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Title

Transition Experiences for Physicians New to Rural Medical Practice: A BC Case Study

Key words

Transition, Rural, Physicians

Introduction

Although a large portion of the Canadian population lives in rural areas there are deficits in the number of physicians serving these communities; thus, understanding the factors that improve physician recruitment and retention are essential. Literature demonstrates psycho-social factors as key indicators for rural physician retention, including family-integration and physician workload. This study aimed to understand strategies for BC rural practice preparation programs to improve the transition experiences for new-to-rural-practice physicians for those trained internationally (IMGs) and in Canada (CMGs).

Methods

Data was collected via interviews, and analysis was completed using phenomenology and thematic analysis.

Results

Twenty-two physicians (n = 12 CMGs, n = 10 IMGs) participated. At the time they were interviewed, participants had been practicing in rural BC for between 6-26 months. Demographics included 64% men and 72% practicing in Northern or Interior Health. Results showed that physicians are most likely to engage in rural medical practice long-term when they have pre-existing community connections. Autonomy of decision-making, broad scope of responsibilities, personal connections with patients, and proximity to nature and outdoor recreation activities emerged as the most enticing aspects of rural practice. Transition to practice experiences were heavily influenced by COVID-19; specifically, access to mentorship, education opportunities, and family integration supports.

Conclusion

The study illuminated ways communities can retain physicians, recognizing that COVID-19 has created a significant impact on usual practices and physician retention. While all participants identified having adequate education, mentorship, colleague support, scope of medical practice, few confirmed long-term plans to stay in rural.