

2006 Commencing Medical Students Questionnaire

National Data Report

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1.0 Introduction

The Medical Schools Outcomes Database and Longitudinal Tracking Project (MSOD) is an on-going longitudinal study that is conducted by Medical Deans Australia and New Zealand. The project has been operating since 2005 and is the Australian Government's main data collection tool for medical student information. Data is collected directly from students at entry to medical school (Commencing Medical Students Questionnaire [CMSQ]); in the final year of medical school (Exit Questionnaire [EQ]); and one year after completion of their medical studies (PGY1). Information on student placements and electives is collected directly from medical schools throughout the duration of the program. In coming years data will also be collected at three and five years after completion of medical studies. This report presents summary data from the 2006 CMSQ. This was the first year in which medical students from all Australian Universities were invited to participate in the MSOD.

2.0 Method

All entry level medical students at 15 Australian medical schools were invited to join the study. A list of these medical schools can be found in Appendix A. The MSOD identified and tracked 17 groups from within these medical schools. These groups are listed in Table 1.

Paper versions of the CMSQ's were distributed to students within the first month of commencing medical school. Once completed the questionnaires were returned to Medical Deans Australia and New Zealand and scanned at Educational Assessment Australia (EAA) located at the University of New South Wales. Data was fed back to Medical Deans Australia and New Zealand in SPSS 16.0 for analysis. One school (The University of Sydney) also gave students the option to complete the survey electronically via the internet.

2.1 Questionnaire

The 17 item (26 question) CMSQ gathers student information about basic demographic details, enrolment characteristics, previous tertiary education and plans for future practice. The majority of the questions are quantitative, with three qualitative questions (relating to scholarship source, previous university qualification and partner occupation) which have been grouped into themes. The CMSQ has been on-going since 2005 with only minor changes to the questionnaire format. A link to the 2006 CMSQ can be found in Appendix B.

2.2 Analysis

The data for this report is largely reported as frequency tables and, where possible, follows the format previously agreed by participating medical schools and endorsed by the MSOD Management Committee for predefined reports. Some questions have changed slightly and

therefore parts of the report covering these sections will be slightly different from previous versions.

The overall response rate for the 2006 CMSQ was 82%. The population therefore consisted of 2044 individuals enrolled at 15 Australian medical schools for which usable data was available. Some cell samples with a value of five or less have been suppressed for confidentiality reasons (indicated by x). All percentages are rounded to one decimal place, except total percentages which are rounded to the whole number.

3.0 Results

3.1 Students' characteristics

Table 1 shows the number of respondents enrolled in each group. Of these groups eight were graduate-entry programs, responsible for training 42% of the responding students.

Table 1. Number of respondents in each group

Group	Frequency	Percentage
Australian National University (Graduate-entry)	76	3.7
Bond University (Undergraduate-entry)	78	3.8
Flinders University (Graduate-entry)	94	4.6
Griffith University (Graduate-entry)	71	3.5
James Cook University (Undergraduate-entry)	91	4.5
Monash University (Undergraduate-entry)	207	10.1
University of Adelaide (Undergraduate-entry)	117	5.7
University of Melbourne (Undergraduate-entry)	223	10.9
University of Melbourne (Graduate-entry)	68	3.3
University of Newcastle (Undergraduate-entry)	100	4.9
University of New South Wales (Undergraduate-entry)	198	9.7
University of Notre Dame (Fremantle [Graduate-entry])	79	3.9
University of Queensland (Graduate-entry)	289	14.1
University of Sydney (Graduate-entry)	161	7.9
University of Tasmania (Undergraduate-entry)	48	2.3
University of Western Australia (Undergraduate-entry)	114	5.6
University of Western Australia (Graduate-entry)	30	1.5
Total	2044	100

Base: All surveyed individuals (n=2044)

Consistent with results from previous CMSQ's approximately 56% of respondents were female (Table 2 below).

Table 2. Gender of respondents

Gender	Frequency	Percentage
Male	908	44.4
Female	1136	55.6
Total	2044	100

Base: All surveyed individuals (n=2044)

Respondent ages were grouped into 5-year age ranges and are presented in Table 3. Eighty four percent of the sample was under the age of 25. Among the respondents commencing undergraduate-entry programs 96% were under the age of 25, compared with 67% of those in graduate-entry programs. The mean age was 21 years old (Standard Deviation [SD] =5.1).

Table 3. Age range of respondents

Age Group	Frequency	Percentage
<20 years	971	47.5
20-24 years	742	36.3
25-29 years	210	10.3
30-34 years	54	2.6
35-39 years	35	1.7
40 years and over	32	1.6
Total	2044	100

Base: All surveyed individuals (n=2044)

3.2 Admission/Entry Scheme

The majority of respondents (58%) were attending medical school under the Commonwealth Supported Place (CSP) scheme (Table 4). Rural scheme students (including Commonwealth Medical Rural Bonded Scholarship students and scholarships provided by the Queensland or South Australia health departments) totaled 5%. Twenty six percent of students paid full fees, including both International Fee Paying (IFP) students and Australian Full-Fee Paying (FFP) students.

Table 4. Entry scheme indicated by respondents

Entry Scheme	Frequency	Percentage
Commonwealth Supported Place (CSP)	1182	58.2
Commonwealth Medical Rural Bonded Scholarship	84	4.1
Commonwealth Bonded Medical Places Scheme	197	9.7
State Health Bonded Medical Scholarship	23	1.1
Commonwealth Department of Defence Sponsored	7	0.3
Australian Full-Fee Paying	193	9.5
International Fee Paying	335	16.5
University funded student	9	0.4
Total responses	2030	100
Missing	14	
Total	2044	

Base: All surveyed individuals (n=2044)

The majority of respondents (87%) were not in receipt of a scholarship when they commenced medical studies*. For those who were, the sources indicated by students are summarised in Table 5 below. These sources included those provided by the Commonwealth Government, by State Governments, by governments outside Australia, by Australian universities and by other institutions.

Table 5. Source of scholarship indicated by respondents

Scholarship Source	Frequency	Percentage
Australian Commonwealth scholarships**	111	36.8
Australian state scholarships	24	7.9
Scholarships provided by Australian universities	52	17.2
Scholarships provided by home country to international students	104	34.4
Scholarships provided by other institutions	7	2.3
Unnamed	4	1.3
Total	302	100

Base: Respondents who indicated scholarship source (n=302)

* RAMUS and John Flynn scholarship outcomes are generally not known at this stage. The information for both these scholarships is collected via the medical schools data collection.

** Including MRBS, RAMUS and Defence

3.3 Participants Background and Place of Birth

One percent of respondents identified themselves as having Aboriginal and/or Torres Strait Islander descent (Table 6 below).

Table 6. Indigenous status of respondents

Indigenous Status	Frequency	Percentage
Neither Aboriginal or Torres Strait Islander origin	1999	99.0
Aboriginal origin	19	0.9
Torres Strait Islander origin	x	x
Both Aboriginal and Torres Strait Islander origin	x	x
Total responses	2019	100
Missing	25	
Total	2044	

Base: All surveyed individuals (n=2044)

Eighty four percent of respondents were either Australian or New Zealand citizens, or Australian permanent residents. The remainder of respondents held a temporary entry permit or indicated 'other' status (Table 7).

Table 7. Citizenship of respondents

Citizenship Status	Frequency	Percentage
Australian citizen	1616	79.5
New Zealand citizen	28	1.4
Australian permanent resident status	55	2.7
Temporary entry permit	328	16.1
Status other than one of the above	6	0.3
Total responses	2033	100
Missing	11	
Total	2044	

Base: All surveyed individuals (n=2044)

Sixty one percent of all respondents reported being born within Australia. A breakdown of states of birth for these respondents is presented in Table 8. Of these Australian born respondents, 28% were born in NSW, followed by Victoria (26%) and Queensland (20%).

Table 8. State of birth within Australia

State	Frequency	Percentage
NSW	341	28.1
Victoria	310	25.5
Queensland	248	20.4
South Australia	122	10.0
Western Australia	120	9.9
Tasmania	36	3.0
Northern Territory	7	0.6
ACT	31	2.6
Total responses	1215	100
Country other than Australia	808	
Missing	21	
Total	2044	

Base: All surveyed individuals (n=2044)

Tables 9 and 10 report the most frequent country of birth for those respondents who reported an overseas birth. The distribution of birth place differed between citizenship categories; among Australian and New Zealand citizens and Australian permanent residents (Table 9), the most frequent place of birth was China (14%) followed by India (10%) and Sri Lanka (7%). For those holding temporary or 'other' entry permits (Table 10), a third of respondents reported Malaysia as their country of birth (33%), followed by Singapore (20%) and Canada (13%).

Table 9. Overseas place of birth for Australian and New Zealand citizens and Australian permanent residents

Country of Birth	Frequency	Percent
China (excludes SARs and Taiwan Province)	65	13.8
India	46	9.7
Sri Lanka	31	6.6
Malaysia	29	6.1
Hong Kong (SAR of China)	25	5.3
England	24	5.1
New Zealand	24	5.1
Singapore	20	4.2
United Kingdom, nfd*	19	4.0
South Africa	15	3.2
Taiwan	15	3.2
All other (where n≤10)	159	33.7
Total responses	472	100
Missing	8	
Total	480	

Base: Australian and New Zealand citizens and Australian permanent residents reporting overseas birth (n=480)

**(not further defined)*

Table 10. Overseas place of birth for respondents holding temporary or 'other' entry permits

Country of Birth	Frequency	Percentage
Malaysia	107	33.3
Singapore	64	19.9
Canada	40	12.5
Brunei Darussalam	19	5.9
United States of America	17	5.3
All other (where total n≤10)	74	23.1
Total responses	321	100
Missing	1	
Total	322	

Base: Holders of temporary or 'other' entry permits who reported overseas birth (n=322)

N.B. 5 respondents who indicated they were born overseas did not state their citizenship (Table 7)

One third (33%) of respondents spoke a language other than English at their permanent home address (Table 11). Individuals who held a temporary visa were more likely to report speaking a language other than English at home (78%), compared with Australian and New Zealand citizens and Australian permanent residents born overseas (61%), and all Australian and New Zealand citizens and Australian permanent residents, regardless of place of birth (24%).

Table 11. Language spoken by respondents other than English

Language Spoken other than English	Frequency	Percentage
No	1368	67.1
Yes	672	32.9
Total responses	2040	100
Missing	4	
Total	2044	

Base: All surveyed individuals (n=2044)

Table 12 shows the most frequently reported languages among respondents who reported speaking a language other than English at home. The most frequently reported was Mandarin (23%), followed by Malay (15%) and Cantonese (10%).

Table 12. Most frequently spoken languages other than English

Language	Frequency	Percentage
Mandarin	150	23.1
Malay	95	14.6
Cantonese	66	10.2
Tamil	30	4.6
Vietnamese	23	3.5
Arabic	22	3.4
Sinhalese	19	2.9
Hindi	18	2.8
Korean	18	2.8
Bengali	17	2.6
Indonesian	15	2.3
Chinese, nec	13	2.0
French	11	1.7
All other (where total n≤10)	152	23.4
Total responses	649	100
Missing	23	
Total	672	

Base: All surveyed individuals who reported speaking a language other than English (n=672)

Table 13 is limited to those respondents who are Australian or New Zealand citizens and Australian permanent residents who reported speaking a language other than English at home. Mandarin was the most frequently reported (20%), followed by Cantonese (14%), followed by Tamil (7%).

Table 13. Most frequently spoken languages other than English for Australian and New Zealand citizens and Australian permanent residents

Language	Frequency	Percentage
Mandarin	79	20.1
Cantonese	54	13.7
Tamil	26	6.6
Vietnamese	22	5.6
Arabic	19	4.8
Sinhalese	18	4.6
Hindi	16	4.1
Bengali	14	3.6
Korean	14	3.6
All other (where total n≤10)	131	33.3
Total responses	393	100
Missing	17	
Total	410	

Base: Australian and New Zealand citizens and Australian permanent residents who reported speaking a language other than English (n=410)

3.4 Rural/Urban Background

Respondents were asked to indicate the type of geographical location they had lived in the longest within Australia (Table 14). More than two-thirds of respondents (66%) reported they had lived in a capital city or major urban centre the longest. A further 8% had lived mainly in a regional city, while 13% reported living mainly in either a small town or small community. Five percent had lived in Australia for less than a year.

Table 14. Location of longest residency within Australia

Location within Australia	Frequency	Percentage
Capital city	1320	65.6
Major urban centre (>100,000)	176	8.7
Regional city or large town (25,000-100,000)	170	8.4
Smaller town (10,000-24,999)	129	6.4
Small community (<10,000)	123	6.1
N/A, lived in Australia for less than 12 months	95	4.7
Total responses	2013	100
Missing	31	
Total	2044	

Base: All surveyed individuals (n=2044)

Just over one fifth (22%) of all respondents perceive themselves to be from a rural background (Table 15).

Table 15. Self-perception of rural background

Perception of Rural Background	Frequency	Percentage
Yes, from rural origin	418	21.6
No rural origin	1519	78.4
Total responses	1937	100
Missing	107	
Total	2044	

Base: All surveyed individuals (n=2044)

Rural perception corresponded well with the type of location an individual had lived in the longest. As seen in Table 16 the majority (95%) of Australian and New Zealand citizens and Australian permanent residents who had spent most of their time in a capital city or major urban centre did not consider themselves to be rural. This pattern was reversed for those from smaller towns. The overall pattern of increased rural perception with decreasing urban centre size was significant ($\chi^2 [12, 1635] = 1091.91, p < 0.001$).

Table 16. Cross tabulation of self-perception of rural background and classification of location lived in the longest

Location Lived in the Longest by Respondents	Self-perception		
	Yes	No	Total
Capital city (frequency)	44	1068	1112
<i>% within location</i>	<i>11.4</i>	<i>85.5</i>	
Major urban centre (frequency)	14	121	135
<i>% within location</i>	<i>3.6</i>	<i>9.7</i>	
Regional city (frequency)	105	44	149
<i>% within location</i>	<i>27.2</i>	<i>3.5</i>	
Smaller town (frequency)	106	12	118
<i>% within location</i>	<i>27.5</i>	<i>1.0</i>	
Smaller community (frequency)	x	x	121
<i>% within location</i>	<i>x</i>	<i>x</i>	
Total	386	1249	1635
Total percent	100	100	

Base: All Australian and New Zealand citizens and Australian permanent residents stating their location and rating their rural background (n=1635)

Respondents were asked to state the name and postcode of the school where they spent their final year of secondary education. This information was used to indicate state of secondary school. Table 17 shows that the majority (27%) of respondents indicated that they had attended secondary school in NSW, followed by Victoria and Queensland (both 24%).

Table 17. Location of secondary school

State	Frequency	Percentage
New South Wales	442	27.3
Victoria	393	24.3
Queensland	386	23.8
Western Australia	163	10.1
South Australia	135	8.3
Tasmania	48	3.0
Australian Capital Territory	41	2.5
Northern territory	11	0.7
Total	1619	100

Base: All individuals who attended an Australian secondary school (n=1619)

3.5 Previous Higher Education

Just under half (45%) of individuals reported having previously completed at least one university qualification. As expected, almost all respondents in graduate-entry programs reported a previous university qualification (99%). Six percent of those enrolled in undergraduate-entry programs also reported at least one former university qualification.

Table 18 illustrates the discipline in which the highest qualification was completed by respondents who held a previous university qualification. Forty one percent of respondents' highest qualification was in science, followed by medical science (22%) and health/allied health (18%).

Table 18. Discipline within which previous HIGHEST qualification was completed

Discipline	Frequency	Percentage
Science	382	41.2
Medical Science	203	21.9
Health/Allied Health	163	17.6
Humanities	71	7.7
Commerce/Business/Law	33	3.6
Physical Sciences	33	3.6
Other/Unknown	43	4.6
Total	928	100

Base: All individuals who reported previous qualifications (n=928)

For those respondents who reported a previous university qualification, the category of their highest qualification is presented in Table 19. Almost three-quarters of respondents' (72%) highest qualification was a bachelor degree, while 18% held either an honours degree or a postgraduate diploma/certificate. Seven percent held a master's degree and 3% of respondents held a PhD.

Table 19. Category of HIGHEST qualification

Highest Qualification	Frequency	Percentage
Bachelor	669	72.1
Honours	127	13.7
Postgraduate diploma/ Certificate	39	4.2
Master's	62	6.7
PhD	31	3.3
Total	928	100

Base: All individuals who reported previous qualifications (n=928)

3.6 Marital Status and Dependents

The majority of respondents were single (91%). Nine percent reported being *married or living with partner* and 12 respondents (0.6%) reported being *divorced or separated*.

Respondents were asked to state the occupation of their partner (if applicable). These answers were grouped into 14 major categories* which are presented in Table 20. The respondents reported a range of partner occupations: the majority (35%) reported their partners' occupation to be *non health professional*; followed by *student* (17%); followed by *other health professional* (13%).

Table 20. Occupation of respondents' partner

Partner Occupation	Frequency	Percentage
Medical practitioners	7	4.9
Other health professional	18	12.5
Non health professional	50	34.7
Managers	17	11.8
Self-employed	x	x
Technicians and trades workers	12	8.3
Community service workers	6	4.2
Clerical	x	x
Sales Workers	x	x
Machinery operators and drivers	0	0.0
Labourers	0	0.0
Student	24	16.7
Unemployed outside home	0	0.0
Other	5	3.5
Total	144	100

Base: Individuals who reported partner occupation (n=144)

**Occupation categories based on:*

ABS Australian and New Zealand Standard class of occupations, First edition (cat.no.1220.0), revision 1

"Career decision making by postgraduate doctors" AMWAC, Dec 2005

The number of respondents with children under the age of 16 is shown in Table 21. Ninety seven percent of individuals reported having no children, while 2% reported having one or two children, and 0.8% reported having three or more.

Similarly 98% of respondents reported having no dependents (people who are financially dependent on them excluding children under the age of 16 [Table 22]). Those respondents who reported having either or both children and dependents were almost exclusively Australian

citizens or Australian permanent residents (98% of those with children and 97% of those with other dependents).

Table 21. Number of children reported by respondents

Number of Children	Frequency	Percentage
0	1983	97.0
1	27	1.3
2	18	0.9
3 or more	16	0.8
Total	2044	100

Base: All surveyed individuals (n=2044)

Table 22. Number of dependents reported by respondents

Number of Dependents	Frequency	Percentage
0	2010	98.3
1	25	1.2
2 or more	9	0.4
Total	2044	100

Base: All surveyed individuals (n=2044)

Respondents were asked to indicate their source of income for education and/or living expenses (Table 23). As this is a multiple response question (respondents could mark all answers that were relevant) the percentages in the table do not add to 100%. Table 23 shows there were some differences between those enrolled in undergraduate and graduate-entry programs. Government assistance was reported far more commonly for those in graduate-entry programs than those in undergraduate-entry programs (40% and 13% respectively), as was paid employment (42% and 21% respectively). However those respondents in undergraduate-entry programs were more likely to report being supported by parents, partners or other family members, than those in graduate-entry programs (79% and 43% respectively). More undergraduate students reported holding scholarships compared with graduate-entry students (19% and 15% respectively).

Table 23. Source of income reported by respondents

Source of Income	Undergraduate-entry		Graduate-entry	
	Frequency	%	Frequency	%
Government assistance	152	12.9	348	40.1
Parents/other family	934	79.4	372	42.9
Paid employment	243	20.7	366	42.2
Scholarship	220	18.7	127	14.6
HECS/FEE/OS HELP loan	0	0.0	8	0.9
Savings/trust fund	38	3.2	101	11.6
Personal loan	0	0.0	31	3.6
Other	5	0.4	11	1.3
Total	1592		1364	
Total number of students	1176		868	

Base: All surveyed individuals (n=2044), N.B. Multiple response question.

3.7 Location of Future Medical Practice

Table 24 shows respondents' preferences for location of practice on completion of their basic medical degree. Eighty two percent of those responding to this question reported that they would prefer to practice within Australia. When preferences for only Australian and New Zealand citizens and Australia permanent residents were examined, 92% reported that their first preference for location of future practice was within Australia. For those on temporary entry permits, 37% reported that they would prefer to practice within Australia. The preferred states for location of future practice were NSW and Victoria (both 23%).

Table 24. Preferred location of future practice

Preferred Location	Frequency	Percentage
NSW	455	22.9
Victoria	452	22.7
Queensland	367	18.5
South Australia	109	5.5
Western Australia	168	8.5
Tasmania	35	1.8
Northern Territory	17	0.9
ACT	26	1.3
Overseas	358	18.0
Total responses	1987	100
<i>Missing</i>	57	
Total	2044	

Base: All surveyed individuals (n=2044)

Capital cities were the most preferred geographical location for future practice within Australia (53%). The percentage of individuals reporting a particular location decreased as the population of the centre decreased, with just 5% preferring smaller towns and 3% small communities (Table 25).

Table 25. Preferred geographical location of future practice

Location within Australia	Frequency	Percentage
Capital city	1040	52.8
Major urban centre (>100,000)	203	10.3
Regional city or large town (25,000-100,000)	220	11.2
Smaller town (10,000-24,999)	93	4.7
Small community (<10,000)	56	2.8
Not applicable, lived in Australia for <12 months	358	18.2
Total responses	1970	100
Missing	74	
Total	2044	

Base: All surveyed individuals (n=2044)

The preference for a particular location was significantly influenced by past exposure to that location. As presented in Table 26, 76% of those who did not consider themselves as coming from a rural background reported that they would prefer to practice in capital cities. Those perceiving their background as rural were significantly more likely to consider increasingly rural locations as a preferred option for future practice ($\chi^2 [12, 1563] = 581.12, p < 0.001$).

Table 26. Cross tabulation of self-perception of rural background and preferred location for future practice

Preferred Location of Future Practice	Self-perception		
	Yes	No	Total
Capital city (frequency)	82	925	1007
<i>% within location</i>	23.6	76.1	
Major urban centre (frequency)	44	150	194
<i>% within location</i>	12.6	12.3	
Regional city or large town (frequency)	124	93	217
<i>% within location</i>	35.6	7.7	
Smaller town (frequency)	57	32	89
<i>% within location</i>	16.4	2.6	
Small community (frequency)	41	15	56
<i>% within location</i>	11.8	1.2	
Total	348	1215	1563
Total %	100	100	

Base: All surveyed individuals nominating a preferred location and rating their rural background (n=1563)

Eighteen percent of all individuals indicated that they would prefer to practice overseas (n=358 [Table 25]). Table 27 shows the preferred overseas country indicated by temporary permit holders whose first preference is to practice overseas. The most frequently reported country was Malaysia (44%), followed by Singapore (16%).

Table 28 shows the preferred location reported by Australian and New Zealand citizens and Australian permanent residents whose first preference is to practice overseas. Respondents most frequently reported the USA (14%), followed by the UK (12%).

Table 27. Preferred overseas country of practice for temporary permit holders

Country	Frequency	Percent
Malaysia	81	43.5
Singapore	30	16.1
Canada	26	14.0
Brunei Darussalam	18	9.7
United States of America	10	5.4
All other (where total n<10)	21	11.3
Total responses	186	100
Missing	21	
Total	207	

Base: Temporary permit holders who preferred to practice overseas (n=207)

Table 28. Preferred overseas country of practice for Australian and New Zealand citizens and Australian permanent residents

Country	Frequency	Percent
United States of America	17	13.7
United Kingdom, nfd*	15	12.1
England	14	11.3
New Zealand	8	6.5
Canada	7	5.6
France	6	4.8
All other (where total n<5)	57	46.0
Total responses	124	100
Missing	18	
Total	142	

Base: Australian and New Zealand citizens and Australian permanent residents who preferred to practice overseas (n=142)

**(not further defined)*

N.B. 6 respondents who reported they preferred to practice overseas did not state their citizenship, while 3 indicated 'other' status.

3.8 Preferred medical practice

Table 29 shows the area of future medical practice respondents would like to pursue. The majority (29%) of respondents indicated they had not yet decided which area they would like to pursue. The most frequently reported preferred area of medicine was surgery (19%), followed by paediatrics/child health (12%) and general practice (10%). More male than female respondents selected surgery as their first preference (27% compared to 13%), while more females than males selected paediatrics/child health (15% compared with 7%) and general practice (12% compared to 9%). The leading choices for males were surgery (27%), followed by general practice (9%). The leading choices for females were surgery (13%), paediatrics/child health (16%) and general practice (12%).

Table 29. Preferred area of practice for respondents

Area of Medicine	Male		Female		Total	
	n	%	n	%	n	%
Adult medicine/Internal medicine	58	6.5	62	5.5	120	5.9
Anaesthesia	24	2.7	15	1.3	39	1.9
Dermatology	9	1.0	16	1.4	25	1.2
Emergency medicine	54	6.0	44	3.9	98	4.8
General practice	82	9.2	130	11.6	212	10.4
Intensive care medicine	12	1.3	6	0.5	18	0.9
Medical administration	x	x	x	x	x	x
Non-specialist hospital practice	x	x	x	x	x	x
Obstetrics and gynaecology	13	1.5	83	7.4	96	4.7
Occupational medicine	x	x	x	x	x	x
Ophthalmology	17	1.9	30	2.7	47	2.3
Paediatrics and child health	64	7.1	172	15.4	236	11.5
Pathology	14	1.6	28	2.5	42	2.1
Psychiatry	27	3.0	27	2.4	54	2.6
Public health medicine	x	x	x	x	9	0.4
Radiology	13	1.5	8	0.7	21	1.0
Rehabilitation medicine	x	x	x	x	x	x
Rural and remote medicine	x	x	x	x	x	x
Surgery	242	27.0	147	13.1	389	19.0
Other	5	0.6	2	0.2	7	0.3
Not yet decided	251	28.0	336	30.0	587	28.7
Total responses	896	100	1120	100	2016	100
Missing	12		16		28	
Total	908		1136		2044	

Base: All surveyed individuals (n=2044)

When asked if they were interested in becoming involved with medical teaching and/or research, 67% of respondents said that they would be interested (Table 30).

Table 30. Respondent's interest in Medical teaching and/or Research

Interest in Medical Teaching and/or Research	Frequency	Percentage
Yes	1332	66.5
No	672	33.5
Total responses	2004	100
Missing	40	
Total	2044	

Base: All surveyed individuals (n=2044)

Appendix

Appendix A

List of Australian medical schools:

The University of Adelaide
Australian National University
Bond University
Flinders University
Griffith University
James Cook University
The University of Melbourne
Monash University
The University of Newcastle/The University of New England
The University of New South Wales
The University of Notre Dame
The University of Queensland
The University of Sydney
The University of Tasmania
The University of Western Australia

Appendix B

Link to the 2006 CMSQ:

http://www.medicaldeans.org.au/MSOD_Webpages_05_08/2006_questionnaire.pdf