



AMACDT, AIDA and Medical College Trainee Representatives discuss supporting Aboriginal and Torres Strait Islander trainees to progress through training to Fellowship

28 April 2022

At the second AMA Trainee Forum of the year held on 28 April 2022, AMACDT and representatives from the Australian Indigenous Doctors' Association (AIDA) facilitated a discussion with Specialist Medical College Trainee Chairs and Representatives about how specialist medical colleges can better support Aboriginal and Torres Strait Islander trainees to progress to Fellowship.

We are honored to have been able to work alongside AIDA for this Trainee Forum. AIDA is the peak national body representing Aboriginal and Torres Strait Islander doctors and medical students celebrating 25 years of operation and advocacy. They advocate for a health system that is culturally safe, reflective of needs and inclusive of First Nations people's cultural values all to improve the health and life outcomes of Aboriginal and Torres Strait Islander people.

Reflections and Discussion

Trainees identified a range of initiatives and actions undertaken by medical colleges to support Aboriginal and Torres Strait Islander trainees and discussed actions to be better allies to First Nations trainees. Three key themes of cultural safety integration, elevating and valuing First Nations voices, and engaging in critical reflection emerged from trainee discussions.

Trainees acknowledged that while Aboriginal and Torres Strait Islander representation, safety and supports within medical colleges have improved, there is more that colleges can do to support First Nations trainees. During the discussion, the use of the terms First Nations and Indigenous refers to Aboriginal and/or Torres Strait Islander Peoples.

Cultural safety integration: Colleges must prioritise cultural safety throughout their curriculums. Cultural safety is the preferred term for the Australian context and is determined by Aboriginal and Torres Strait Islander individuals, families, and communities. Culturally safe practice is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practicing behaviours and power differentials in delivering safe, accessible, and responsive healthcare free of racism.

Meaningful integration of cultural safety into curriculums eases the pressure of First Nations trainees to educate their peers and assists all trainees to be better health professionals. All trainees must be equipped and trained to act in a culturally safe manner to not only support their First Nations colleagues but to provide the greatest level of care to their patients and community. Trainees agreed that culturally appropriate and safe supports within colleges actively aid First Nations trainees to progress to Fellowships and improve the rates of completion.

Elevating and valuing First Nations voices: Trainees agreed that First Nations voices should be invited and integrated into trainee committees. However, trainees emphasised and affirmed that Aboriginal and Torres Strait Islander trainee volunteers within medical colleges should not be overburdened with representative work. Trainees discussed that representative opportunities should be meaningful and provide First Nations trainees with opportunities that will advance their career, improve their leadership skills, or advance their education through tools such as CV points. Ongoing pressure placed on First Nations trainees to be an advocate and advise on First Nations strategies for colleges may lead to overburdening, burnout, and fatigue.

Engaging in critical reflection: Trainees acknowledged that critical reflection is required to deconstruct systems and biases of racism within individuals, health care systems and education. The forum observed and reflected the power of First Nations visibility through the creation of role models and mentors. It was observed that a critical mass of Aboriginal and Torres Strait Islanders trainees within medical colleges may lead to greater success of First Nations trainees progressing to fellowship. Trainees acknowledged the limitation of their knowledge and committed to overcoming gaps.

Examples of positive initiatives implemented by Colleges:

- Formal mentoring programs
- Support to enter training programs
- Workshops for First Nations trainees to prepare for interviews
- CV assistance
- Cultural leave to avoid burnout and attend family and community obligations
- Opportunities to learn on country and preferential placement for internships should the trainee wish
- Mandatory ongoing and meaningful cultural safety training for all trainees. Cultural safety education provided by colleges must not be a tick box exercise and should ensure trainees can deliver culturally safe care beyond the basics
- Scholarships available for First Nations trainees
- Questions in entry exams assessing an individual's knowledge and ability to deliver culturally safe care
- Opportunities to engage in cultural training in specific contexts such as location of placements.
- Opportunities to network and attend AIDA conferences.

Areas for colleges to improve:

- Colleges integrating formal mentoring systems
- Academic support for examinations

- Providing cultural support for Aboriginal and Torres Strait Islander trainees
- Ensuring that integration of First Nations health into assessments and exams avoids being tokenistic
- Actively acknowledging and championing First Nations health and First Nations initiatives
- Not overburdening Aboriginal and Torres Strait Islander trainees
- Ensuring a zero-tolerance approach to the bullying and harassment of Aboriginal and Torres Strait Islander trainees
- Aboriginal and Torres Strait Islander representation within college staff

The following Medical College Trainee Committee Chairs/ Representatives attended the Forum:

- Australian Medical Association Council of Doctors in Training
- Australian Indigenous Doctors' Association
- Australian College of Rural and Remote Medicine
- Australasian College for Dermatologists
- Australasian College for Emergency Medicine
- Australasian College of Sport and Exercise Physicians
- Australian and New Zealand College of Anaesthetists
- Royal Australasian College of Medical Administrators
- Royal Australasian College of Surgeons
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists
- Royal Australian and New Zealand College of Radiologists
- Royal Australian College of General Practitioners
- Royal Australasian College of Physicians
- College of Intensive Care Medicine
- New Zealand Medical Association

Apologies:

- Royal Australasian College of Dental Surgeons
- Royal Australian and New Zealand College of Psychiatrists
- Royal Australian and New Zealand College of Ophthalmologists
- Royal College of Pathologists of Australasia

The next meeting will be held on 4 August 2022.

Previous AMA Trainee Forum communiques:

- [COVID-19 and its Impact on Specialty Training 1 June 2020](#)
- [Examination Processes 11 Aug 2020](#)
- [Contingency Planning for Exam Technical Failures 19 October 2020](#)
- [Best Practice in Trainee Representation, Engagement and Communication 28 Jan 2021](#)
- [College Assessment April 2021](#)
- [Costs of Training July 2021](#)
- [Processes for selection into training 26 October 2021](#)

- [Training through the pandemic—lessons learnt and the way forward in 2022 7 February 2022](#)

The AMACDT Trainee Forum is designed to increase collaboration between Specialist Medical College Trainee Committees and enhance cross specialty communication. If you have any feedback or questions, please contact us at cdt.chair@ama.com.au