were in government service. Among them two third (67%) worked as MBBS doctor and one third (33%) as specialist.
4. A. The doctors were asked how much they think they can earn in the various areas of the periphery. Following result was obtained.

i. In the far remote areas:

	A	B	C	D	E	F
WORKED	33%	0%	0%	0%	0%	67%
NOT WORKED	22%	6%	0%	0%	0%	66%
PG	25%	8%	7%	0%	0%	58%
MBBS	27%	0%	0%	0%	0%	73%
TOTAL	26%	4%	4%	0%	0%	66%

ii. In the remote areas:

	A	B	C	D	E	F
WORKED	11%	0%	22%	0%	0%	67%
NOT WORKED	6%	11%	11%	6%	6%	61%
PG	8%	8%	25%	0%	0%	58%
MBBS	7%	7%	7%	6%	6%	67%
TOTAL	7%	7%	15%	4%	4%	63%

iii. In the urban areas:

	A	B	C	D	E	F
WORKED	0%	0%	11%	45%	11%	33%
NOT WORKED	0%	0%	12%	12%	17%	61%
PG	0%	0%	0%	42%	25%	33%
MBBS	0%	0%	20%	7%	7%	66%
TOTAL	0%	0%	11%	22%	15%	52%

Here, A stands for 'I will not practice'

B stands for '<Rs. 2000'

C stands for 'Rs. 2000- 8000'

D stands for '>Rs. 8000'

E stands for 'I do not know'

B. The doctors earned as follows while working in the Kathmandu valley.

	Rs7000-15000	Rs15000-30000	Rs30000-60000	>Rs 60000	No idea
WORKED	11%	22%	22%	11%	34%
NOT WORKED	50%	22%	0%	0%	28%
PG	25%	41%	8%	9%	17%
MBBS	46%	7%	7%	0%	40%
TOTAL	37%	22%	7%	4%	30%

C. The doctors were asked whether they would go and work in the periphery if they get a very attractive salary. Following result was obtained.

	YES	NO
WORKED	56%	44%
NOT WORKED	67%	33%
PG	50%	50%
MBBS	73%	27%
TOTAL	63%	37%

D. Then their expected salary would be as follows:

	Rs30000-50000	Rs50000-100000	>Rs100000
WORKED	60%	40%	0%
NOT WORKED	67%	33%	0%
PG	50%	50%	0%
MBBS	73%	27%	0%
TOTAL	65%	35%	0%

E. Then they will work there for following years.

	1 yr	1-2 yr	2-5yr	>5yr	Not certain
WORKED	0%	20%	60%	0%	20%
NOT WORKED	8%	42%	33%	0%	17%
PG	0%	27%	67%	0%	0%
MBBS	9%	36%	27%	0%	27%
TOTAL	6%	35%	41%	0%	18%

57% of the doctors can either earn Rs.7000-15000(37%) or Rs.15000-30000(22%) per month in Kathmandu. And, it has been found that they can earn around that sum of money from their salary and various allowances if they work in the periphery. In addition, 4% of them think they can earn >Rs.2000 in the far remote, 8% of them think they can earn >Rs.8000 in the remote and 37% of them think they can earn >Rs.8000 in the urban areas.

Thus, for about half of the doctors, there is not so much difference in the income of they can make in the periphery or in Kathmandu. Though, under the present situation, about two third(63%) of them will go and work in the periphery only if they get a very attractive salary.

5. Most (89%) of those who have worked in the periphery and about half (56%) of those who have not worked in the periphery felt that their knowledge and skill will decrease if they work in the periphery. The most important reason for that was as follows.

	Limited/ few cases	Insufficient managing equipments	No Books/ Library/ Information	Inadequate paramedics	Ineffective interaction with colleagues
WORKED	11%	56%	11%	11%	11%
NOT WORKED	0%	40%	27%	0%	33%
TOTAL	4%	46%	21%	4%	25%

6. Most (89%) of those who have worked in the periphery and about three fourth(72%) of those of those who have not worked in the periphery stated that they will miss the opportunity for further studies/ training if they work in the periphery.

7. Almost three fourth (78%) of the doctors, whether they have worked or not in the periphery, felt that their qualification will be underutilized in the periphery. The result obtained was as follows.

8. About joining the government service, they felt as follows:

	YES	NO	Not decided yet	Already in Govt. Service
WORKED	11%	11%	0%	78%
NOT WORKED	17%	33%	50%	0%
TOTAL	15%	26%	33%	26%

9. All doctors who have worked on the periphery and four fifth (83%) of the doctors who have not worked in the periphery felt the government policy regarding doctors and its implementation defective.

The most important reason for that was as follows:

	A	B	C	D	E	F
WORKED	11%	11%	0%	33%	45%	0%
NOT WORKED	0%	0%	12.5%	25%	50%	12.5%
TOTAL	6%	6%	6%	29%	47%	6%

Here,

A stands for 'The way of categorizing the places into far remote, remote, urban areas'

B stands for 'Financial incentives (salary and various allowances)

C stands for 'Duration of posting (according to the act of govt.) in far remote, remote, urban areas and Kathmandu valley'

D stands for 'Eligibility for the promotion and further studies'

E stands for 'Implementation of policy regarding rotation of posting, promotion, and further studies'

F stands for 'Others'

10. About feeling of physically secure while carrying out the duties in the periphery, the result obtained was as follows.

	YES	NO	DON'T KNOW
MALE	16%	74%	10%
FEMALE	0%	75%	25%
MARRIED	6%	88%	6%
UNMARRIED	22%	45%	33%
WORKED	11%	89%	0%
NOT WORKED	11%	67%	22%
TOTAL	11%	74%	15%

11. Two third (67%) of those who have worked in the periphery and about four fifth (83%) of them who have not worked in the periphery felt that cultural and linguistic difference creates a problem but that can be tackled while working on the periphery. But no one felt it as a problem that cannot be tackled.

12. Regarding the family problems, following result was obtained.

	YES	NO
MALE	68%	32%
FEMALE	100%	0%
MARRIED	94%	6%
UNMARRIED	44%	56%
WORKED	89%	11%
NOT WORKED	72%	28%
TOTAL	78%	22%

Their main family problems were education of their children and separation with their spouse/children.

13. Though the doctors mentioned of many problems such as inadequate career development, faulty government policy and their implementation, family problems and insecurity, they were asked about the most important reason due to which they are not working in the periphery was as follows:

CONCLUSION

	A	B	C	D	E	F	G	H	I	J
WORKED	8%	2%	0%	1%	16%	16%	33%	16%	0%	8%
NOT WORKED	5%	0%	8%	2%	32%	38%	2%	10%	0%	3%
PG	12%	2%	0%	4%	23%	17%	20%	18%	0%	2%
MBBS	0%	2%	9%	1%	28%	36%	14%	6%	0%	8%
TOTAL	6%	2%	5%	2%	25%	28%	15%	12%	0%	5%

- Here
- A stands for 'I am established in Kathmandu'
 - B stands for 'Less physical facilities'
 - C stands for 'I'm interested to work there but no vacancy announcement'
 - D stands for 'Less income'
 - E stands for 'Faulty government policy and its implementation'
 - F stands for 'Inadequate career development'
 - G stands for 'Underutilization of qualification'
 - H stands for 'Family problems'
 - I stands for 'Insecurity'
 - J stands for 'Others'

CONCLUSION

It has been found that more than half of the doctors registered in Nepal medical Council is practicing inside the Kathmandu valley while very few of the doctors are working in the rural areas. The most important reason due to which they do not go and work there, though 63% of them are interested to work there, is the inadequate development of their career. Either their knowledge and skill are not going to increase (i.e. decrease or remains same) because of insufficient managing equipment, ineffective/insufficient interaction with colleagues, no books, library, information or they will miss the opportunities for further studies if they are going to work there. Further, they have to face the problem of unfair implementation of the government policy and the policy itself. The rotation of the posting of the doctors in the various areas (far remote, remote, urban and Kathmandu valley), promotion and the distribution of the opportunities for further opportunities are unfair. As well, the eligibility criteria set by government for promotion and for further studies is inappropriate.

Other reasons were underutilization of their qualification, family problems, their establishment in Kathmandu, no vacancy announcement. Less income and less physical facilities were not the most important reason for most of them. . Though, under the present situation, about two third (63%) of them will go and work in the periphery only if they get a very attractive salary. So we would like to recommend the authority to establish a scientific and fair system so that a better person will always be privileged and this will directly uplift the health status of the periphery.

A STUDY OF THE FACTORS DUE TO WHICH DOCTORS DO NOT GO A WORK IN THE PERIPHERY

LIMITATION

There were some difficulties we faced. As the similar type of study was not conducted before and it was very dry difficult to gather a good statistics.

It was originally designed to take 250 samples but the doctors were so busy that many of them couldn't return the questionnaire and we had to satisfy with 81.

The study would have been in a good shape if the doctors who are presently working in the periphery were included but it was beyond our scope as the resource was limited.

Finally, various people uplifted this effort and we have tried to make a best out of the situation.

Post: Junior Manofficer Resident Specialist

*Periphery: = All the places excluding Kathmandu valley, Pokhara, Biratnagar and the medical colleges

A STUDY OF THE FACTORS DUE TO WHICH DOCTORS DO NOT GO AND WORK IN THE PERIPHERY

QUESTIONNAIRE

Name (Optional) : _____ Age: _____ Sex: _____ Marital Status: _____

Permanent address: _____

Qualification:

MBBS

Passed Year

Post graduate(MD/MS/Mphil/Diploma)

Passed Year

Post: Intern Houseofficer Resident Specialist

1. Do you feel that the people in the periphery* are in extreme need of doctors?

a) Yes b) No c) No idea

2. Are you interested to go and work in the periphery*?

a) Yes b) No c) No idea

3. Have you ever worked as a practicing doctor in the periphery*?

(a) Yes b) No

a. If yes,

i. When (how many years back)? (Please state only the latest one)

Date: Fromto(Or Yrs. Back)

ii. For how long?

.....Yearsmonths

iii. You worked there as

1. (a) Government employee (b) Non-government employee

2. (a) MBBS doctor (b) Specialist(PG/Diploma)

Financial Incentives and Benefits

4. You studied MBBS under

a) Scholarship/ without donation scheme b) Self- finance scheme

5. How much do you think you can earn from private practice in the following areas of periphery*?

(For Interns/Residents, it applies only after the completion of Internship/PG)

Please match the areas with your options

Areas

Far remote

i. Remote

ii. Urban

Options

a) I won't practice

b) < Rs 2,000

c) Rs 2,000-8,000

d) Rs 8,000-20,000

e) > Rs 20,000

f) No idea

Periphery: = All the places excluding Kathmandu valley, Pokhara, Biratnagar and the medical colleges

How much can you earn per month while working in Kathmandu valley?

For Interns/Residents, it applies only after the completion of Internship/PG)

- a) Rs 7,000-15,000 b) Rs 15,000-30,000 c) Rs 30,000-60,000
d) > Rs 60,000 e) No idea

Would you go and work in the periphery* if you get a very attractive salary?

- a) Yes b) No

i. If yes, what would be your expected salary per month?

- a) Rs 30,000 -50,000 b) Rs 50,000-100,000 c) > Rs 100,000

ii. Then how long you'll work there?

- a) 1 yr b) 1-2 yrs c) 2-5 yrs d) > 5 yrs e) Not certain

Career Opportunities

Please specify- What happens to your knowledge and skills if you are going to work in the periphery?

- a) Increase b) decrease c) Remains same d) Can't say

i. If it doesn't increase, please state the reasons. (You can choose more than one)

- a) Limited/ Few cases to be managed b) Insufficient managing equipments
c) Books, Library, Information not available d) Inadequate paramedics to help
e) Ineffective interactions with colleagues or they aren't available

ii. Please specify the most important one.

Do you think you will miss the opportunity for further studies/trainings if you are going to work in the periphery?

- a) Yes b) No c) No idea

0. Will it be the underutilization of your qualification in the periphery* where cases, managing equipments and paramedics are few/inadequate?

- a) Yes b) No c) Can't say

Government Policy

1. Are you interested to join government service?

- a) Yes b) No c) not decided yet d) already in Govt. service

2. Do you feel the government policy regarding doctors and its implementation is defective?

- a) Yes b) No c) No idea

i. If yes, please state them

- a) The way of categorizing the places into far remote, remote, urban areas.
b) Financial incentives (salary and various allowances)
c) Duration of posting (according to the Act of Gov.) in far remote, remote, urban areas and Kathmandu valley
d) Eligibility for promotion & further studies
e) Implementation of policy regarding rotation of posting, promotion & further studies
f) Others, If any, please specify

ii. Please specify the most important ⁽²⁾ one.

*Periphery: = All the places excluding Kathmandu valley, Pokhara, Biratnagar and the medical colleges

Miscellaneous

13. Do you feel yourself physically secure while carrying out the duties(case management/ post-mortem) in the periphery*?

- (a) Yes (b) No (c) Don't know

14. Do cultural and linguistic difference (if any) creates a problem while you work in the periphery*?

- (a) No (b) Yes but can be tackled (c) Yes & can't be tackled

15. Do you have to face any family problems if you are going to work in the periphery*?

- (a) Yes (b) No

i. If yes please state them?

- a) Education of children b) Separation with spouse/ family members
c) d)

16. What is/are the reason(s) due to which you are not working in the periphery* now?

(Please choose only those which you can't tolerate/ignore at all)

- a) I am established in Kathmandu.
b) Less physical facilities
c) I'm interested to work there, but no vacancy announcement
d) Less income
e) Faulty government policy & its implementation
f) Inadequate career development
g) Underutilization of my qualification
h) Family problems
i) Insecurity
j) Others, if any, Please specify

i. Please specify the most important one.

17. If you are interested to work in the periphery, please state the reasons.

- a) To serve the deprived people b) To enrich the experience
c) Too many doctors in Kathmandu
d) Others, if any, please specify

i. How long you'll work there?

- a) 1 yr b) 1-2 yrs c) 2-5 yrs d) > 5 yrs e) Not certain