

# PHYSICIANS WORKING CONDITIONS UNDER BRAZILIAN LABOR AND EMPLOYMENT

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**Abstract** In Brazil, Physician employment is regulated by several federal laws. However, it is common to find physicians working in hospitals under contracts signed with individual companies. In such cases, there are no restrictions to maximum working hours. In addition, in 2017, Brazilian Labor and Employment laws passed through deep flexibility, making it easier for employers to decrease the protection of workers against the power of the capital, which worsened the health conditions of both physicians and patients. In 2018, right before the presidential elections, voters pointed out that violence and health are the worse problems in Brazil. One year after that, most Brazilians, who answered a new survey, indicated that health was the country's worse problem. In this article, I will analyze the relationship between physicians' working conditions and the situation of the Brazilian health system.

**Keywords:**  
physicians,  
labor,  
employment,  
law,  
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# DELOVNI POGOJI ZDRAVNIKOV V BRAZILSKEM DELU IN ZAPOSLOVANJU

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**Povzetek** V Braziliji zaposlitev zdravnika ureja več zveznih zakonov. Vendar je običajno, da v bolnišnicah delajo zdravniki na podlagi pogodb, podpisanimi s posameznimi podjetji. V takšnih primerih ni nikakršnih omejitev glede trajanja najdaljšega delovnega časa. Poleg tega, so leta 2017 brazilski zakoni o delu in zaposlovanju dodali globoko fleksibilizacijo, kar za delodajalca pomeni zmanjšanje zaščite delavcev pred močjo kapitala, kar ima za posledico poslabšanje zdravstvenih razmer tako zdravnikov kot pacientov. Leta 2018 so tik pred predsedniškimi volitvami, volivci opozorili, da sta nasilje in zdravje največji težavi v Braziliji. Leto pozneje, je večina Brazilcev, ki so odgovorili na novo raziskavo, navedla, da je dejansko najhujši problem države prav zdravje. V tem članku bo analizirano razmerje med delovnimi pogoji zdravnikov in situacijo brazilskega zdravstvenega sistema.

**Ključne besede:**

zdravniki,  
delo,  
zaposlovanje,  
pravo,  
Brazilija

## 1 Introduction

In February 2019, Brazil had a population of more than 211 million people.<sup>1</sup> In contrast, in January 2018, the country had 452.801 physicians, which comes to a much higher number of physicians than the recommendation of the World Health Organization, which is the one physician per each 1000 inhabitants. Then, why would the quality of health care available to part of the population be so questionable?

There are two main answers. The first is the distribution of physicians throughout the different areas of the country. While in the Southeast, we have 2,81 physicians per inhabitant, we have 1,16 physicians per inhabitant in the Northeast.<sup>2</sup> A study conducted by the São Paulo Federal Council of Physicians in 2020 showed that three Brazilian states have more than three physicians per 1.000 inhabitants: Distrito Federal (5,54), Rio de Janeiro (4,44), São Paulo (3,31).<sup>3</sup> The second answer is the different working conditions among these physicians.

Nevertheless, the labor regulation in Brazil is federal, which should mean that all workers are subjected to the same labor conditions, which is not entirely true. Here, I would like to open a parenthesis. As an example drawn from the Law 13467/17 (which changed article 444 of the Consolidation of Labor Laws, among various other working standards), it allows certain workers (whose salary exceed around 2.000 Euros a month) to solely negotiate conditions in their employment contract, directly with the employer. Before, such negotiations should be intermediated by the Physicians' labor unions.

Considering the last official indicators (from December 2019), which shows an unemployment rate of 11,8%, while the number of informal employment (people who work without formal contract) reaches 41,1% of the active population (the highest number since 2016), it is unlikely that workers have much of a voice during negotiations of its employment contracts.<sup>4</sup> In fact, physicians' labor conditions in Brazil are directly related to the services rendered to patients. Of course,

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<sup>1</sup> <https://www.ibge.gov.br/apps//populacao/projecao/>.

<sup>2</sup> <http://www.simers.org.br/noticia/desigualdade-distribuicao-medicos>.

<sup>3</sup> [https://portal.cfm.org.br/images/stories/pdf/estudo\\_demografia\\_junho.pdf](https://portal.cfm.org.br/images/stories/pdf/estudo_demografia_junho.pdf).

<sup>4</sup> <https://exame.abril.com.br/economia/taxa-de-desemprego-fica-em-11-no-4o-trimestre-revela-ibge/>.

infrastructure and equipment are essential for the medical service, however, it is not everything.

Physicians facing long working hours and inadequate salaries are less prone to have the necessary energy to devote to their patients. According to Federal Law n° 3.999/1961, for a working load of 20 hours a week, a physician cannot be paid less than three minimum wages a month (around 620 Euros) for 20 hours of work per week. Even though the National Federation of Physicians recommends that for such working time, the salary should be around 3.015 Euros.<sup>5</sup>

Brazilian labor and employment law has been subjected to a fast movement towards liberalization. That has been affecting most of the workers in the private sector. Undoubtedly, the decrease in the labor protection for workers, and the alarming unemployment, makes a perfect scenario for employee exploitation. I pointed out that according to the official statistics, in Brazil, more than 25 million people are either unemployed or working outside Labor Law protection.

This article will analyze how physicians working conditions in different regions of the country vary around Brazilian territory and affect them and its patients.

## 2 My experience: Itacaré, Bahia, 2016

In the Spring of 2016, my husband and I decided to take a vacation in Itacaré, Bahia, Southeast of Brazil. The paradisiac beaches were breathtaking!



**Figure 1: Itacaré, Bahia, Southeast of Brazil.**

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<sup>5</sup> <http://www.fenam.org.br/2020/01/22/confira-o-valor-do-piso-fenam-para-2020/>.

Unfortunately, on the 3rd day of our vacation, I became very ill and needed rescue from the emergency service.

Taken to the only public emergency hospital in town, we were surprised with the lack of resources to give me any diagnostic. The emergency service was unable to take any test (even the most basic blood test). Furthermore, the walls were full of the mold, and the facilities needed a renovation (not to say, demolition) for many years.

The photo bellows illustrates the scenario we found in that emergency room.<sup>6</sup>



**Figure 2: Hospital da Posse em Nova Iguaçu, RJ**

The physician who saw me, a very young professional, told me how helpless he was to perform his duties, considering the lack of conditions of the hospital. It was impossible even to take a basic blood test.

The only solution was to go back to São Paulo, where I could go to a hospital with decent facilities. That physician in Itacaré was helpless. No matter how much he had studied and devoted his time to improve his academic knowledge, it was clear that where he was working, it was impossible to make a diagnose, even less, to cure me.

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<sup>6</sup> <https://extra.globo.com/noticias/rio/no-hospital-da-posse-em-nova-iguacu-doentes-dividem-espaco-com-infiltracoes-7176321.html>.

Still in 2019, the Itacaré local government searched for help to find resources to make possible the hospital correctly serves the community.<sup>7</sup>

This experience illustrates one of the reasons why we have such an uneven distribution of physicians around Brazil.

### **3 How much do physicians earn in Brazil?**

The answer depends on various factors. Time of graduation, private practice, working to a private or public employer, and having a specialization, even though the legislation mentioned before, sets just one minimum working wage.

According to a Human Resources consulting company, Catho, a general practice physician in Brazil, earns an average of 1.260,19 Euros per month, more than 600 Euros higher than the minimum wage set by the Federal Law n° 3.999/1961.<sup>8</sup>

On the other hand, a prestigious Brazilian university, Fundação Getúlio Vargas, in 2010 published a list of the 40 best we'll paid jobs in Brazil. On the top, it was Medicine for those who pursued a Master or Doctoral degree (1.710 Euros per month considering the salaries of all the jobs performed). In 6th place were the doctors without a post-graduation diploma (1.279,28 Euros per month).<sup>9</sup>

### **4 Why are physician's work not well valued?**

First of all, it is essential to point out that not all physicians in Brazil have well-paid salaries. Inequalities related to the professional work area, even due to gender and racial discrimination, are a reality and create wage gaps.<sup>10</sup>

This graphic shows the factors analyzed in a critical study published in the British Medical Journals, proving the wage gap between male and female physicians in Brazil (Mainardi et al., 2004).

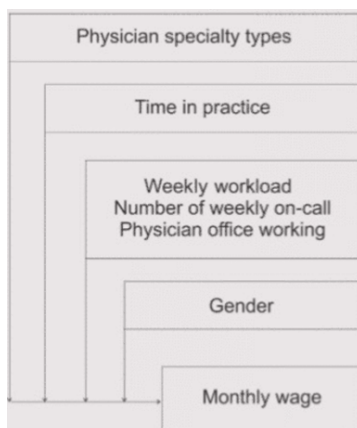
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<sup>7</sup> <http://bahiaja.com.br/bahia/noticia/2019/11/08/prefeito-de-itacare-busca-apoio-para-funcionamento-do-hospital,122872,0.html>

<sup>8</sup> <https://www.catho.com.br/profissoes/medico-clinico-geral/>

<sup>9</sup> <https://www.cps.fgv.br/ibrecps/clippings/mc253.pdf>

<sup>10</sup> <https://bmjopen.bmj.com/content/9/4/e023811>



**Figure 3: Wage gaps**

Once again, de labor de-regulation taken into effect in 2017 after Congress passed the Federal Law 13467, made other forms of hiring physicians, without guaranteeing minimum labor rights, easier.<sup>11</sup> On the other hand, race also plays an essential role in deciding salaries.

In 2017, a study from the organization OXFAM pointed that a Black physician earns 88% of the salary paid to a White physician.<sup>12</sup>

The site Drop Out is very known in the US among physicians that decided to abandon the clinical practice. The opening page announces: “The leading network for jobs beyond traditional clinical and academic roles”.<sup>13</sup> In its section “Forum” there are several stories of physicians who don’t want to work in hospitals or more predictable jobs. A study conducted by the SNWS Institute in 2013 showed that physician is the second more stressful job in the World, coming after only IT professionals.

<sup>11</sup> In 2013 the “Physicians Demography” by the São Paulo Physicians Council showed that only 274.011 were officially hired, while there were a number of 388.015 professionals registered as Physicians.

<sup>12</sup> <https://epocanegocios.globo.com/Brasil/noticia/2017/09/renda-de-brancos-e-negros-so-deve-ser-equiparada-no-brasil-em-2089.html>.

<sup>13</sup> <https://www.docjobs.com>.

Another big problem is the violence that physicians and other health workers are victims too. In Brazil, this is not different, and the Federal Council of Physicians recently launched a campaign to fight this sort of violence.<sup>14</sup>



Figure 4: Brazilian Physicians Federal Council

## 5 The difference in depth

Even though the Federal Law 1999/64 indicated a minimum number of twenty working hours per week for physicians, many work much more than that. For example, in 2004, only 17% of the physicians working at the prestigious Hospital Sírio Libanês, a private institution, had only one job (Birolini et al., 2011). This condition helps physicians who need to improve their earnings, sometimes due to the salary inequality based on racial and gender conditions.

Considering the enormous size of the Brazilian public health system (which is considered universal, meaning that either contributing or not with the social security system, every person has the right to *edição* assistance) and the inadequate distribution of physicians all over the country, difficulties to receive medical assistance for the most indigent population are expected. The lack of good services,

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<sup>14</sup> [https://portal.cfm.org.br/index.php?option=com\\_content&view=article&id=28166:2019-04-15-14-22-35&catid=3](https://portal.cfm.org.br/index.php?option=com_content&view=article&id=28166:2019-04-15-14-22-35&catid=3).



not available to all the patients, commonly leads to dissatisfaction for both – professionals and patients.<sup>15</sup>



**Figure 5: R7 site**

For example, in the public health system, the wait to see a doctor in an emergency room can vary from minutes to hours and even days. The Federal Council of Physicians ruled that the wait in an emergency room cannot be more than two hours.<sup>16</sup> However, the length of wait depends on the medical service facility. In the private Hospital Sírio Libanês, the wait at this moment (2 pm, 05.03.2020), varies from none (for Cardiology) to 15 minutes (for Orthopedics).<sup>17</sup> On the other hand, in a public hospital, in the same town of São Paulo, the patient can wait for up to 5 hours until he or she is seeing by a doctor.<sup>18</sup> In this case, the patient can complain either to the facilitator to the Federal Council of Physicians, but it is the Public Attorney's Office attribution to take the case to the Judiciary.

The low public investment in the health system also makes it difficult to improve the quality of the service. According to the governments (federal, state, and local), the Physicians Federal Council has been making alerts about the issue, which, according to the governments (federal, state, and local), are not consistently recognized as genuine.<sup>19</sup>

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<sup>15</sup> <https://noticias.r7.com/saude/fila-espera-e-falta-de-medicos-para-hospitais-brasileiros-cuidar-de-crianca-da-prejuizo-06052015>.

<sup>16</sup> <https://veja.abril.com.br/saude/cfm-tempo-de-espera-em-pronto-socorro-deve-ser-de-ate-duas-horas/>.

<sup>17</sup> <https://www.hospitalsiriolibanes.org.br/hospital/Paginas/tempo-de-atendimento.aspx>.

<sup>18</sup> <https://agora.folha.uol.com.br/sao-paulo/2020/02/paciente-chega-a-esperar-5-horas-por-atendimento-em-hospital-publico-de-sp.shtml>.

<sup>19</sup> <https://g1.globo.com/bemestar/noticia/2018/11/13/conselho-federal-de-medicina-aponta-investimento-abaixo-do-ideal-em-saude-publica-no-brasil.ghtml>.

One subject that is seen as a taboo was exposed in the article “The Physicians are Sick”<sup>20</sup>, which shows that in one decade, starting in 2009, 1,7 physicians in São Paulo committed suicide.

Recently, tired of complaining about the lack of resources to work, a 71-year-old physician from Cariacica, ES, Southeast of Brazil, had a psychiatry crisis and broke part of the public hospital where he worked.



Figure 6: Jornal da Cidade

The ten most significant problems of the Brazilian health system (as appointed in a 2018 study of UOL, a Brazilian server)<sup>21</sup> affect physicians and patients. Lack of Physicians, long lines for a medical appointment, long wait in emergency rooms, lack of places for hospitalization, lack of investments, deficient academic preparation, cost of health insurances, health insurance coverage, lack of reimbursement in health insurances, and discrimination in the health system.

<sup>20</sup> <https://tab.uol.com.br/edicao/medicos-suicidio/#tematico-1>.

<sup>21</sup> <https://noticias.uol.com.br/saude/listas/falta-medico-e-dinheiro-10-grandes-problemas-da-saude-no-brasil.htmk>.

## 6 Conclusion

Brazil does not provide an ideal health system, neither for patients nor for physicians.

The number of physicians is even higher than the population growth, however, the liberalization of Labor and Employment laws, a high unemployment rate, and the lack of investment in the health system create a terrible scenario.

Many tragedies could have been avoided, had the government and private health institutions have given proper care to such an important issue: human health.<sup>22</sup> All the factors mentioned above contribute to a decreasing quality in the services and deteriorate both patients' and physicians' health (physical and mental). All these issues need to be urgently addressed by the governments and private health institutions to save lives.<sup>23</sup>

### Literature

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<sup>22</sup> It is not a novelty the number of cases of irreversible health damage due to the lack of medical treatment. Source: <http://www.gazetadigital.com.br/editorias/judiciario/hospital-condenado-a-indenizar-pais-de-criana-que-teve-paralisia-por-erro-mdico/582364>.

<sup>23</sup> Everyday, 14 people die for lack of places for hospitalization in Rio public hospitals. Source: <https://g1.globo.com/rj/rio-de-janeiro/noticia/2018/08/08/por-dia-14-pessoas-morrem-por-falta-de-leitos-em-hospitais-do-rj-diz-defensoria.ghtml>.

