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WHAT INFLUENCED THE EMIGRATION OF PUBLIC DOCTORS TO THE PRIVATE SECTOR: A CROSS-SECTIONAL STUDY AMONG PRIVATE DOCTORS IN KUALA LUMPUR AND SELANGOR

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Background:

Malaysia continues to endure the emigration of public service doctors to the private sector despite various efforts in curbing this situation. This phenomenon result in higher workload for the remaining doctors and inequitable health care for the public especially those of the rural and lower socioeconomic groups.

Materials and Methods:

To determine the factors which influenced the migration of public doctors in Malaysia, a cross-sectional study was conducted between January and June 2009. The subjects of this study were 380 doctors in the private sector in Kuala Lumpur and Selangor who were randomly sampled from the Medical Registry of the Malaysian Medical Council. The study instrument was a self-administered postal questionnaire.

Results:

Response rate was 90.0% of which about 85.0% were from private clinics. There were almost equal number of subjects with regards to groups of sex, race and place of graduation (local vs. overseas universities). Majority of the respondents served in the public sector for less than seven years (70%) and were non specialists when they left the service (80%). The doctors who served in the government service for less than seven years were four times more likely to leave the service ($p < 0.05$). Respondents were dissatisfied with work benefits, pay, rewards, promotion and work operations while in the public service, and hence left the service.

Conclusion:

To curb the migration of doctors from the government service, it is recommended that pay and allowance schemes be regularly reviewed, opportunities for postgraduate studies increased, promotional exercises strengthened, workload reduced by reducing work hours such as shift duties and more flexible working hours and non-monetary incentives encouraged. Scheduled job satisfaction surveys for in-service doctors, and exit interviews or surveys for doctors prior to their leaving the government service should also be done to determine job dissatisfaction factors and to plan for timely remedial actions.

Keywords:

Private doctor, government service, Ministry of Health, dissatisfaction