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Human Resources and Training for Rural Health

The geographic pipeline to Rural Family Medicine at Memorial University

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Introdução: The Canadian province of Newfoundland and Labrador has a significant rural population, with 52% of the population living in communities of under 10,000 people and an additional 10% in communities of between 10,000 and 25,000 people. Producing family doctors to work in these communities is an important task of the medical school at Memorial University of Newfoundland.

Objetivos: Memorial University's "pipeline" approach to producing rural family doctors involves recruiting rural students and providing rural placements. This study measures and reports on Memorial's success in both areas.

Metodologia ou Descrição da Experiência: This study uses administrative data for MUNMED graduating classes 2011 and 2012 to describe backgrounds and educational placements of these students. This study also reports on practice locations of all MUNMED graduates practicing family medicine in Newfoundland and Labrador. StatsCan population data was used to classify locations as follows: small rural community (<10,000 population); small rural city (10,000-24,999 population); medium city (24,999-99,999 population), large city (100,00-499,999 population), very large city (500,000-999,999 population) and metropolis (over 1,000,000 population). SPSS was used to calculate frequencies and ArcGIS was used to map results.

Resultados: Of 120 students who graduated in 2011 and 2012, 32% had rural backgrounds. For graduating classes 2011-2012, 65% of Year 1 Community Health placement weeks took place in small rural communities and 19% took place in small rural cities; 41% of Year 2 FM Community placement weeks took place in small rural communities and 14% took place in small rural cities; 88% of Year 3 FM placement weeks took place in small rural communities and 6% took place in small rural cities. Of 297 MUNMED graduates currently practicing family medicine in Newfoundland and Labrador, 64 (22%) are practicing in small rural cities and 44 (15%) are practicing in small rural communities of under 10.000.

Conclusão ou Hipóteses: External data confirms our conclusion that Memorial's pipeline to rural family practice is successful: In 2010, Memorial received the Keith award for having the highest percentage of FM graduates (52%) working in rural practice 10 years after graduation. In 2013, Memorial received the Keith award again, having 44% of FM graduates in rural practice 10 years after graduation.

Palavras-chave: Geographic. Pipeline. Rural.