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Brain Drain Case of Medical Professionals (Study From Pakistan)

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ABSTRACT

Youth is consider as the power of the nation's economy. Talented young professionals with energetic force play a vital role for the country progress. Globalization raise, the demand for skilled manpower and all countries try to attract and retain skilled labor. Whereas the developed nations launch attractive migration policies for skilled labor in order to capture the genius minds. Which brings a shifting of a sharp minds from third world countries to the developed countries. Objective: In this empirical study, we try to delve what are major dynamics of the brain drain. Career path, Salary structure and workplace violence are the major causes of the brain drain of medical professionals. Study design: Cross sectional survey. Setting: Mayo Hospital, Jinnah hospital and Services hospital. Material and Method: 50 young MBBS doctors and 50 young nurses were interviewed. Questionnaire were given to available staff working in different wards. Selected respondents were asked different questions related to job satisfaction, career growth, job stress, workplace violence and different problems in existing job, 10% interviews were conducted as pre-testing before formal data collection, nominal discrepancies and few unnecessary questions were removed from data collection tool. Result: Discrimination, Lack of advance research opportunities are the major pushing factor. Brain drain is useful for underdeveloped countries if they try to convert that into Brain gain. Conclusion: Brain drain plays a significant role in the progress of country e.g. one of the major source of income of Pakistan is the remittances which migrated persons send to their loved ones in their hometowns. There is a dire need that Government should launch such programs to how to get benefit from these sharp brains and their foreign experience.

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INTRODUCTION:

The demand of smart brain raise with the the Globalization (Ghania & Jauhar, n.d.). Every country of the world wants a smart brain in order to lead the economy of the world. The migration of skilled labor to the other country is called Brain drain (Anekwe, 2003). Individuals migrated due to their personal reasons or sometimes due to external forces which effects them (Jauhar, 2016). Undeveloped countries are the main effected territory.

Doctors are considered as the most migrated professionals. 6% world physician were paying services outside their native country. These five countries. Australia, Canada, Germany, UK and

USA have 90% of migrant physicians. 11 Mostly underdeveloped countries are facing the shortage of medical staff.

The medical sector of Pakistan has been ignored by the government authorities due to which it is preoccupied with cure rather than care. Pakistani Government and nation bears a huge loss by shifting of young medical professionals. Pakistan is facing that issue because of lack of consistent government policies. Every year many young medicals doctor, nurses and para medical staff landed to different countries.

As a result, while the country fail to provide basic health facilities to its general public. Handsome number of medical professionals migrated every year to different countries and offered their services to that country. Pakistan is in the list of 57 countries facing Human Resource manage-ment crisis in health sector "migration rate is increase more than 50% of Pakistani highly skilled labour from 6.1 in 1990 to 9.2 in 2000" (Sajjid, 2011, p.3).

Economy of any country depends upon the scientific and technical human force. The migration of doctors and other Para medical staff to different countries has bad affection the country health department. Pakistan is facing that serious issue from last 25 years because every medical professional wants to serve abroad because of higher compensation benefits ,social benefits and better working and living environment.⁵

The number of medical professionals going abroad increasing every year. This situation effects on the developmental ideology of Pakistan and bring a crisis in the medical industry of Pakistan. Every year Pakistani government spends million of rupees on the education of medical professionals but after training they left country due to no proper job placement. Medical professionals of Pakistan are going to other countries at alarming rate. As per data of Pakistan Overseas Employment Corporation, in the last 30 years near about close to 36,000 professionals, including doctors, engineers and teachers, have migrated to different countries.¹⁵

It is estimated that Pakistan lost 1,000 to 1,500 physicians every year. On the other hand medical colleges are not producing doctors as per standard design by WHO doctor-patient ratio (1:300) in the country. In Punjab Public medical colleges are producing 2321 while private medical colleges are producing 2100 doctors. Public medical colleges charge annual fees from 20 thousand to 25 thousand where as private medical colleges charge from rupees 2 million to 2.5 million annually from every student.

In order to meet the health targets, on every student of Medical Sciences Government spend around Rs. 2.000 million. Basically, the Government subsidizes fee of MBBS students hence they have to bear nominal expenditures during studies. Pakistan invests only 2.8% of its GDP on health (2013) which is regrettable because it indirectly reflects the image of inundating economy (WHO, 2015).

But Medical graduates after getting little experience departure to different countries in which USA, UK and Middle East are most preferred location. There are certain factors which motivate these professionals to left their homeland and love ones and work abroad.

NEO CLASSICAL MIGRATION THEORY

Neoclassical Economics Macro-Theory is considered as best approach for explaining the trend of international migration. It begins with the theoretical model explaining internal labor migration in the face of economic development (Corry 1996, Harris & Todaro 1970).

NEO CLASSICAL THEORY IS BASED OF FOLLOWING ASSUMPTIONS

- 1) Wage difference is the main cause of international migration.
- International labor migration is influenced by labor market mechanisms. It means that other kinds of markets (insurance market, capital market) do not have an important effect on the international flows of workers.
- Proper regulation for labor market control the international labor migration (D.S Massey, 2005)

Neoclassical Economics: Micro-Theory arose in response to a macroeconomic model. Following assumptions are characteristic of the abovementioned theoretical model:

1) Cost and benefits analysis motivate the professionals to migrate. If benefits are more than the cost than professioanls migrate (Borjas, 1990).

2) Government policies that effect the earning is also factor of migration (D.S Massey 2005).

LITERATURE REVIEW BRAIN DRAIN OF DOCTORS

There are around 196,040 doctors registered with Pakistan Medical & Dental Council (PMDC) as per the statistics till April 30th, 2015.12 Pakistan is the third largest source of foreign-trained doctors to USA. Until 2013, 12000 Pakistani surgeons and physician were working in USA which is 5 % of foreign physical and surgeons practicing in Untied States Where as in United Kingdom India and Pakistan also rank as the top two sources of foreign doctors. And in future year this migration leads 8 doctors per 10,000 people. There are 3,100 graduates of Dow University of Health Sciences and 1900 are from King Edward Medical University out of 12000 Pakistani doctors in USA.9 During the period from 2013 to 2015, 2150 doctors move to the middle east.4

In Pakistan more the 50% medical graduates left country every year from Punjab. Due to which the health department of not only Punjab whole country is suffering a lot. Due to the deficiency of doctors most of the patients are unattended and no doctor wants to severe in the rural areas. Whereas the entire burden than transfer to the provincial capitals like Karachi, Lahore, Peshawar and Quetta. And doctors are unable to provide satisfactory services to their patients in the above mentioned cities. Half of Pakistani medical graduates leave country every year in these majority is from Punjab province (Poec, 2009). Currently Pakistan has 162,000 registered doctors in the country out of which only 76,000 doctors paying their services in Pakistan in public and private sector (Javaid 2009).

BRAIN DRAIN OF NURSES

Nursing is not generally considered a well-respected job in Pakistan and it is considered that only financial weak females join that sector. To date Pakistan has 162 registered nursing colleges enrolled with over 50 students annually. One of

the primary reasons for the shortage in the nursing industry is due to the general stigma linked with this profession. Nursing is not generally considered a high-prestige job and usually writtenoff as an option for the less-privileged.

In Pakistan nurses production is very low and mostly experienced nurses migrated to developed countries.2 Production of nurses in Pakistan is six times less than its annual requirement. The current existing nurse to patient ratio is 1:40 whereas, the nurse patient ratio suggested by Pakistan Nursing Council is 3:10 in the general ward.2 "However, the actual figure is one nurse is responsible to provide care more than sixty patients in the general ward. This data is an evident that there is a huge shortage of qualified nurses; therefore brain drain in nursing should not be overlooked. In addition, the brain drain of nurse educators is another threat that may cause further damage to the profession. Developed countries now offer more attractive salary packages and other incentives to attract nurse educators; this may cause an acute shortage of faculty in the nursing institutes. The migration of intellectual and skillful nurses from Pakistan to developed countries has adverse consequences on capacity development of the nursing students.

METHODS AND MATERIAL

50 young MBBS doctors and 50 young nurses were interviewed from the main teaching hospital of Lahore i.e Mayo Hospital, Jinnah hospital and Services hospital Initially, a list 500 staff was prepared with the help of deputy Medical Superintendent of these hospitals. Than Questionnaire were given to available staff working in different wards e.g. Main Emergency, Out Door Wards, East, Gynecology department, Cardiology Department, Department, and Surgery Department. Well-structured questionnaire was used as data collection tool. Selected respondents were asked different questions related to job satisfaction, career growth, job stress, workplace violence and different problems

in existing job, 10% interviews were conducted as pre-testing before formal data collection, nominal discrepancies and few unnecessary questions were removed from data collection tool. To measure Career growth Scales developed by Weng and Hu (2009) were used. To measaure the salary satisfaction adapted scale from Artz (2010) and Chen et al., (2012) were used. The workplace violence scale (WVS) developed by Wang was adapted and used to evaluate the healthcare workers' frequency of suffering from workplace violence.¹³ The scale was divided into five dimensions (one item for each dimension, 5 items in total), including physical assault (PA), emotional abuse (EA), threat (T), verbal sexual harassment (VSH) and sexual assault (SA).

RESULTS

Results shows that mostly medical professional which wish to go abroad have less than 5 years' experience and 90% of the professional are not satisfied with their salary structure 83 % of medical professionals said that there is no career growth in their professional in Pakistan where as 84 % professionals said that they faced violence and that violence affects their work efficiency and also the cause of job dissatisfaction.

Table 1 - GNEDER					
	Frequency	Percent	Valid Percent	Cumulative Percent	
MALE	50	50.0	50.0	50.0	
FEMALE	50	50.0	50.0	100.0	
Total	100	100.0	100.0		

Table 2 - AGE				
Age in Years	Frequency	Percent	Valid Percent	Cumulative Percent
24	7	7.0	7.0	7.0
25	4	4.0	4.0	11.0
26	17	17.0	17.0	28.0
27	17	17.0	17.0	45.0
28	11	11.0	11.0	56.0
29	8	8.0	8.0	64.0
30	7	7.0	7.0	71.0
31	14	14.0	14.0	85.0
32	4	4.0	4.0	89.0
33	5	5.0	5.0	94.0
34	6	6.0	6.0	100.0
Total	100	100.0	100.0	

Table 3 - EXPERIENCE				
Years	Frequency	Percent	Valid Percent	Cumulative Percent
1	12	12.0	12.0	12.0
2	18	18.0	18.0	30.0
3	12	12.0	12.0	42.0
4	25	25.0	25.0	67.0
5	18	18.0	18.0	85.0
6	10	10.0	10.0	95.0
7	5	5.0	5.0	100.0
Total	100	100.0	100.0	

Table 4 - SALARY				
Satisfication	Frequency	Percent	Valid Percent	Cumulative Percent
YES	10	10.0	10.0	10.0
NO	90	90.0	90.0	100.0
Total	100	100.0	100.0	

Table 5 - JOB SATISFACTION					
Satisfication	Frequency	Percent	Valid Percent	Cumulative Percent	
YES	20	20.0	20.0	20.0	
NO	80	80.0	80.0	100.0	
Total	100	100.0	100.0		

Table 6 - CAREER GROWTH						
	Frequency Percent Valid Cumulative Percent					
YES	17	17.0	17.0	17.0		
NO	83	83.0	83.0	100.0		
Total	100	100.0	100.0			

Table 7 - VIOLENCE				
	Frequency	Percent	Valid Percent	Cumulative Percent
NO	16	16.0	16.0	16.0
YES	84	84.0	84.0	100.0
Total	100	100.0	100.0	

DISCUSSION FACTORS BEHIND BRAIN DRAIN SALARY

Mostly young doctors from Punjab move abroad reason behind that migration is salary. In Punjab salary of doctor on House Job Rs 38000 per month where as in KPK it is Rs 62000 per month. Whereas final year Post Graduate trainee of KPK is getting monthly Rs 109000 per month with addition PG allowance of Rs 30000 thousand per month on the other hand Punjab Government is giving just Rs 72000 thousand per month with no additional allowance. This is the main reason due

to which young doctors multiple times come on the roads for strike. Similarly that case happens with the nurses. Starting salary in Pakistan of nurses is Rs 14000 per month where as in private hospitals they earn easily range from Rs 20,000 to Rs 22,000 per month. Nurses work in different shifts due to which their family life is disturbed and its difficult for them to maintain a work life balance Nursing pay scales are not upgraded with the inflation rate. For Pakistani doctors now a days middle east is the favorite destination where even, Pakistani doctors without any further examinations getting 20 times more salary as compared with what they were getting in Pakistan. A study shows that 95% and 65% graduates of AKU and BU want to emigrate because of low salary.

WORK LOAD

In all public hospitals on average Pakistani doctors has two 32-hour shifts in a week this is termed as a "call". Which is very difficult for any professional to work 32 hours without sleep where as in developed countries doctors have 12 hour working day maximum and 48 hours week working (maximum). In saudia arbia doctors work 5 days in a week most common 9.5 hours in a day maximum they work for 48 hours in a week. Doctors get 45 days annual vacations per year, along with 4 days off on Eid-ul-fitr, 5 days off on Eid-ul-Azha and 2 days off on national day. Where as in Pakistan doctors performed duties on Eid Holidays and no concept of annual vacations in the Pakistani department of health exist.

WORK PLACE VIOLENCE

Work place violence is one of the biggest issue in the public hospitals of Pakistan. Different cases come in the screen in which patients attendants harass the doctors. Doctors protested multiple times against the brutal behavior of the attendants and they demand that Government provide them proper security and launch one patient one attendant policy. In Pims when one doctor refused to give facility because of non-availability of instrument three doctors were than

tortured by the family of the patient. Due to lack of facilities by the Government doctors and other Para medical staff is fail to provide satisfactory services to the patients because they are already dealing more patients for their capa city. This violent behavior gives stress to the medical professional and affect their job performance. Most doctors in south Asian continent are worried about their safety reason is that government unable to provide proper security.

CAREER GROWTH

Young doctors of Pakistan seen on roads many times for the struggle of fighting of their rights and demand of a career path. Which motivates mostly professionals life to go abroad and enjoy their professional there? Mostly young doctors are working on contract basis and government of Punjab especially not offer proper career path due to which many time YDA goes for strike.

CONCLUSION

In order to control the brain drain of medical professional government increase the salaries of medical professionals as on emergency basis and introduce a career path for them in order to provide a safe working environment government restrict one patient one attendant policy and deployed a security so that in case of any incidents they provide security to the doctors.

LIMITATIONS OF RESEARCH

This research is conducted within the context of Pakistan. But In other country context factors may be different.

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