

Australian Medical Association Limited

ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604
 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499
 Website: <http://www.ama.com.au/>



Transcript: AMA President Dr Michael Gannon, 774 ABC Melbourne, 9 August 2016

Subjects: Overseas Trained Doctors

SALLY WARHAFT: Right now we've got the President of the Australian Medical Association on the line because we've been hearing for years about the shortage of local doctors in Australia and we've seen all kinds of schemes to lure foreign doctors to set up their lives and practices here. Well it seems the problem is fixed and there are reports of a plan to stop granting visas so freely to overseas doctors. Dr Michael Gannon, President of the AMA, is on the line. Thanks for joining us.

MICHAEL GANNON: Good morning. How are you?

SALLY WARHAFT: I'm fine, thank you, but can you tell us about what the current situation is with doctors here because I thought there was a chronic shortage?

MICHAEL GANNON: Well, the story's a little bit more complicated than Sean Parnell's made out in the story in today's *Australian*. But certainly this does signal the importance of having a conversation on what we need. The first thing I'd like to say is that we really value overseas-trained doctors, international medical graduates; they're a big part of our system. They're amongst my friends and closest colleagues, and they've been a really important part of the jigsaw in a country that underinvested in medical students for a long period of time. And over the past, you know, 10, 15, 20 years and well before that, it's been necessary to get doctors from overseas. But what we've seen now is that we've got a reasonable oversupply of GPs and other specialists in inner-metropolitan Australia, and I think what we need to work harder on is investing in incentives to get doctors to work in rural areas. The current system is not addressing the stated means of these regulations and that's to close the gap between the health outcomes of rural Australians and those living in its cities.

SALLY WARHAFT: You expressed, of course, the importance and the benefits that foreign doctors bring and medicine is an incredibly collegial profession too. And yet the AMA are supporting, at least it's reported, a slow down on those foreign visas. What's your position on that?

MICHAEL GANNON: What I'd like to see is just smarter arrangements rather than just the blunt legislative regulations that exist through the Immigration Department at the moment. I think what everyone would like to see is if there's a unique or special talent from a doctor trained overseas that we can still get those people in. But surely the stated intention of these mechanisms is to get doctors to where they're really needed in Australia. There's the moral questions about whether we should be taking doctors trained from other countries because often they are coming from Second and Third World countries. So there's that question...

SALLY WARHAFT: [Talks over] Although, I mean, I've always assumed that there's a measure there and you're either above that line or you're below it. And we know, I

mean for example, some of the most brilliant and well-trained doctors in the world come from countries like India.

MICHAEL GANNON: I'm not for one minute questioning the quality of medical education. I'm actually questioning how appropriate it is to take doctors from countries that have their own problems...

SALLY WARHAFT: [Talks over] That need their doctors. Right.

MICHAEL GANNON: Yeah. So I think that I once read that - forgive my numbers - if an Australian town of 4,000 people takes a doctor from South Africa, they were looking after 14,000 people, who then take a doctor from Uganda who might look after 24,000 people. So I think that we've got to look at that element of it. And we just have to look at a system which is not delivering on its stated intention, which is to get doctors where they're really needed - often we're talking about procedural GPs in rural areas - often what we're doing is filling up corporate clinics in the middle of our cities. Now that's not the intention of these regulations.

SALLY WARHAFT: So that problem of getting GPs to go to rural, and let alone remote areas, obviously isn't fixed. I'm sort of surprised, Michael Gannon, that the AMA or the Government have not been able to create a- well, you think there'd be a charming lifestyle to offer, you know, the country practice. Why are doctors so reluctant to move to the country?

MICHAEL GANNON: Well I think that, you know, so many of my colleagues that work in rural areas will talk about very, very rewarding professional careers. And we know that. The studies exist to show that if you give medical students positive experiences when they're training, if you give junior doctors positive experiences when they're training, they're far more likely to go and work there. So that's where we'd like to see investment. We'd like to see investment in really simple things like making people feel safe. You'll know that a majority of medical students now are young women, and we want them to have really positive experience, so accommodation where they feel safe, positive experiences where they're mentored by senior doctors. If we provide those experiences, people are more likely to go and work in the country when they make their career.

SALLY WARHAFT: Well, it's a really fascinating conversation and I appreciate you explaining it in a lot more detail to us. I really appreciate it.

MICHAEL GANNON: That's a pleasure.

SALLY WARHAFT: Dr Michael Gannon, President of the Australian Medical Association.

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CONTACT: Kirsty Waterford

02 6270 5464 / 0427 209 753