

Job Satisfaction among Sudanese Community physicians

Abdalla E A Simsa¹, Modawy E Modawy¹, Omer Ibrahim Abdallah¹, Alashary A Hamdoon¹.

¹Department of public health, College of health sciences at Al Leith, Umm Al-Qura University, Kingdom of Saudi Arabia.

Abstract: This is a descriptive cross-sectional, institutional-based study. It aimed to assess the degree of job satisfaction of the Sudanese community physicians. Self-administered questionnaires were sent to all Sudanese community physicians (82) who are present at the time of this study in their locations of work. One-third of the Sudanese community physicians are females, and 90.2% of all the Sudanese community physicians are married. Only 34.6% of them were found to be satisfied with their jobs. Neither age nor marital status is significantly associated with job satisfaction. Female Sudanese community physicians are more highly significantly dissatisfied by their work as compared to their male counterparts. They are all highly dissatisfied by the availability of the promotion opportunities, as the chances for continuous medical education or doing subspecialties. One of the most dissatisfying factors was found to be the low salaries and incentives, as it is highly significantly associated with job satisfaction. As the result of this wide spread dissatisfaction 71.6% of the Sudanese community physicians have the tendency to leave their current governmental posts, under the condition that they find new better satisfying posts inside or abroad.

Keywords: job satisfaction, community physicians, dissatisfaction, ministries of health, Sudan.

I. Introduction

Job satisfaction is an important issue nowadays especially in the medical field as it is interrelated with the quality of health care, its continuity, the physician's performance, productivity, commitment, retention and resignation. Moreover, dissatisfaction leads to increased physician's absenteeism, lower productivity, increased turnover, and hence adversely affects the quality and outcome of the health care system. In contrast, a satisfied health workforce is more committed, highly productive and more likely to be creative, innovative, initiative and enthusiastic (1,2). There are many factors that can affect the level of job satisfaction; some of these factors include the payment, opportunities for professional development, opportunities for using skills and abilities, the quality of working conditions, social relations and the job itself (1,2). The long civil war in the South and the recent one in the West had resulted in a worse internal displacement problem. This displacement increases the numbers of vulnerable groups which has a negative impact on the health situation. Sudan also experienced repeated humanitarian emergencies related to drought and flooding exposing much of our population to major infectious and parasitic diseases. Adding to this the recent increasing burden of non-communicable diseases and poverty. This situation can facilitate disease transmission, epidemics occurrence and makes tremendous difficulties on health care delivery beside disease control and surveillance. All these factors had severely affected the health status of this country, its health infrastructure and economy. The Sudan House Hold Health Survey (SHHS), conducted in the year 2006 was the first national survey covering the whole country since more than two decades ago because of the long conflicts in Sudan (3). This survey revealed that the percentage of children who were fully immunized as recommended by WHO and UNICEF (BCG, Polio-3, DPT-3 & Measles) were 41.4%, IMR in the Sudan as a whole was 81/1000 live births and the under 5-MR was 112/1000 live births. Estimates of neonatal, post-neonatal and child mortality rates were respectively 41, 40, and 34 per 1000 live births, while MMR was found to be 1107/100,000 live births. This is only part of Sudan's epidemiological profile showing an unacceptable reality calling for urgent interventions. According to the FMOH ten years' strategic plan for H.R.H. (2004-2013) Sudan health care system is in need of 462 community physicians to run this system (4). At the present time there are only 90 of them joining this system, 6 of them were sent abroad for further studies (5 for short courses and 1 for a long course). As only 90 (28.8%) out of 313 registered community physicians are joining this system (5) it is obvious that these important cadres present a challenge to the official health care system, as the majority of them (71.2%) are working in places other than governmental facilities.

II. Materials and Methods

This is a descriptive cross-sectional, institutional-based study. It includes all Sudanese community physicians who are registered at Sudan Medical Council and currently working in Sudan ministries of health. A Self-administered questionnaire was used to collect the required data. Data was analyzed using the SPSS statistical package. Chi-square test as statistical tool was used for measuring the significance of the study results.

III. Results

Fig (1) is showing that 71.6% of the community physicians have the tendency to leave their governmental jobs.

Fig (2) is showing that only 34.6% the community physicians were found to be satisfied with their jobs.

Fig (3) is showing the different levels of job satisfaction among the community physicians

There is no significant a statistical relationship between age and job satisfaction Table(1) .

There is no significant a statistical relationship between marital status and job satisfaction Table(2) .

There is a highly significant statistical relationship between gender and job satisfaction Table (3).

There is a significant statistical relationship between having subspecialty and job satisfaction Table(4) .

There is a highly significant statistical relationship between the availability of continuous education and job satisfaction Table(5) .

There is a highly significant statistical relationship between monthly income and job satisfaction Table (6).

Table (1) showing relationships between age and job satisfaction of the, Sudan ministries of health, Sudan (n=81)

AGE GROUPS	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
30 – 40	7 28 %	18 72 %	25 100 %
41 – 50	18 43.9 %	23 56.1 %	41 100 %
60 – 51	3 20 %	12 80 %	15 100 %
TOTAL	28 34.6 %	53 65.4 %	81 100 %

Chi-square = 3.46

P value = 0.1

Table (2) Relationship between marital status and job satisfaction, Sudan ministries of health, Sudan. (n=81)

Marital Status GROUPS	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
Married	24 32.9 %	49 67.1 %	73 100 %
Single	3 42.9 %	4 57.1 %	7 100 %
Divorced	1 100 %	0 0 %	81 100 %

Chi-square = 2.19

P value = 0.33

Table (3) Relationship between gender and job satisfaction, Sudan ministries of health, Sudan. (n=81)

GENDER	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
Male	24 44.4 %	30 55.6 %	54 100 %
Female	4 14.8 %	23 85.2 %	27 100 %
Total	28 34.6%	53 65.4%	81 100%

Chi-square = 6.987

P value = 0.008

Table (4) Relationship between having subspecialty and job satisfaction, Sudan ministries of health, Sudan. (n=81).

Having Subspecialty	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
YES	9 56 %	7 44 %	16 % 100
NO	19 29 %	46 71 %	65 % 100
Total	28 34.6%	53 65.4%	81 100%

Chi-square = 4.14

P value = 0.04

Table (5) Relationship between the availability of continuous medical education and job satisfaction, Sudan ministries of health, Sudan. (n=81).

Availability Of continuous Education	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
YES	22 66.7 %	11 33.3 %	33 % 100
NO	6 12.5 %	42 87.5 %	48 % 100
Total	28 34.6%	53 65.4%	81 100%

Chi-square = 25.36

P value = 0.000

Table (6) Relationship between monthly income and job satisfaction, Sudan ministries of health, Sudan. (n=81)

INCOME/MONTH	Job satisfaction		TOTAL
	Satisfied	Dissatisfied	
500 to 1000	3 % 17.6	14 82.4%	17 % 100
1001 to 1500	13 % 29.5	31 70.5%	44 % 100
1501 to 2000	6 % 50	6 50%	12 % 100
2001 to 2500	6 85.7 %	1 14.3 %	7 % 100
2501 to 3000	0 0 %	1 100 %	1 % 100
TOTAL	28 % 34.6	53 % 65.4	81 % 100

Chi-square = 12.53

P value = 0.01

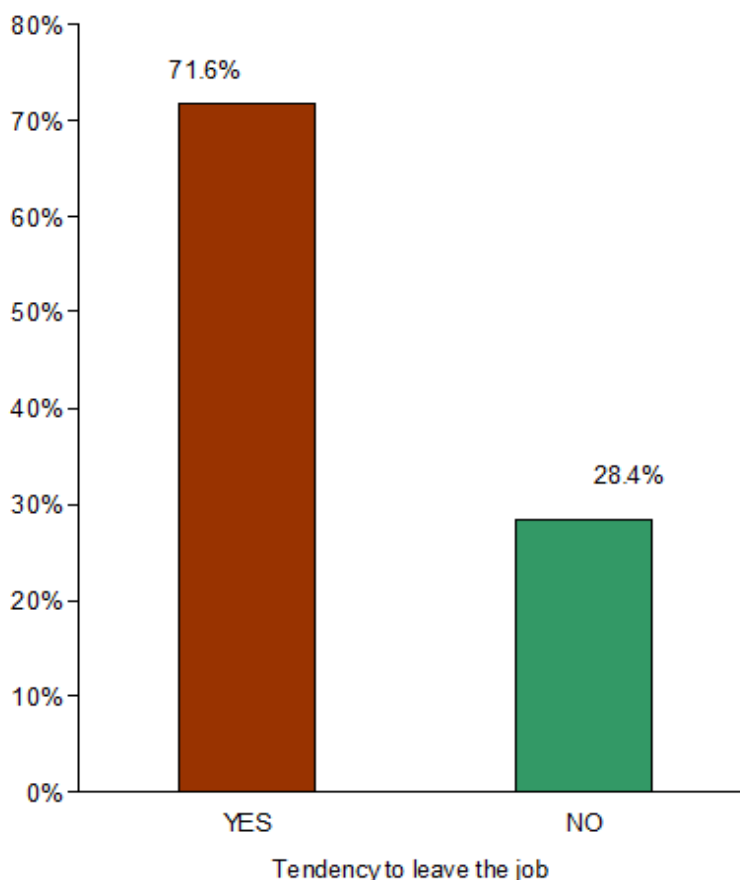


Fig (1) The percentage of the community physicians who have the tendency to leave their governmental jobs, Sudan ministries of health, Sudan. (n=81)

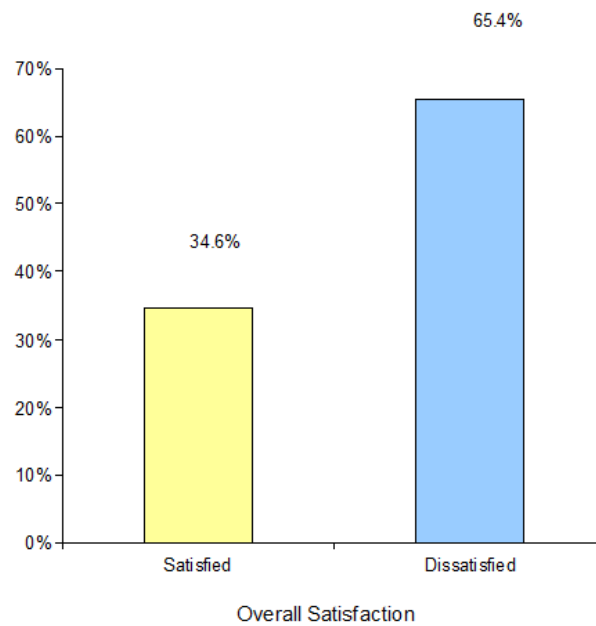


Fig (2) The overall job satisfaction among the community physicians, Sudan ministries of health, Sudan. (n=81).

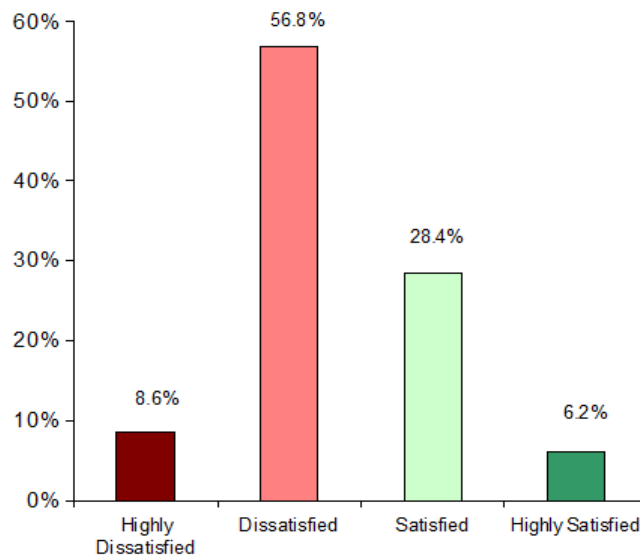


Fig (3) Distribution of the levels of job satisfaction among the community physicians, Sudan ministries of health, Sudan. (n=81).

IV. Discussion

The current study showed that there is no significant statistical association between marital status and job satisfaction. In contrary, a similar study conducted in Egypt (6) showed that married physicians are significantly satisfied with their jobs. It also showed that age was not significantly associated with job satisfaction. This was found to be in line with a similar study conducted in Egypt (6) which also reflects that age was not significantly associated with job satisfaction. Unlike these two previous studies a longitudinal study conducted in Norway showed that job satisfaction increases with increasing age (7). This study showed that there is significant statistical relationship between gender and job satisfaction, as females are highly significantly dissatisfied with their work (Table3). In comparison to that a similar survey conducted in Saudi Arabia (8) showed that there is no statistical significant difference in job satisfaction between males and females doctors.Regarding the promotion opportunities this study showed a significant statistical association between having the opportunity to do subspecialty and job satisfaction(Table6). As well as that it reflects a highly significant statistical association between the availability of continuous education and job satisfaction (Table7).

A similar study conducted in Egypt (6) agreed with these results as it showed a significant association between opportunities for promotion and job satisfaction. These results agreed with the results of a similar study conducted in Pakistan (9) showing that 92% of the doctors are not satisfied with their career prospects, and 78% of them would like to leave their jobs and go to serve abroad (Fig1). One of the most dissatisfying factors was found to be the low salaries and incentives, as it is highly significantly associated with job satisfaction (table 8). This also agreed with the results of a study conducted in Egypt (6) showing that the vast majority of doctors are not satisfied with their salaries and incentives as only 2.9% of them are satisfied with their income. Beside that a study conducted in Pakistan (9) showed that there is strong correlation between income and job satisfaction. It was found that 71.6% of the Sudanese community physicians have the tendency to leave their current governmental jobs (Fig1).

Only 34.6% of the Sudanese community physicians had expressed overall satisfaction with their jobs (Fig 2). In this regard, similar studies were conducted in Pakistan (9) and another one in Egypt (6) showed that the overall satisfaction was found to be 35% and 38.7% respectively. These results are consistent with the finding of this study. Similarly, a study conducted in USA indicates that 59% of the family physicians were satisfied with their jobs (10). Moreover; the present study had demonstrated that only 6.2% of the Sudanese community physicians were highly satisfied with their jobs (Fig3). A similar study was conducted in Pakistan (9) and it showed that only 10% of the doctors are highly satisfied with their jobs, which is slightly more than what was found in this study. In contrary, a longitudinal study conducted in Norway (11) showed that 51% of doctors are found to be highly satisfied with their jobs, and in particular the public health specialists are showing steady increase in their job satisfaction.

V. Conclusion

The current study concluded that 65.4% of the Sudanese community physicians are not satisfied by their jobs. In particular, they are found not to be satisfied with their income, the unavailability of chances for training and professional development. The vast majority of the Sudanese community physicians (71.6%) have the intention to quit due to wide spread job dissatisfaction.

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