

More Pediatricians Needed for Children's Health

By HE JINGWEI (China Daily)

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A doctor sees a young patient in a clinic in Chiping county in Liaocheng city, East China's Shandong province. [Photo/IC]

Had the long-awaited two-child policy not been announced at the end of last year, the severe shortage of pediatricians in China would probably have not attracted public attention. The irony is that the most populous nation is running short of not only babies, but also physicians to attend babies. While long queues and big crowds in Chinese public hospitals are not new, those in pediatric departments can be even more appalling. Waiting overnight just to register an ill child is fairly common experience for anxious parents and grandparents. Now, the expected baby boom and anticipated growing demand for child and maternal care have prompted medical policymakers to pay serious attention to the issue.

The weak capacity of pediatric departments in China is complex and multifaceted. First, the philosophy of medical education prevalent in the late 1990s somehow preferred general medical training over specialized pediatric training, compounded by the perceived declining demand because of low birth rate. And starting from 1999, many medical schools stopped offering undergraduate programs in pediatrics.

Postgraduate education alone has not been able to train enough pediatricians. In stark contrast to the mounting needs, the number of pediatricians in China has actually dropped. For every 10,000 children under 14, China has just 5.3 pediatricians, a figure much lower than the international standard. Estimates suggest 200,000 more physicians are needed to fill up the personnel gap in pediatric departments.

Second, growing demand and shrinking supply combine to mean heavy workload for physicians. The average outpatient load for pediatricians is 2.6 times heavier than other specialist physicians. It is not uncommon for those in major tertiary hospitals to attend more than 100 children a day while putting in more than 20 hours of overtime a week. Many studies have reported severe burnout syndrome and occupational stress of Chinese pediatricians, leaving this profession often the last choice when medical graduates choose their specialties.

Third, the worsening brain drain is aggravated by professional peculiarities of pediatrics. For example, in part because patients are children, pediatrics is inherently associated with greater risks, easy to trigger medical disputes. While the escalating tension between doctors and patients has been widely reported in China, including attacks on medical professionals, pediatricians appear to be even more vulnerable.

Many Chinese physicians earn commissions from pharmaceutical companies for the medicines they prescribe—among other additional incomes to compensate their low salaries. And quite a large number of hospitals also tie physicians' prescriptions to their bonuses, which in general account for half of their real take-home incomes. But because the variety and amount of medicines that can be prescribed to children are significantly less, pediatricians' incomes tend to be much lower, further undermining their morale. Heavy load, higher risk and dispute-prone together with relatively low income have made pediatrics an avoided profession in the medical circle, exacerbating the brain drain.

Without doubt, addressing the shortage entails concerted efforts by several ministries, the healthcare sector and the education system. Early this year, the healthcare authorities announced that 140,000 more pediatricians would be trained by 2020. Despite this good move, two caveats warrant attention.

First, staff retention is as crucial as recruitment. More comprehensive measures are needed to create conducive environment for pediatricians, such as pay increase and the government guiding hospitals to alter their remuneration system to narrow the income gap between pediatricians and other physicians.

Second, while the long wait of children and parents and the overwhelming workload of physicians are certainly attributable to personnel shortage, the weak referral system is also responsible for the matter. Partly because of the lack of trust in community doctors, most patients, especially those in cities, have become accustomed to seeking care directly from specialists of tertiary hospitals which are constantly crowded.

This has not only led to huge wastes of medical resources, but also further increased the burden for tertiary hospital doctors. Hence, the primary healthcare system with essential pediatric capacity needs to be strengthened.

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