

Abstract

Professional development is a methodical process oriented for futuristic adaptation of a certain profession, aimed to target on precise objectives. Successful development of a profession is mainly contributed by two factors acting from either sides, namely the personal factors from the side of the professional and the organizational factors from the side of their employed organization (theory of two factors). There are many problems have been identified in relation with professional development of any employment and they can be examined under these two factors.

When consider the medical profession, the continuous medical education (CME) and its related activities are regarded as the main processes of professional development. At the present set up of government health sector, there are many problems concerned in these CME programs and professionals are facing immense difficulties to participate them. In year 2002, 90% of health education, in service programs was organized by central health ministry authorities and 80% of them were held at Colombo. In same year only 12% of programs were organized by provincial health authorities due to lack of facilities. At present, the available facilities of CME programs are not uniform and equally distributed in peripheries of the country. Therefore, this information reveal that the opportunities for development are not equally beneficial in all medical professional in government health sector and this was selected as the primary problem of this study. This problem was examined in relation to selected factors belong into above mentioned two factor categories (personal and organizational).

The general objective of the study is to examine different type of factors in professional development of medical profession and the ways of their behavior in relation to development opportunities of medical professionals in government health sector. Under this aim, the behavior of personal and organizational factors was measured in different grades of hospitals (primary, secondary and tertiary care) separately. The comparative data yield in this manner was used to suggest the recommendations of the study.

Basically this research has been done as the methodology of qualitative studies, comprising with quantitative techniques to measure the perceptions and experiences of medical officers. The appropriate variables were selected from a perceptual survey and associated into the main study as factor dimensions. According to the nature of conducting of the study, it could be regarded as a cross sectional prospective type of research. When consider the sampling of study population at their locations, it also having some features of the cohort study.

This research was done in three selected provinces (western, central and north central) by distributing self administered questionnaires among 159 medical officers, as selected study sample in three different grades of hospitals (primary, secondary and tertiary care hospitals). According to the study objectives and selected variables under each factor category, the perceptions of medical professional were examined as the causes related for the loosing of opportunities of professional development. The data analysis was done along the relationship of afore mentioned two types of factors with the context of the problem of the study as behavioral patterns (behavioral magnitude and position) of factor dimensions. The computerized statistical technique of factor analysis was used in this purpose for the reduction of data.

The results of the study have yield some expected as well as unexpected findings in this exercise. The pre-occupied judgments and hypotheses of the study were proved and disproved evidently, based on the study results. When compare these two factor categories, organizational factors exerted higher gravity than personal factors at the problems related with CME in all grades of hospitals. Facilitating factors are the most powerful factors among all organizational and personal factors especially in PCHs and SCHs. Adequacy of exposure and priority encouragement are potent organizational factor variables in all grades of hospitals. In personal factor category, interfering factors are more prominent than other two types of personal factors at the problems related with CME. Personal economy is the most important personal factor variable in all grades of hospitals. According to the results of the study, desiring and refusing factors are not important in medical professional development.

The results of open ended questioning have substantiated many of the conclusions and the recommendations of the study were made on this fruitful out comings. On this basis most feasible short, medium and long term recommendations are presented for the improvement of MPD. Systems for the provision of adequate facilities with the introduction of modern information technology, sharing of them for imparting of knowledge of professionals and effective mobilization of human resource are identified as short term corrective measures. Motivation of professionals by establishing an active feedback and rewarding systems are suggested as most efficient medium term recommendations of the study. Finally, ethical advancement of medical professionals and implementation of CME policy in medical profession are presented as long term corrections in MPD.