

VDHP Newsletter

Issue 5

Autumn 2006

Inside this issue:

VDHP Birthday 1

5th Birthday Celebrations for the Victorian Doctors Health Program

The VDHP recently celebrated 5 years of serving the doctors and medical students of Victoria. With such a milestone behind us we decided to reflect on some of the high-lights of those five years.

The Victorian Doctors Health Program opened its service in April 2001, tentatively stepping forward in Australia as novices and innovators. Drawing heavily on the well-established programs in the USA we accepted our very first participant in May 2001. Five years later we are pleased to say that that very first participant is doing extremely well, having overcome an alcohol dependency illness and continuing in strong recovery. Since then we have not been sitting idly by, 344 calls taken for advice and information and 388 people have made use of our services either long term or short term. Friends, family, colleagues have benefited by our advice on how to help someone they know in distress.

We have had great feedback through official and unofficial sources, we have external clinical audits yearly with extremely pleasing results; we have presented at conferences, universities, hospitals and other educational functions, we have shown up at orientation weeks, manned stalls at expos, have worked with the AMAV to send out, to every registered doctor and medical student, information on the VDHP and looking after your own health and have

tried hard to let you, the doctor or medical student, know that we are here to help. It all began, longer than five years ago, with an idea, a group of doctors (most of whom were in dependency recovery themselves) and a meal. At the same time the AMAV and MPBV were considering the possibility of setting up a comprehensive health program; it did not take long for the two groups to form a working relationship and begin the process of developing the idea further. A board was appointed, and then a Medical Director ... and we opened our doors.

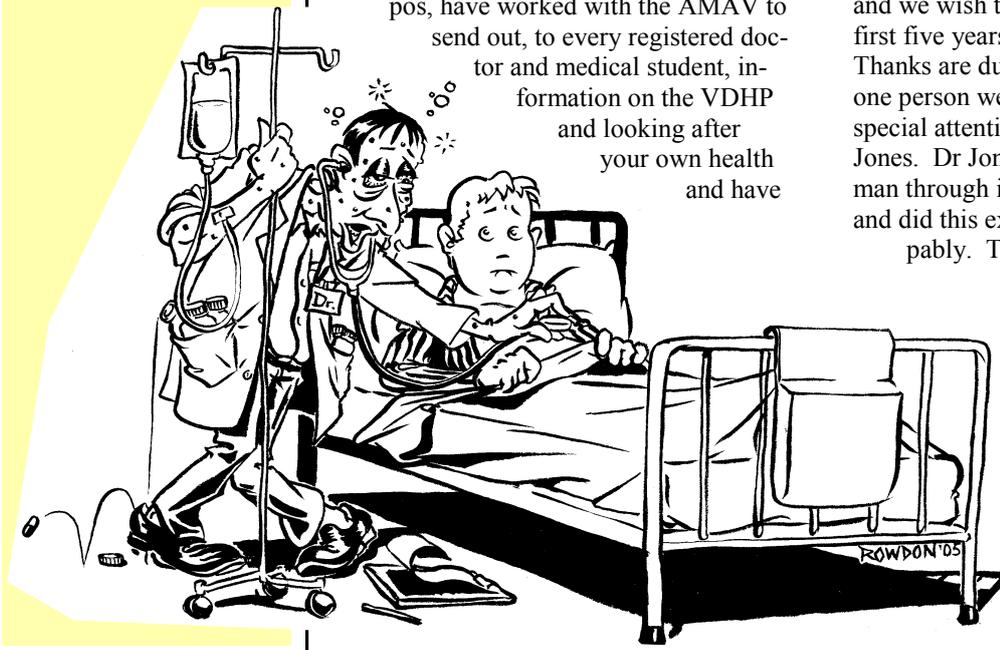
In those early years our work seem to be mainly supporting and helping those with substance use disorders, however the trend became apparent a few years back that mental health was going to be a big part of our participant identity, and that trend has continued with people suffering mental health disorders becoming, by far, the largest percentage of participants in our program.

A very exciting outcome, influenced by the success of our own program is the newly opened Victorian Nurses Health Program. Based very much on our own and drawing freely from our experience, the VNHP launched on 8th March 2006 and we wish them every success for their first five years and beyond.

Thanks are due to many people, however one person we would really like to draw special attention to and that is Dr Taffy Jones. Dr Jones led the VDHP as chairman through its first four and a half years and did this extremely efficiently and capably. The staff and board of the

VDHP all applaud Taffy's unbounded energy and support; without his input this program would certainly not be on as strong a foundation as it is now.

We look forward to the next five years, to supporting the doctors and medical students of Victoria and helping Victorian Doctors look after their own health.



The VDHP is a completely confidential and free service for doctors and medical students in Victoria. It is a legal entity in its own right. It is independent of the Australian Medical Association Victoria and the Medical Practitioners

VDHP
Level 8, Aikenhead Bldg
27 Victoria Pde
Fitzroy 3065

Telephone 9495 6011
Fax 9495 6033
Email vdhp@vdhp.org.au
www.vdhp.org.au



VDHP Board

Dr Kerry Breen

Dr Sandra Hacker
MBBS, FRANZCP, FAICD, DPM

Dr Chandra Wijesinghe
MBBS, FRANZCP

Dr Paul Woodhouse
MBBS, DBA

Dr Jenni Parsons

Dr John Court, AM
MBBS, MD, FRACGP

Dr Sam Lees
MBBS, FACCRM

Medical Director

Dr Naham (Jack) Warhaft
MBBS,
GradDipSubsAbuse, FANZCA,
FACHAM

Case Manager

Ms Cheryl Wile
BSocSc(Psych),
MApPsych, Dip AOD, MAPS

Administration Manager

Ms Sandy Fernée

**Alcohol & other Drug
Consultant**

Mr Gordon Storey
BBSoc, Grad Dip Soc. Sc.

**Counselling Services
Consultant**

Ms Barbara Kustra
BA, Grad Dip & MA
counselling

Case Manager's Report - Rural Workforce and Barriers to Good Health



Cheryl Wile is the Case Manager for the VDHP. Once every three months I go on a 'junket', travelling to three rural towns across Victoria, visiting doctors who have become participants of the VDHP due to numerous health issues. And every time I embark on my quarterly trip I ask myself the same question – why is my outreach to rural areas so limited and infrequent? Current VDHP statistics show that out of the 125 doctors who are involved with the program in an on-going capacity, only 6% are rural based.

My knowledge about issues faced by rural practitioners has come from two sources: speaking with those rural doctors on the program, and consulting with the Australian Journal of Rural Health. From both my discussions and readings, I am aware that whilst there can certainly be a number of advantages to being a rural practitioner, there can also be numerous drawbacks, including heavy workloads, professional and personal isolation, difficulties in obtaining locum relief, and problems accessing continuing medical education – to name a few.

Numerous studies conducted in both Australia and overseas indicate that rural doctors can and do experience a great deal of stress, which can subsequently manifest as burnout, depression, anxiety, excessive substance use, and emotional exhaustion. Furthermore, findings from a recent study (Gardiner, Sexton, Durbridge & Garrard, 2005) found that whilst 19% of rural GPs in South Australia had considered themselves having experienced a personal crisis over the past year, 2/3 of these doctors had **not** accessed a support service.

This leaves me with two questions:
In the event of personal difficulty and / or illness, are Victorian rural doctors accessing either formal or informal support sources?

Secondly, what are the barriers that would prevent a rural doctor in Victoria from contacting the VDHP or other support service in order to access some on-going assistance?

Doctors can be reluctant patients at the best of times, with many being hesitant to reveal what they regard as an 'inadequacy', but which is generally reflective of either an illness or a natural reaction to role strain and prolonged stress. They subsequently present late, particularly when the presenting issue is associated with mental health and / or substance use issues. It appears that being a rural

based medical practitioner can be an added barrier and deterrent in accessing support during times of need.

I would be very interested to either speak with or hear from any rural practitioner or interested persons in relation to how the VDHP may be able to make itself more available and accessible to Victorian regional doctors. I can be contacted at the VDHP office or via e-mail cheryl@vdhp.org.au.

Case Study

Bob and his wife Helen had relocated to regional Victoria five years previously due to Bob having accepted a position as a GP in a rural community. For the initial few years everything seemed to be going well for Bob. He enjoyed the work variety and autonomy that a rural practice provided, and both he and Helen enjoyed the country lifestyle and the strong community relationships that they had developed. However Helen had noticed subtle changes in Bob's moods and behaviour over the past couple of years. His time spent at work had steadily increased and was incorporating frequent weekend on-call work. Additionally, Bob was becoming more irritable in his moods, and was becoming more withdrawn and less willing to engage in social activities. This was also having a negative effect on Bob and Helen's relationship. In addition to spending less quality time together, Helen was also starting to feel very lonely in the marriage, and was frequently travelling to Melbourne to stay with her mother. Despite having informed Bob on numerous occasions of her concerns, he had denied there was a problem, and always avoided discussing the issue. The situation did not improve, and Bob started to have disturbed sleeping patterns and increasingly withdrawal from family and friends. As part of his on-going education requirement Bob attended a dinner hosted by the Divisions of GP's where the issue of self-care was discussed. On hearing about the Victorian Doctors Health Program, Bob and Helen decided to contact the service and schedule a time to talk about Bob's difficulties. An initial assessment revealed that Bob was suffering from depression, which was compounded by burnout. He was referred to a metropolitan psychiatrist for further assessment, and also sent along to a psychologist located in a neighbouring rural area for some on-going counselling. It was also organized that Bob would receive on-going support from the VDHP, with fortnightly calls and two monthly visits to him at his practice. Bob has benefited immensely from the interventions, and has been able to address a number of workplace issues that were contributing to his stress levels. He is now stable in his recovery, travelling to Melbourne two monthly to see his psychiatrist and maintaining regular contact with his counsellor.

Victorian Doctors Health Program Supports RACGP Health Initiative

RACGP DISTRIBUTES SELF-CARE GUIDE BOOK TO DOCTORS

The Victorian Doctors Health Program is pleased to promote the launch of *Keeping the Doctor Alive: A Self-care Guidebook for Medical Practitioners*, a resource that promotes a culture of self-care among doctors across all medical specialties.

The guidebook, developed by the RACGP Victoria Faculty Professional Peer Support Program Committee, is based on an extensive review of 50 years of international literature on the emotional and physical health of medical practitioners. Dr Leanne Rowe (Chair, RACGP Victorian Faculty) said that this study shows that general practitioners are likely to come under high levels of stress and face burnout.

Dr Raymond Martyres (Chair, RACGP Victoria Faculty Professional Peer Support Program Committee) noted an underlying issue amongst the medical community: “The personality type attracted to studying medicine, the pressure of medical school training and the demands of medical practice often intersect to create this stress, in a climate of medical workforce shortages and long working hours, we need to manage the impact of this stress to retain our dedicated, committed and knowledgeable medical practitioners. We need to look after our own and protect them from burnout.”

The book has been written to give doctors and their families a guide to wading through the stressors that might arise, and to use it to develop solutions that best suit them and their individual circumstances.

The Victorian Doctors Health Program congratulate the RACGP on this very proactive response to doctors’ health issues.

To obtain a copy of the book, please visit

http://www.racgp.org.au/downloadspdf/20060119pubs_orderform.pdf