



## **ISLAND MEDICINE**

### **A Wonca 'World of Rural Health' Legacy in 2019**

presented at the conclusion of the Albuquerque World Rural Health Conference for consideration by the Rural Wonca community

Medical care for island communities is mostly provided by generalist clinicians, a fact recognised in the *Cairns Consensus Statement on Rural Generalist Medicine* (2013). Island doctors are true rural medical generalists and, while sharing many aspects of their work and life with colleagues in other rural settings, experience a unique set of challenges and rewards in their daily practice.

In 2019, at the encouragement of Dr John Wynn-Jones, the Chair of the Wonca Working Party on Rural Practice, a group of island doctors from Asia, Europe, Oceania and the Caribbean have worked together to develop a shared understanding of the needs and opportunities specific to this stream of generalist medical practice. Inspired by real-life legends like Dr John MacLeod of the Scottish Outer Hebrides, who gave an inaugural address on Island Medicine at the 9<sup>th</sup> Wonca Rural Health World Conference in Crete in 2009; Dr Peter Holt, who led decades of primary care in the Torres Strait in the far north of Australia; Dr Kiki Maoate, a renowned leader of doctors across the South Pacific; and Dr Kenjiro Setoue (known as 'Dr Koto') – an island doctor of such distinction he is a household name throughout Japan – this new generation of island-based generalists are learning from each other, establishing a professional network and developing a toolkit for colleagues practicing in similar settings.

In the lead-up to the 12<sup>th</sup> Wonca World Rural Health Conference in Albuquerque in October 2019, a series of consultations took place on this topic, including an Island Medicine symposium at the Wonca Asia-Pacific regional meeting in Kyoto in May 2019, followed by an online survey of approximately 100 island doctors from over 20 countries around the world in August and September. The outcomes of these consultations have been further developed throughout the Albuquerque conference, including an initial presentation and discussion at the Wonca Working

Party on Rural Practice Council meeting, followed by a two-part workshop entitled 'Island Medicine – Building bridges to bring Island Doctors together from across the Seven Seas'.

During the consultations on Island Medicine we found:

- a. Islanders and island communities have a strong sense of identity connected to their islands, which is reflected in the doctors who work there.
- b. The challenges of rural medical practice are typically amplified on islands.
- c. Isolation is a particular feature of islands, island communities and island doctors.
- d. The scope of practice of island doctors is very broad and they are even less likely than their mainland rural counterparts to be able to refer or transfer patients simply or swiftly.
- e. Island doctors have greater exposure to – and therefore greater experience with – certain medical conditions due to island industries and environments.
- f. Most island doctors work in very small teams, often as the sole doctor, deeply embedded within their communities, with substantial clinical and on-call commitments, typically compounded by an inability to leave the island for extended periods of time.
- g. Most island doctors nevertheless feel positively about their lifestyle and connection to their communities.
- h. Most island doctors who identify as specialists have trained as rural generalists/GPs.
- i. Island doctors often feel they have much in common with rural doctors elsewhere, but with some specific features that define and unite them
- j. The models of training most suited to Island Medicine are those that involve training on islands, across a broad curriculum that includes significant emphasis on emergency and procedural skills.
- k. Examples of postgraduate training programs that are focused on or are relevant to Island Medicine include the Fellowship of the Australian College of Rural and Remote Medicine, the *Shima Isha* (Island Doctor as a solo practitioner) program at Okinawa Chubu Hospital in Japan and the rural/family medicine programs at the University of the West Indies, Fiji National University, University of Otago and University of Papua New Guinea.
- l. Island doctors experience great challenges accessing various forms of technology, including information and communication technologies, which are typically brittle in island environments and limit opportunities for essential tools such as telehealth.
- m. The physical environment, weather and climate play very significant roles for island communities, many of which are now threatened by climate change.

- i. There is a strong desire on the part of island doctors to be connected via a network and have Island Medicine recognised, promoted and developed as a distinct form of rural generalist medical practice.

This Statement brings together these findings and recommendations, to:

- 1) recognise Island Medicine as a distinct form of rural generalist medical practice;
- 2) acknowledge that island doctors have much in common with rural doctors elsewhere, but with some specific features that define and unite them; and
- 3) build and strengthen a professional network of island doctors around the world to enable sharing of information and resources, collaboration and exchange.

We therefore recommend to Rural Wonca community:

- i. Island Medicine should be acknowledged as a form of rural generalist medical practice with its own unique set of challenges and rewards.
- ii. Training programs, including remotely-delivered models, that are designed to address the broad scope of island practice and tailored to context, enabling island doctors to remain living and working in their own communities are of value and should be further developed and strengthened.
- iii. A network of island doctors should be established to raise the profile of Island Medicine, facilitate the sharing of information and resources and enable collaboration and exchange.