

Original article:

Medical Practice Preferences among Indonesian Moslem Fresh Graduate Medical Doctor during Internship Waiting Period and the Related Factors

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Abstract:

Introduction: Indonesian Medical Doctor Internship Program, or internship, is a preregistration professional training program for medical school graduates in Indonesia. The candidates have to wait about six months to participate in the one-year internship program which is becoming mandatory for the application of medical license. By laws, medical practice by internship program candidates during internship waiting period (six months or more) is forbidden. In the context of sharia, some scholars considered these medical practices as haram. The study was first to investigate the medical practice preference during internship waiting period and the related factors. **Method:** 107 respondents were taken from Moslem doctors that passed national board exam. Religiosity was measured using adapted DUREL (Duke University Religion Index) questionnaire and reported as DUREL Score. University origin religion base (UORB); university origin funding source (UOFS); and pre-internship medical practice (pIMP) were asked using multiple choices questionnaires. All of the questionnaires were asked using google form. Then, Spearman correlation two-tailed test was conducted. The obtained significant variables tested in binomial logistic regression test. Result: DUREL score had a weak negative significant correlation to pIMP ($r = -0.197$; $p < 0.1$), UORB had a weak positive significant correlation to pIMP ($r = 0.295$; $p < 0.1$), and UOFS had an insignificant correlation to pIMP ($p > 0.1$). The binomial logistic regression test showed that higher DUREL score led to lower preference in doing pIMP although UORB of Islam led to the opposite ($OR = 3.6$ 90%CI 1.85-7.35). **Discussion:** Religiosity seems to prevent pre-Internship doctors to do pIMP although the UORB predicts otherwise. However, the correlations of the variables are weak. A further study is needed to learn the motive of pIMP and bring the solution to the problem.

Keywords: internship program; waiting period; medical practice

International Journal of Human and Health Sciences Vol. 05 No. 01 January'21 Page : 50-54
DOI: <http://dx.doi.org/10.31344/ijhhs.v5i1.233>

Introduction

Indonesian Medical Doctor Internship Program, or internsip, is a preregistration mandatory professional training program for medical school graduates, educated with competency-based curriculum¹. After passing national exit exam called *Uji Kompetensi Mahasiswa Program Profesi Dokter* (UKMPPD), the candidates for the internsip program will have to complete one-year internship in the hospital and community health

center before they can eligible for a medical license². Therefore, finishing internsip program is required by fresh graduate medical doctors to pursue career as medical practitioner or to start residency program.

Implemented for the first time in 2010, internsip program enacted some technical problems. To participate in the program, the candidates need to fulfill some administrative requirement after they pass the national exit exam³. During most of the

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period of time, the candidates should wait their application in some required papers. The problem is the process should be linear, which a paper is a requirement for other papers application that took places in different councils located in Jakarta, the capital of Indonesia. In the fastest way which most of the candidate took nowadays, there are 6 months of waiting period since the candidates took the national exit exam to participate in internship program⁴.

The waiting period for a medical school graduate is a plight. They have surpassed any academic obligation and considered capable to do medical practice since they passed the competency-test national exit exam, but they were not eligible to do legal medical practice yet. Some candidates were lucky enough to still have financial support from the family. Some candidates were accepted as research assistant in some academic health center and get paid⁴. Most of the candidates were doing medical practice without any legal medical license⁴. Citing UU 29/2004, the medical license was aimed to protect the patients and the doctor from any harmful activities of medical practices⁵. In the perspective of sharia, it is mandatory to obey the current legal law as it was said by Allah in Al-Ma'idah 5:1⁶:

"O you who believe, fulfill all contracts."

Also in An-Nahl 16:91⁶:

"Fulfill the covenant of Allah when you have taken it, and do not break oaths after their confirmation while you have made Allah a witness over you. Verily, Allah knows what you do."

A Hadith⁷ also said: "The Prophet (ﷺ) said, "A Muslim has to listen to and obey (the order of his ruler) whether he likes it or not, as long as his orders involve not one in disobedience (to Allah), but if an act of disobedience (to Allah) is imposed one should not listen to it or obey it."

To date, there is no published scientific data to map the activities of fresh graduate medical doctor during internship waiting period. The available data are the popular survey organized by national medical students' organization. Since Indonesia is the most populous moslem country and some literature cite how religion shaping the perspective among medical doctors, we intended to investigate the medical practice preference during internship waiting period and the related factors among Indonesian moslem fresh graduate medical doctor.

Therefore, we conducted this study to identify the medical practice preference among Indonesian moslem fresh graduate medical doctor during Internship waiting period.

Methods

Study Population

Indonesian moslem fresh graduate doctors who passed national board exam in February 2018 and May 2018 were asked randomly. The doctors were alumni from different universities which were divided according to the university origin religion base (UORB) and university origin funding source (UOFS). UORB consisted Islam based university and non-Islam based university and UOFS consisted state university and private university. The pre-Internship medical practice (pIMP) was asked and divided the respondents into "Yes" for doing pIMP and "no" for never doing it.

Religiosity

Religiosity was measured using translated and validated Duke University Religion Index (DUREL) questionnaire^{8,9}, adapted into version for moslem¹⁰, that was spread using Google Form. The translated and validated DUREL questionnaire consisted four items scaled from 1 – 5, then the result was summed to get the DUREL score of the respondents.

Statistical Analysis

UORB, UOFS, and DUREL score were analyzed using Spearman two-tailed correlation test to pIMP. The variables which have significant correlation were analyzed using binomial logistic regression test to pIMP. We used 90% as our confidence interval.

Results

107 respondents that were included in the study consisted 27.1% males and 72.9% females. There were 48.6% respondents who were the alumni of Islam based university while the alumni of non-Islam based university were 52.4% of the respondents. 80.4% respondents were alumni from public universities and the rest (19.6%) were from private universities. Lastly, there were 56.1% respondents who admitted their pre-internship medical practice while 43.9% of the respondents denied it. The details could be viewed in table 1.

Table 1. Respondents Characteristics

All Respondents (n=107)	
<i>Gender</i>	
Male, n(%)	29(27.1)
Female, n(%)	78(72.9)
<i>UORB</i>	
Islam, n(%)	52(48.6)
Non-Islam, n(%)	55(51.4)
<i>UOFS</i>	
State, n(%)	86(80.4)
Private, n(%)	21(19.6)
<i>pIMP</i>	
Yes, n(%)	60(56.1)
No, n(%)	47(43.9)

UORB: University origin religious base; UOFS: University origin funding source; pIMP: preinternship medical practice.

UORB did not give any significant correlation to pIMP ($p > 0.1$). On the other hand, DUREL score had a weak negative significant correlation to pIMP ($r = -0.197$; $p < 0.1$). In the opposite, UORB showed a weak positive significant correlation to pIMP ($r = 0.295$; $p < 0.1$). Then, we analyze the correlation between UORB and DUREL score and found there was no significant correlation between them ($p > 0.1$).

UORB and DUREL score, which were significant in the spearman correlation test to pIMP, were analyzed using binomial logistic regression test to pIMP. The test then showed that doctors with higher DUREL score will less likely to do pIMP (OR=0.75 90%CI 0.57-0.99). However, doctors who are the alumni from islam-based university will more likely to do pIMP (OR=3.6 90%CI 1.85-7.35).

Discussion

Religion has the advantages of empowering the individual by connecting the soul to a broader community, and to a superior force which might in turn enhance psychological stability^{11,12,13}. A recent report in United States showed that the religion or spiritual beliefs influenced the medical doctors' decision to become a medical doctor or to choose a specialty choice¹⁴. Other study which conducted among primary care physicians (PCPs) showed that PCPs who considered themselves religious were more likely to report a strong sense of calling in the practice of medicine¹⁵. This finding

elicited that religion has been influenced process of important decision making of a doctor. To date, current study is the first study to describe the religiosity among medical doctors in Indonesia.

According to the legal jurisdiction in *UU No. 29 Tahun 2004* Section VI Article 29 Verse (1)⁵, every doctor is compulsory to have a registration letter (*Surat Tanda Registrasi/STR*) from Indonesian Medical Council or *Konsil Kedokteran Indonesia* (KKI) and in Section VII Article 36¹⁰, every doctor is compulsory to have practice permit (*Surat Izin Praktik/ SIP*) to do medical practice. For fresh graduate medical doctors, in order to get STR and SIP, they are mandatory to do *Internsip* program as ordered in PERKONSIL No.1/KKI/PER/ I /2010³. Therefore, pIMP is illegal according to the current law. pIMP has a greater risk of malpractice and not appropriate with patient safety, which is the priorities of health system.¹⁶

Religion is needed in developing of professionalism in medical practice. Core values of profesionalism defined in the Physicians charter are competence, honesty, patients' confidentiality and responsibilities. In Islam there are terms *ihsan* and *taqwa*, where *ihsan* means to worship or act as if seeing God, or at least, worship or act as if God saw. while *taqwa* itself is defined as running the commands and avoiding the prohibition of God.¹⁷⁻¹⁸ Islam is prohibiting doing something illegal^{6,7}, thus doing pIMP is also breaking rule in Islam. This explains why the DUREL score which measures religiosity correlated negatively toward pIMP preference.

In Indonesia there are several types of universities including religious-based medical universities or we called UORB. where, besides teaching about medical science, this university also teaches about religion which should be more than state universities or UOFS. It is expected that graduates have a higher level of knowledge about religion. It is also suggested the DUREL score should be higher in UORB graduates, and conversely the incidence of conducting pIMP is lower, because it is not in accordance with religious teachings.^{19,20} However, the study showed that the UORB did not give any significant correlation to DUREL score and pIMP.

This might be affected by other factors that we did not measure because there are limited sources that talked about this matter.

Conclusion

This study could only show that higher religiosity correlated with lower preference in doing pIMP. Many factors still should be found and calculated in order to know the motives in doing medical practice during waiting period before internship, as it is an illegal action. A further study is needed to identify the motive and bring solution to the problem.

Limitation

Limitation of this study include lack of sources that talked about this matter.

Conflict of interest: None declared

Acknowledgement:

We acknowledge and thank all people who dedicated their time and participate in this study

Author's contribution

Data gathering and idea owner of this study: MIS, AAH, EY, ZZY

Data gathering: EY, MIS, ZZY

Writing and submitting manuscript: ZZY, EY, AAH, MIS

Editing and approval of final draft: AAH, MIS

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