

‘LANDSCAPE OF FULFILMENT’: A MODEL FOR UNDERSTANDING RURAL MEDICAL RECRUITMENT AND RETENTION

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STATEMENT OF ORIGINALITY

This work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and to the best of my knowledge and belief contains no material previously published or written by another person except where due reference has been made in the text. I give consent to this copy of my Thesis when deposited in the University Library, being made available for loan and photocopying subject to the provisions of the Copyright Act 1968.

ACKNOWLEDGEMENT OF AUTHORSHIP/ COLLABORATION

I hereby certify that the work embodied in this Thesis, is the result of original research, the greater part of which was completed subsequent to admission for candidature for the degree.

The data for the two Female Rural General Practice Studies were collected as part of collaborative projects and I undertook a descriptive analysis of this data in collaboration with other academics while I was employed at the University of Newcastle, prior to admission for candidature. However all of the analysis of the Female Rural GP data reported in this Thesis was undertaken subsequent to admission for candidature of the degree.

During the initial stages of the Student project I worked collaboratively with Dr Mark Stewart, a general practice academic registrar under my supervision. I was responsible for the conceptualisation of the project, the project development, most of the data collection, and most of the data analysis. Dr Stewart worked under my supervision on analysing data thematically in relation to issues not reported in this Thesis.

I hereby certify that the work embodied in this Thesis contains published papers of which I am a joint author. I have included as part of the Thesis a written statement from each co-author attesting to my contribution to joint publications

Signature

Date

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ABSTRACT

Background

Due to an ongoing shortage of rural medical professionals both in Australia and internationally, the recruitment and retention of rural doctors has been extensively researched. Mostly the research used quantitative methods to focus on factors associated with rural medical workforce recruitment and retention issues, and until now, limited work has investigated inter-relationships between these factors. Although a few qualitative studies have used thematic analysis to develop models to better understand these issues, none have specifically considered the attitudes of medical students, and female rural doctors. This Thesis responds to this need by using qualitative research methods to develop a model that incorporates feminisation of the medical workforce and generational change in the 21st century. Data were collected from Australian medical students and female rural general practitioners (GPs) as study participants.

Aims

The broad aims were to develop a model for understanding recruitment and retention of rural doctors in Australia, incorporating concepts of place, gender, and professional identity.

Research Questions

How are Australian medical students' and female general practitioners' perceptions of entering and remaining in a rural health career influenced by the constructs of place, gender and professional identity?

Does this perception change as doctors' progress through their careers from students to practising general practitioners?

Methods

A case series of three qualitative studies were used to develop a model for understanding rural GP recruitment and retention. Data, collected using focus groups and interviews, were analysed thematically by domains describing

participants' lives, and the interaction between the domains was explored to better understand influences on location choice.

Results

The 'Landscape of fulfilment' model which is integral to this research, incorporates the domains of self, place, work, significant others, recreation, and significant others' work as the domains of life which influence location choice. Most participants sought balance within their lives, and maximum fulfilment in all domains, but at times they faced conflict between domains. Individuals' gender, professional, and place identities were related to how they viewed the domains and how the domains interacted.

Conclusion

This model provides a way of understanding the complex interaction between aspects of life that affect a doctor's location choice. There is important potential to use the model to inform the development of rural medical recruitment and retention strategies, and as a basis for further rural health workforce research. The model has already been used by General Practice Education and Training (GPET) in developing post graduate general practice training research, and also by the Sustainable Practice Working Group of the Rural Faculty of the Royal Australian College of General Practitioners (RACGP) in developing strategies for sustainable rural general practice.