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INVESTING IN RURAL DOCTOR TRAINING PAYS OFF FOR COMMUNITIES IN THE BUSH

The AMA has intensified its call for increased Federal Government investment in rural training opportunities for doctors amid mounting evidence that it would improve access to health care for rural communities.

A study published in the latest edition of the *Medical Journal of Australia* highlights that doctors who have a rural background and train in a rural area are much more likely to practice in a rural area in the long term.

The study, *Vocational training of general practitioners in rural locations is critical for the Australian rural medical workforce*, found up to a 90 per cent chance that doctors who grew up and trained in a rural area would still be practising there five years later, helping redress persistent shortages of GPs in rural areas.

AMA President Dr Michael Gannon said the findings showed that the right investments by Government could make a real difference to access to care for rural communities.

“This study provides some important lessons for policy makers looking at how we can ensure that Australians living in rural areas have access to medical care,” Dr Gannon said.

“The problem isn’t a shortage of medical graduates. With medical school intakes now at record levels, we don’t need more medical students or any new medical schools.

“What we need are more and better opportunities for doctors, particularly those who come from the bush, to live and train in rural areas. The evidence shows that they are the most likely to stay on and serve their rural community once that qualify.”

Dr Gannon said the AMA has developed a number of policies that would substantially boost access to care in rural areas, including:

- for the targeted intake of medical students from rural areas to be increased from a quarter to a third of all new enrolments;
- the establishment of a Community Residency Program to give prevocational doctors, particularly those in rural areas, with access to three-month general practice placements;
- an increase in the GP training program intake to 1700 places by 2018;
- an expansion of the Specialist Training Program to 1400 places by 2018, with priority given to rural settings, under-supplied specialties and generalist roles; and
- access to regional training networks to support doctors to train and remain in rural areas.

“The Federal Government has a wonderful opportunity to make a real and lasting difference by adopting these sensible, effective, evidence-based measures,” Dr Gannon said.

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