

# Why physicians leave

## Implications for physician retention policies

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# Background to Project

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- ❑ The provinces of Newfoundland & Labrador (NL) and Saskatchewan (SK) have a net loss of medical graduates to other provinces and elsewhere
  - ❑ There is little known about the factors that influences locally trained physicians to stay in their home province
  - ❑ There has been very little generational comparison of physicians reasons for choosing work location.
- ❑ The objectives of the study were twofold:
  1. Explore factors which caused locally trained physicians to stay in or leave their home province
  2. Compare factors according to generation



# Background to Project Continued

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1. Completed quantitative study focusing on the location of medical graduates from Memorial University of Newfoundland (MUN) and the University of Saskatchewan (U of S)
  - Identified correlations between outcome variables (practicing in Canada, practicing in SK/NL) and various independent variables
2. Conducted interviews with MUN and U of S graduates to explore themes related to practice location

# Methods

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- ❑ Conducted semi-structured interviews of 48 randomly selected physicians who had graduated from either the U of S or MUN
  - ❖ U of S graduates were divided into 4 ‘generations:’ 1960s, 1970s, 1980s and 1990s
  - ❖ MUN graduates were divided into 3 ‘generations:’ 1970s, 1980s, and 1990s.
  - ❖ Graduates were divided into 2 locations:
    - ❑ those currently working in their home province
    - ❑ those currently working outside their home province

# Methods Continued

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- ❑ Graduates provided the following information:
  - ❑ Number of locations they worked over their career
  - ❑ Their reasons for choosing each location
- ❑ Interviews were recorded, transcribed and coded thematically
- ❑ Barer et al's (1999) framework was used to code six groups of factors related to practice location decisions:
  1. personal background factors
  2. professional education factors
  3. professional practice factors
  4. personal/family factors
  5. community factors
  6. economic factors

# Findings: Personal Satisfaction & Professional Practice Factors

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- Poor personal satisfaction and professional practice factors were commonly reported as factors which caused work relocation

- Consistent among all generations

“The minute things turn sour in terms of my clinical practice, I’m having hassles, or I’m not getting the OR exposure that I think I ought to get, if those things were to change, I’d leave in a heartbeat” (U of S-trained physician currently practicing in SK).

# Personal Satisfaction & Professional Practice Factors Continued

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- I knew that I would still be able to practice in an academic centre in St. John's so I'd have the best of both worlds basically that an academic center would in Montreal or Toronto. However I would also be able to have a nice lifestyle. In bigger centers such as Montreal or Toronto, there's the high pressure for research and huge patient volumes and that sort of thing and so, I think you are sort of driven by your job. You don't have a lot of lifestyle, I suppose from that point of view, and that was important to me (MUN-trained physician currently practicing in NL).

# Personal Satisfaction & Professional Practice Factors Continued

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- “You see, baby boomers and the people older than the baby boomers, they had a work ethic that said, “If I’m going to be a doctor, and something has to get done, I will put that work ahead of any other plans I have.” I think they call the younger generation the millenniums. They will never put work ahead of their plans” (U of S trained physician currently working outside SK).

# Findings: Political policies or crises

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- **Political policies or crises** were cited by older generations as factors which motivated relocation

“A draft lawyer advised me, if I left the country, before I was served with a draft notice, I wouldn’t be a draft dodger. And so that’s what we did. I was a sitting duck for the draft” (U of S-trained physician currently practicing in SK).

# Political policies or crises continued

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- “Plus of course this was not long after the medicare crisis [...] It was very clear to me [...] that Saskatchewan had a government that was basically hostile to physicians, and would continue that way indefinitely in the future. [...] [The original legislation] gave the government total power over what a physician could or could not do, where he could practice, it gave the government total power to literally take a physician by the neck from the time he graduated, and send him anywhere in the province to do anything they chose. [...] that happened just in my last year of medicine. However the intentions of the government were made very clear in that legislation. So out of my class of 40 I think only 2 stayed in the province” (U of S-trained physician currently working outside of SK).

# Political policies or crises continued

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- “I haven’t seen much from government to entice me to stay. [...] I’m particularly peeved with the promise of primary care reform, the early 90’s” (MUN-trained physician currently practicing in NL).
- “The government of Newfoundland is known for having a lack of commitment to doctors. [...] So the province is not interested in you know adequately funding the system so the doctors can provide adequate care to patients [...] So you know, Newfoundland seems to be awash in money and at least I’m not aware of any change or health human resource strategies. I get more job offers from Ireland” (MUN-trained physician currently practicing outside NL).

# Findings: Economic factors

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□ Very few physicians cited economic factors as motivating them to relocate

■ Consistent among all generations

“I mean there’s nothing financial – I could go to the States tomorrow and make a lot more money, so it’s not the money side of things, you know?” (MUN-trained physician currently practicing outside of NL).

# Economic Factors continued

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- “I never looked at dollars and money, and what I can make here, as opposed to what I’d make in BC or somewhere else, and if I had been told the difference, I don’t think it would have made any difference anyhow” (U of S-trained physician currently practicing in SK).
- “I haven’t found money to be a great satisfier” (U of S-trained physician currently practicing in SK).
- “I’m not really you know driven by money” (MUN-trained physician currently practicing in NL).

# Economic Factors continued

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- “Anyone who says money is not a part of the issue is basically not telling the truth. [...] We are a rare commodity and to attract commodity it’s required significant enumeration. [...] The reason why people are leaving is that Ontario and Alberta and other jurisdictions are offering very attractive packages to medical students and they have debt that they can’t really look away from those opportunities. We have to get serious about being truly competitive” (MUN-trained physician currently working in NL).
- “One of the biggest problems in Saskatchewan is that, is that when our students graduate, our salary grid is lower than Ontario and Alberta, our 2 lucrative neighbors, we’re not too badly out for Manitoba, but [...] they have better settlement grants” (U of S-trained physician currently practicing in SK).



# Conclusions

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- Professional practice factors and personal satisfaction are more influential than remuneration in decisions to remain in a practice location
- Policies aimed at improving work environments may lead to improved long-term retention than initiatives that focus on economic factors alone



# Next Steps

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- Currently in data collection stage of a large-scale survey
- Participants are MUN and U of S medical graduates from selected years spanning 4 decades
- Respondents provide number of moves, along with factors motivating these moves

# Acknowledgements

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