



PERCEPTIONS AND ATTITUDES OF MEDICAL INTERNS REGARDING WORKING IN RURAL AREAS: A CROSS-SECTIONAL STUDY

Community Medicine

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ABSTRACT

Background: The rural health system in India has long been disadvantaged by a shortage of health staff, including doctors. Hence this study was undertaken to assess perceptions and attitudes of medical interns regarding working in rural areas.

Methodology: Present cross-sectional study was conducted among 198 medical interns in a tertiary care center in Nagpur. Data was collected using predesigned and pretested questionnaire.

Results: Majority of respondents perceived that current status of rural service was unsatisfactory and only 22 (11.11%) were willing to work in rural areas. The factors having strongly negative influence were lack of facilities and infrastructure, no job satisfaction etc. Most common suggestions given were provision of financial incentives and better facilities.

Conclusions: Medical students' overall attitude towards working in rural areas was not favorable. For improving and advancing rural health care services, favorable policies and strategies need to be implemented.

KEYWORDS

Perceptions, Attitude, Medical interns, Rural areas

INTRODUCTION

India's rural health system has long been disadvantaged by a shortage of health staff, including doctors.(1) Provision of quality health care in rural areas where majority of Indian population resides represents a major challenge in today's scenario.(2)

Majority of the students graduating from medical colleges mostly tend to cluster in cities where they have better living conditions, schools for their children, higher income, promotion opportunities, social recognition and greater job satisfaction.(3) Bringing them to rural, remote and underserved areas is a herculean task faced by the government.

Added to this is the emerging trend of medical graduates preferring to pursue post graduation which has become a mandatory thing that prevents them in entering rural sector to deliver health care needs.(4)

In an attempt to find a solution to this colossal problem and keeping in mind that there is a dearth of literature on this topic the present study was conducted to assess perceptions and attitudes of medical interns regarding rural services.

Methodology

Present descriptive cross-sectional study was carried out on all 198 medical interns (universal sampling) in a tertiary care center in Nagpur. Approval from Institutional Ethics Committee was taken. Permission from institutional head and internship coordinator was obtained. Informed consent was taken from the study subjects after apprising them of the nature and purpose of the study. Data was collected by interview technique using a predesigned and pretested questionnaire.

Respondents were asked to rank factors that influence their perceptions regarding rural service on a 5 point Likert scale with a score of 1 representing a strongly positive influence for opting for rural service whereas a score of 5 representing a strongly negative influence and a score of 3 indicated neutral influence. Scores of more or less than 3 indicated negative and positive influence respectively.

Study subjects were also enquired about their suggestions for improvement in the existing rural health system. Data was analyzed using the statistical software, EPI info 7.2.1.0.

RESULTS

Among 198 study subjects, 46.97% were male & 53.03% were female. The mean age of study subjects was 23 ± 1.78 , the range being 21-25 years. In the present study majority of respondents perceived that the

current status of rural service was unsatisfactory and only 22(11.11%) were willing to work in rural areas.

Multiple factors are responsible for the lack of motivation among medical interns to take up rural service. Factors influencing the perceptions of interns about rural service are shown in table 1. The factors having strongly negative influence were lack of facilities and infrastructure (4.76), no job satisfaction (4.52), lack of professional carrier growth opportunities (4.36), substandard living conditions (4.31), problems of access and communications (4.29) and limited clinical exposure (4.24).

The factors having strongly positive influence were rural background with geographical and ethnic affinities (1.68), desire to serve the needy (1.74), learn administrative skills (1.81), distaste for commercialization in medical field in urban areas (2.35) whereas no exposure to rural life (3.18), extension of duration of student life (3.23) and social isolation (3.34) were factors which had neutral influence.

Suggestions for improvement in existing rural health system are depicted in table 2. Most common suggestions given were financial incentives (95.4%), better facilities (89%) and more opportunities for training for need based skill development (84.85%). Interns also suggested better living conditions, time bound promotions other incentives and better schooling etc. as measures for improving attitude towards rural services.

Table 1 Factors that influence the perception of interns about working in rural areas.

Sr. no.	Factors	Mean score
1.	Lack of infrastructure/poor facilities	4.76
2.	No job satisfaction	4.52
3.	Lack of professional growth opportunities	4.36
4.	Substandard living conditions	4.31
5.	Problems of access & communication	4.29
6.	Limited clinical exposure	4.24
7.	Administrative problems	3.96
8.	Political interference	3.82
9.	Less prestigious	3.71
10.	Lack of personal safety and security	3.51
11.	Lack of appreciation & recognition of their contribution	3.48
12.	Social isolation	3.34
13.	Extension of duration of education/ student life	3.23

14.	No exposure to rural life	3.18
15.	Dysfunctional referral system	3.10
16.	Lack of educational facilities for children	3.05
17.	Ease of admission to PG courses	2.67
18.	Distaste for commercialization in medical field in urban areas	2.35
19.	Security of government job	2.04
20.	Opportunity to learn administrative skills	1.81
21.	Desire to serve the needy/ vulnerable	1.74
22.	Rural background & geographical & ethnic affinities	1.68

Table 2. Suggestions for improvement in existing rural health system.

Sr. no.	Suggestions	No.	Percentage (%)
1	Financial incentives/ monetary compensation	189	95.45
2	Better facilities / infrastructure	177	89.39
3	More opportunities for training for need based skills development	168	84.85
4	Better housing & living conditions	156	78.78
5	Time bound promotions	147	74.24
6	Other incentives like awards/ PG seats	120	60.60
7	Better schooling & other facilities for children	109	55.05
8	Assurance of personal safety/security	103	52.02
9	Filling of vacancies by fresh recruitment	78	39.39
10	Less political interference	39	19.69

DISCUSSION

There is a severe scarcity of health care providers in rural India. Providing adequate rural healthcare services by trained doctors is an uphill task faced by our government presently(4)

Reluctance in joining rural services is customary in our setup hence we endeavored to identify the factors which act as impediments and discourage medical personnel from working in rural areas. The major reasons for non-willingness to work in rural areas in our study were similar with the findings of other studies with lack of facilities and infrastructure, no job satisfaction, lack of professional carrier growth opportunities and substandard living conditions topping the list.-(1,57)

This study found that students from rural background with geographical & ethnic affinities and those who had desire to serve the needy had more favorable attitude towards working in rural areas, which is in coherence with the findings of Singh R et al(2) Other reasons were opportunity to learn administrative skills, distaste for commercialization in medical field in urban areas and security of government job. Similar reasons were perceived in a study done by Choudhary Y et al whereas Jayashree S in their study revealed the major reason for willingness was opportunity for working independently(5,6)

Poor monetary gains emerged as a major dissatisfying factor. Hiking their salaries, better incentives for their work and improving the hospital facilities can motivate these doctors to serve rural population.-(811)

CONCLUSION:

The attitude of the medical students towards importance of rural healthcare needs to be positively fostered as it plays an important role in their joining health services in rural areas.

Prudent incentives with pertinent changes in medical education system, appropriately benefiting both the health workers and rural population need to be implemented.

In order to motivate doctors to work in rural areas it is imperative that favorable policies and strategies are rolled out which will go a long way in improving and advancing rural health care services.

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