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Rural training vital for retention of regional doctors

Medical specialists who are given ample opportunity to train in rural areas are almost three times more likely to choose to work in the country after completing their training, according to an Australia-first study led by the University of Notre Dame Australia.

The study of 1220 medicine graduates from nine Australian universities has for the first time conveyed the impact of doctor's specialisations on their decision to work in rural areas later in their careers.

It comes amid a critical shortage of doctors in rural, regional and remote areas of Australia, with both general practitioners and other medical specialists in short supply.

The study found about 30 per cent of general practitioners – a specialty that gives doctors the opportunity to do most of their training in rural areas – were practicing in the country 10 years into their careers.

But only 10 per cent of other medical specialists, such as psychiatrists or pediatricians, and 15 per cent of surgical specialists ended up in non-metropolitan areas a decade after graduation. These specialists do most of their training in the city.

Lead author and researcher from Notre Dame's Wagga Wagga Clinical School, Dr Alexa Seal, said meeting the medical workforce needs of rural Australians continued to be a major challenge.

"This study reinforces the impact of rural training pathways on a doctor's longer-term work location," she said.

"Specialist training needs to be expanded to support more rural training opportunities for doctors outside general practice because we know that rural exposure is associated with the likelihood of living rurally in the future."

According to the Australian Medical Association, research continues to show rural Australians have higher rates of hospitalisations, death and injury, and poorer access to primary health care than people living in major cities.

There are seven times fewer specialists in remote areas than in metropolitan areas, leaving many patients with no choice but to travel extensively – often with significant financial and familial burden – to attend appointments.

The research built on two earlier studies of the same cohort of medical graduates from the class of 2011 – one that looked at their practice location after five years and another after eight.

It found the number of specialists working in regional, rural or remote areas increased from 15 per cent at five years after graduation, to 19 per cent at 10 years. This is mostly attributed to non-GP specialists moving to the country after finishing their training in the city.

The latest study will be published later this month in the medical journal BMJ Open.

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