

Understanding the motivations and barriers for International Medical Graduates practising in remote and rural regions

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BACKGROUND

To address Australia's health workforce shortage in remote and rural (RR) areas, International Medical Graduates (IMGs) seeking licensure in Australia are actively recruited to go live and work in these areas.^{1,2} As such, IMGs are an essential component to RR medical care, yet the long-term retention of IMG general practitioners (GPs) is an ongoing challenge because many only stay a short time and then choose to relocate to more metropolitan areas.^{1,3} Not only does this create an ongoing GP recruitment burden for RR medical facilities, it also compromises the patients' opportunity for continuity of care. Further research is needed to better understand the factors that influence IMGs' decision to continue working in these RR areas.

OBJECTIVES

This study sought to describe the motivators, barriers, and constraints that IMGs face when deciding to continue working in RR areas by answering the research question:

What are the factors that influence an IMG's decision to remain working in RR areas and how are these factors assessed and inter-related?

METHODS

Semi-structured interviews were conducted in November 2017, with IMG Registrars (n=6) and Supervisors (n=5) who are involved in the James Cook University (JCU) General Practice (GP) Training program and living and working in RR areas of Queensland, Australia. Interview transcripts were coded using a grounded theory approach. The iterative analysis first involved identifying factors influencing decisions to remain working in RR areas, and secondarily sought to describe how these factors were assessed, inter-related, and influenced decisions (e.g., as motivators, barriers, constraints).

RESULTS

Figure 1 depicts the key factors (general preference, work, family, and location), their sub-components, and the inter-relationships between them. Whether a factor was classified as a motivator, barrier, or constraint depended on how the factor was evaluated and addressed. The saliency and relevance of each factor depended upon the IMG's life stage (e.g., age of children) and their life goals.

When asked for thoughts around what would make other registrars and supervisors stay longer in the community, one Supervisor summarised it best:

As I say, it's again looking at their goals. I mean, they will have professional goals but one must look at their life goals. I mean, it's a matter of what do they want out of life. Do they want to have a family? Do they want to remain single? You know, as long as their life goals are synchronised, as it were, with their professional goals.

Factor assessment occurred both at the individual level and with consideration to the IMG's important others (i.e., family) and evaluated practical constraints (e.g., affordability, convenience) and affective dimensions (e.g., satisfaction, enjoyment, comfort). The results of this evaluation collectively influenced beliefs about having a desire and/or capacity to stay, which influenced IMGs' decisions to stay.

CONCLUSION

This study developed an emerging theory describing the interplay of key factors influencing an IMG's decision to continue practicing in RR areas. Communication and support programs designed to improve IMG retention in RR areas may be enhanced by ensuring they are tailored to address the factors constraining IMG decisions to continue working in these areas.

ACKNOWLEDGEMENT

All study participants are gratefully acknowledged.

ETHICS

Ethics approval (H6771) for this research was granted by the JCU Research Ethics Committee.

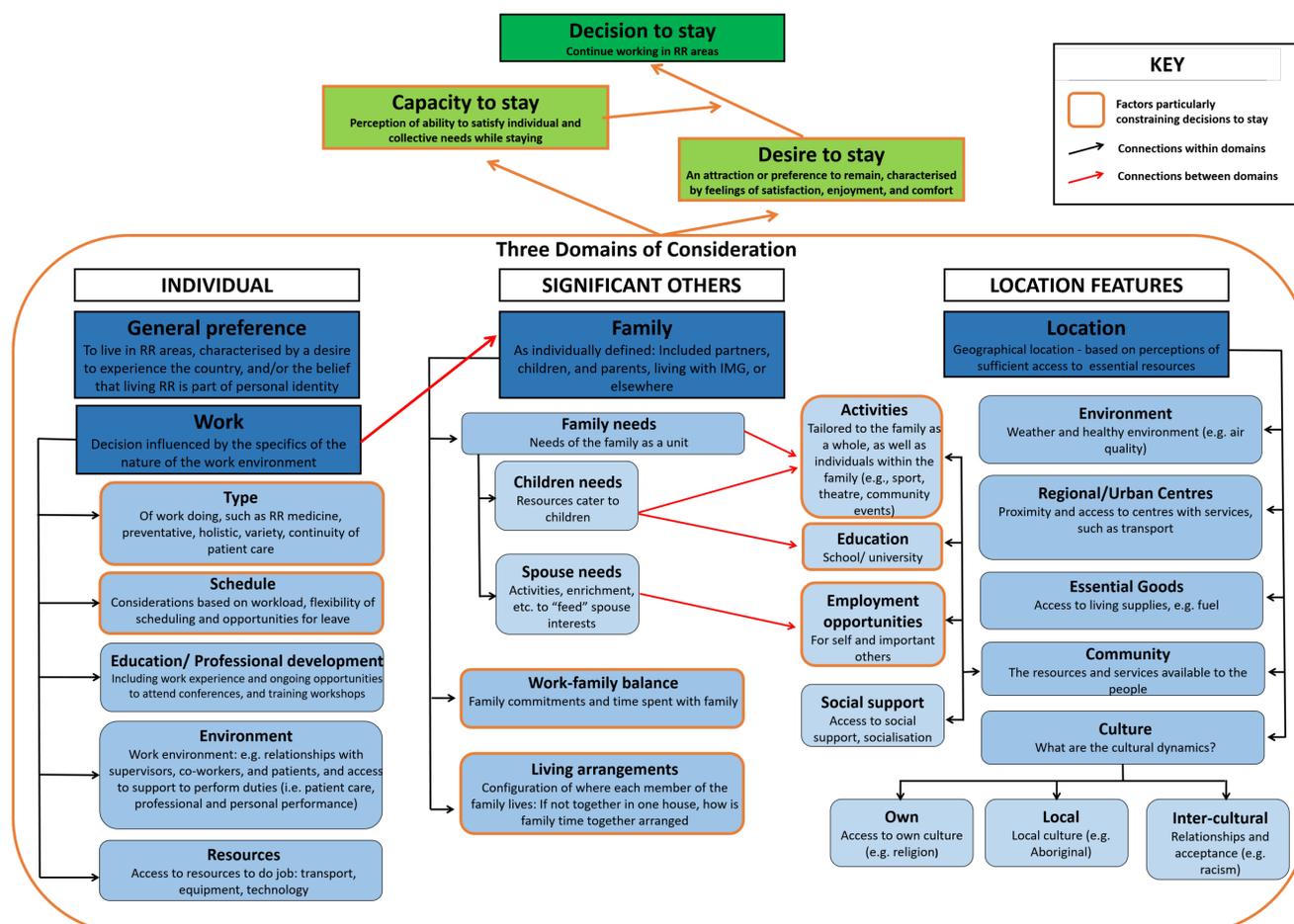


Figure 1: Factors influencing an IMG's decision to remain working in RR areas

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