



RURAL CLINICAL SCHOOL EXPERIENCE VITAL TO RETENTION OF COUNTRY DOCTORS

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MEDICAL graduates who spend an extended time in a rural clinical school are more likely to practice in rural and remote areas than those who have not, according to research published today by the *Medical Journal of Australia*.

"The Australian government has invested heavily in programs encouraging doctors to practise in rural and remote areas," wrote researchers led by Dr Alexa Seal, a Research Fellow at the University of Notre Dame Australia.

"The inadequate level of the rural medical workforce, limited training opportunities, fears of social and professional isolation, and restricted employment opportunities for partners influence junior doctors when deciding where to train and practise.

"It is important to follow graduates over time to assess whether their early intentions about practice location are later realised."

Seal and colleagues assessed associations between the geographic origin and extended rural clinical school (RCS) experience of 2011 domestic medical graduates from 10 Australian medical schools and practice location 8 years after graduation, as well as with changes in practice location between postgraduate years 5 and 8.

"Eight years after graduation, rural origin graduates with extended RCS experience were more likely than metropolitan origin graduates without this experience to practise in regional or rural communities," they reported.

"Concordance of location type five and eight years after graduation was 92.6% for metropolitan practice (84 of 1136 graduates had moved to regional/rural practice, 7.4%), 26% for regional practice (56 of 95 had moved to metropolitan practice, 59%), and 73% for rural practice (20 of 100 had moved to metropolitan practice, 20%).

"Metropolitan origin graduates with extended RCS experience were more likely than those without it to remain in rural practice or to move to rural practice."

Seal and colleagues suggested that early educational interventions such as the selection of medical students with rural backgrounds, and extended RCS placements continued to influence graduates' choices up to 8 years after graduation.

"The net movement of doctors from metropolitan to rural practice could be augmented by recruiting more rural origin students and broadening opportunities for extended rural training.



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“Our findings reinforce the importance of developing and maintaining longitudinal rural and regional training pathways, and of the RCSs, regional training hubs, and the rural generalist training program in coordinating these initiatives,” they concluded.

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