GENERAL practitioners working in small communities and those in a rural location for less than 3 years are most at risk of leaving rural practice, according to research published in the Medical Journal of Australia.

Researchers Dr Matthew McGrail and Professor John Humphreys from Monash University in Victoria used data from the Medicine in Australia: Balancing Employment and Life (MABEL) survey, Australia’s national longitudinal survey of doctors, which collects similar data in annual waves from mostly the same panel of doctors.

They aimed to describe “the geographical mobility of general practitioners in Australia, both within rural areas and between rural and metropolitan areas”, between 2008 and 2012.

“There is a dearth of quantitative empirical evidence relating to the dynamics of general practitioner mobility patterns — specifically, which doctors move where, at what frequency, and why”, the authors wrote.

“Understanding GP mobility is important because of its impact on workforce availability — both in the origin area (place from which the doctor moved) and the destination area.

“Considerable investment is made by governments into health programs specifically oriented towards improving the recruitment and retention of doctors in rural areas, with the goal of maximising movement into and minimising movement away from rural areas.”

The researchers found that GPs in small rural towns (population less than 5000) and remote areas had higher mobility rates.

“Rural GPs practising in small towns (less than 5000 residents) and in medium-sized towns (up to 15 000 residents) were most at risk of moving to metropolitan areas”, they wrote.

“These results further support the need for policies to better target GPs in small rural communities and differentiate them from GPs in large regional centres.

“GPs most at risk of moving, both from and to rural areas, are those who have only been in their current location for up to 3 years, similar to recent findings in rural New South Wales. That is, once a GP has been settled in either a rural or metropolitan location for at least 3 years they are less likely to move.

“Additionally, younger GPs (under 40 years) and those working as either salaried or contract employees are more likely to be mobile.”

The researchers found no association between sex and family status and mobility.
“This study helps to understand who is most likely to move each year, how often moves occur and where they might move to and from”, they concluded.

“In particular, these results both highlight and quantify the strong association between mobility propensity and increasing rurality and remoteness of practice locations. Such evidence is useful in guiding more effective targeting of rural health policies and workforce planning and incentives.”

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