

Editorial note: We reproduce below a report on the MO & HO Survey in 1995.

Report on a Survey on the Concerns of Young Doctors in Singapore, 1995

INTRODUCTION

The SMA Medical Officers' Committee was formed in December 1994 to address issues concerning young doctors in Singapore. Young doctors have expressed dissatisfaction over their salary, working hours and career opportunities. To determine the extent of these problems, a survey was conducted by the Committee in February 1995. This paper highlights the results of the survey, together with recommendations to solve the problems.

METHOD

A postal questionnaire survey was sent out to all doctors who were granted provisional or full registration by the Singapore Medical Council between 1990 and 1994. There were two parts to the questionnaire. Part 1 contained close-ended questions with graded responses, requesting for respondents' level of satisfaction with salary, quality of teaching, working hours, chances of getting postings of choice, chances of obtaining a traineeship and long term plans. Part 2 consisted of open-ended questions to enable respondents to express their thoughts freely on their answers to Part 1 and to make additional comments.

RESULTS

A total of 1263 survey forms was sent out and as on 2 May 1995, 210 replies were received, giving a response rate of 16.6%. Of the 206 respondents who indicated their designations, 23 (11.1%) were house officers (HO), 102 (49.6%) were medical officers (MO), 81 (39.3%) were trainees (MOT) or medical officer specialists (MOS).

The majority (81%) of respondents felt that their salary was below average or poor. None perceived it to be above average or better. Almost three-quarters of respondents found their working hours too long.

Half of the respondents perceived the teaching provided to be average or better. Only 9% felt that the teaching was good.

There was a general perception that it was difficult to obtain postings of choice and traineeships. Only 15% of respondents felt that their chances of getting a posting of choice were above average or better. This was affirmed in the finding that 94% of respondents were in favour of an MO posting exchange service coordinated by the SMA. Likewise, only 11% of respondents felt that their chances of being awarded a traineeship were above average or better.

The three main issues which respondents felt were important to them and would like to be addressed were hours of work (42%), salary (40%) and night-call allowance (32%). Other issues mentioned include career prospects, traineeship glut, quality of supervision/teaching, postings and manpower administration. In Part 2 of the survey, respondents elaborated on these issues, offering constructive comments and suggestions. The majority took into consideration the interests of both the government and the individual, recognising financial and manpower constraints.

DISCUSSION

We recognised that with a response rate was only 16.6%, we were unable to draw conclusions from the remaining 83.4%; whether they were the silent majority who were contented with the present situation or those who were indifferent towards postal surveys. Nevertheless, the results confirm that the murmurs of disquiet often heard in doctors' common rooms are not merely anecdotal but are a reflection of young doctors' sense of insecurity and frustration.

The low morale of the young doctors was palpable. This seemed to stem from the increasingly hostile environment under which they worked. Patients are now more demanding and litigious. Senior doctors, hospital administrators and Ministry officials were perceived not to be supportive of young doctors, leaving them to defend themselves in times of trouble.

Long working hours in many hospital departments remain the norm. The propensity to make mistakes when fatigued and the intolerance of hospital administrators to these mistakes have made this issue the foremost concern amongst young doctors. Working 80 to 100 hours a week and 30 hours at one stretch twice a week in certain departments is unacceptable in the context of a developed country's healthcare system. We feel that this situation requires urgent attention.

Low pay was highlighted by the majority (81%) of respondents. With the recent media focus on revision of civil service salaries to match that of the private sector, young doctors felt that their salaries should be comparable with their contemporaries in other professions who were working shorter hours and earning more. Many felt that the call allowance for MOs should be revised as the current rate of \$40 for the first four calls of the month has not been adjusted to reflect increased cost of living since it was introduced two decades ago. Some have pointed out that at this rate, Macdonald's part-time waiters earn more per hour. In contrast to the unwillingness to revise this allowance, the consultation fee scheme for senior doctors has been

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regularly revised to meet their expectations. In Hong Kong, the recent salary revision for doctors employed by the Hong Kong Hospital Authority applied across the board. In Malaysia, the revision in “off hours allowance” benefitted both senior and junior doctors.

Another area of concern was career advancement and training. Related issues on the lack of teaching, the unfair allocation of doctors’ postings, the lack of career direction and poor career prospects were also brought up. Most of those who voiced these concerns were non-trainee MOs – the largest category of medical officers. We felt that this group of doctors were the most neglected.

The survey has shed light on the many pressing issues facing young doctors today. The uniformity of the responses underscores the point that these issues are not new revelations but long standing grievances and contentions. We felt that there is a lack of feedback channels available to young doctors. While we do not dispute the necessity of the 5-year bond, we felt that this bond contributed partly towards the apparent lack of attempt by the Ministry to solicit feedback from young doctors. It appeared that feedback from senior doctors is taken more seriously because they are the ones with bargaining power.

There is a pressing need to address the concerns of young doctors. We cannot afford to have a generation of discouraged and disillusioned doctors. We hope that the survey is not a one-off project but a platform for ongoing dialogue between young doctors and the Ministry.

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