



Corrigendum

Corrigendum to “Myanmar's human resources for health: current situation and its challenges” [Heliyon 5 (3), (March 2019), e01390]



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In the original published version of this article, the caption to Figure 1 incorrectly read ‘Distribution of doctor ratio per 1,000 population by urban and rural area.’ and should have read ‘Distribution of doctor ratio by urban and rural area’. The figure caption and figure file have been updated and the correct version of Figure 1 is displayed below. The same error also caused a number of erroneous statements in the manuscript text. The three corrected passages are displayed below. The authors apologise for these mistakes. This correction does not, in any way, compromise the findings of the study, either in terms of the methodology, results, or interpretations drawn from the data therein. Both the HTML and PDF versions of the article have been updated to correct the error.

In the Results (P7 on the PDF version) a passage previously read ‘Fig. 1 shows the distribution of medical doctor ratio per 1,000 population by urban and rural area from 2006 to 2015. The overall trend for the distribution of medical doctor ratio increased for both urban and rural areas. In the financial year of 2006–2007, the ratio was one medical doctor per 2,581,000 population and that increased to one medical doctor per 1,477,000 population in the financial year 2015–2016. However, the urban and rural medical doctor ratios show a wide disparity. In urban areas, there was one medical doctor per 633,000 population, while in rural areas there was one medical doctor per 3,447,000 population in the financial year 2015–2016.’ and now reads ‘Figure 1 shows the distribution of doctor ratio by urban and rural area from 2006 to 2015. Overall trend of the distribution of doctor ratio was

decreasing for both urban and rural areas. In the financial year of 2006–2007, the ratio was one doctor per 2,581 population and that decreased to one doctor per 1,477 population in the financial year 2015–2016. However, the doctor ratio of urban and rural show wide disparity. In urban area, one doctor needs to cover 633 population while it was 3,447 population in rural area in the financial year 2015–2016.’

In the Discussion (P11 on the PDF version) a sentence previously read ‘Despite the increasing overall trend of health workforce including medical doctors, medical doctors per 1,000 population in the public sector showed a gradually decreasing trend since 2006.’ and now reads ‘Moreover, the distribution of medical doctor ratio at public sectors showed a gradually decreasing trend since 2006.’

In the Discussion (P13 on the PDF version) a passage previously read ‘In 2006–2007, the ratio was one medical doctor per 2,581,000 population, which increased to 1,477,000 in 2015–2016. However, the wide disparity of this ratio was observed in urban and rural areas. In urban areas, there was one medical doctor per 633,000 population, while, in rural areas there was one per 3,447,000 population in 2015–2016.’ and now reads ‘In 2006–2007, the ratio was one medical doctor per 2,581 population, which increased to 1,477 in 2015–2016. However, the wide disparity of this ratio was observed in urban and rural areas. In urban areas, there was one medical doctor per 633 population, while, in rural areas there was one per 3,447 population in 2015–2016.’

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