

## CONFRONTING DILEMMAS – LETTER

### An invisible workforce?

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**TO THE EDITOR:** International medical graduates on temporary residency visas now make up a substantial proportion of the rural medical workforce. Anecdotal reports suggest that many make the transition to professional life in Australia reasonably well, in terms of both cultural adaptation and applying their professional skills, even though the level of educational assessment and support may vary considerably. However, there are some disturbing reports of a few such medical practitioners who perform poorly and are moved on, perhaps to another state.

A survey conducted for Tropical Medical Training, the regional general practitioner training provider for North

Queensland, found that international medical graduates were often the only doctors in some rural communities, and their lack of teaching confidence and connection to a medical school was a significant barrier to expanding medical student and registrar training in the region.<sup>1</sup>

As part of a follow-up project that aims to identify the educational needs of international medical graduates in rural northern Queensland and design support programs for them, several organisations were approached to gain access to this group, rumoured to be perhaps 50–100 individuals. Because of the Privacy Act, the survey was to be distributed by one or more organisations that knew how to contact these doctors. However, no single organisation appeared to have an accurate database that included the target group.

Queensland Health, a major employer of international medical graduates, had

no central record. Divisions of General Practice stated that few international medical graduates joined them, and most were ineligible to join a college. The Queensland Rural Medical Support Agency probably had the largest database, but its accuracy cannot be verified.

The lack of access to international medical graduates will place constraints on the research project (there is no denominator and response rates cannot be measured). However, the broader issue is that international medical graduates, at least in rural and remote communities, appear to have no single organisation monitoring their recruitment, educational qualifications and needs, or retention. They appear to be an almost invisible workforce. This somewhat chaotic situation cannot be in the best interests of either the workforce or the quality of Australian healthcare.

<sup>1</sup> Hays RB, Sen Gupta TK, Veitch PC, et al. Expanding medical education in general practice. *Aust Fam Physician* 2003; 32: 1036-1037. □