

## MEDIA RELEASE

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### **MABEL longitudinal survey of doctors extended five years**

The *Medicine in Australia: Balancing Employment and Life (MABEL)* longitudinal survey of doctors has been funded for another five-years further developing its capacity to provide evidence on the factors that influence doctors' decisions on how many hours they work, where they work, and when they will retire.

The *Centre for Research Excellence on Medical Workforce Dynamics* has been awarded \$2.5million over the next five years by the National Health and Medical Research Council (NHMRC).

The Centre will be led by Professor Anthony Scott from the Melbourne Institute of Applied Economic and Social Research at the University of Melbourne, along with A/Professor Catherine Joyce and Professor John Humphreys from Monash University, and A/Professor Guyonne Kalb from the Melbourne Institute.

The Centre will grow new capacity that will provide much needed evidence on the factors that influence doctors' decisions on how many hours to work, their location of work, including working in rural and remote areas, and decisions to leave the medical workforce and retire according to Professor Scott.

“These decisions have important effects on the population’s access to health care, costs, and health outcomes. The Centre will play a vital role, both nationally and internationally, in generating new knowledge with high potential for policy impact through strong and already successful links with government and professional bodies,” said Professor Scott.

The Centre will leverage from the 'Medicine in Australia: Balancing Employment and Life' (MABEL) longitudinal survey of 10,500 doctors, and further develop this key national resource for those conducting research on the medical workforce.

The funding will allow much needed new research capacity to be developed in the Centre around the MABEL survey which will have an enduring impact on health policy and practice, and conduct research of the highest international quality.

“The Centre will evaluate and simulate policy changes and provide important evidence to support future policy developments. This will provide a rigorous analysis of medical workforce decisions that underpin workforce distribution and the working patterns of doctors, leading to a more motivated and productive medical workforce providing high quality and cost-effective health care,” said Professor Scott.

“This is a fantastic achievement for the MABEL research team who have worked hard over the past five years to establish a high quality major research resource. I would also thank the doctors who complete the survey each year, our 40 endorsing organisations, and members of the MABEL Policy Reference Group, for their continuing support.”

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