



A Better Culture

The Newsletter

abetterculture.org.au

APR 2024

PROJECT UPDATE

The A Better Culture project is gaining momentum. We are pleased to announce substantial advancements in the recruitment process for our working groups, resulting in the appointment of all five working group chairs. The team is actively recruiting members for these groups. These Working Groups will provide essential content expertise and implementation support to the Advisory Board, contributing significantly to the overall project deliverables.

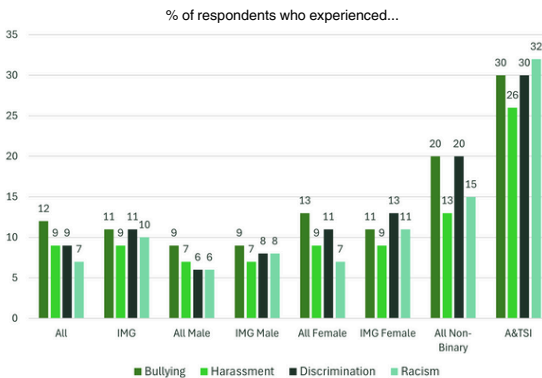
The project also recently completed a thorough environmental scan in the last quarter. We extend our sincere appreciation to the specialist colleges that participated in this scan. Their commitment to sharing college materials related to our key project themes has been invaluable. This collaboration has propelled us forward, with notable advancements in our environmental scan. The insights gathered will be instrumental in shaping our national strategic engagement approach. The "A Better Culture" project aspires to provide an opportunity for employers and colleges to come together on a set of common goals, to provide meaningful improvement to healthcare workforce engagement and retention.

MTS: BEHIND THE DATA

A Better Culture has two areas of specific focus in phase 2 of the project – gender and racial equity. Historically, it has been difficult (but possible) to extract comparative data from the MTS "build your own report" website, but there has been a recent, and very welcomed enhancement and we will be putting it to good use. It is now possible to create a report that compares two groups. By providing segmented and comparative data in this manner, the MTS not only encourages transparency but also introduces new depths of information and unlocks greater visibility to the impacts of intersectional inequity. Coinciding with this upgrade to the reporting website, AHPRA have published their first gender report – this was one of the recommendations in our submission to AHPRA regarding the MTS, and we strongly support further discussions and action on the issues it raises.

Looking specifically at gender, the national total for trainees who had experienced discrimination was 9%, with non-binary trainees reporting higher instances at 20% and female trainees at 11%. When compared to the 6% reported by the male counterparts, the gender impact is more clearly visualised. This pattern is repeated to varying degrees across all the adverse behaviours.

Gender clearly has an impact on trainee experiences, but race is also associated with adverse training experiences. Most striking of all, is the stark differences in experience of Aboriginal and Torres Strait Islander trainees who report – 3 – 4 times higher than the national totals. Unfortunately, the publicly available data for Aboriginal and Torres Strait islander trainees cannot be segmented by gender. However, extrapolating from the patterns across the general and IMG cohorts, we should at least be curious as to whether the experience for non-binary and female Indigenous trainees is even worse than what is expressed in the already confronting data on Indigenous trainee experiences.



Female Consultant, 15 years post fellowship, on her experience of sexism

"As an intern, I was inappropriately touched by a senior cardiologist in a medical supplies cupboard. As a specialist trainee, I was subjected to a constant stream of "banter" of an explicit sexual nature, peddled by a consultant and direct supervisor. As a specialist, I was groped by my head of department during a meeting about departmental restructuring. Every time I spoke up, I was told that it was part of the job, best to play along, not to make waves. These were powerful men that had a hand in my career. It wasn't worth the drama."

These disparities are not just numbers; they are indicative of the challenges faced by specific groups within the medical training environment. It is important to look behind the aggregated data in order to understand the drivers of adverse behaviour, and it is clear that at least two of those drivers derive from gender and race. The data has some issues of reliability – these are voluntary reports to a survey, but they tell a story nonetheless, and one that is plausible in the context of a society that more generally continues to grapple with gender and race discrimination.

The distress signals from non-binary and female trainees, as well as trainees from other groups, highlight a disproportionate burden of negative experiences. Such disparities serve as a stark reminder of the challenges that many trainees face. It is also a timely reminder that the experience of the most privileged group is not necessarily enjoyed by all – this is not to blame those with privilege, (which is not a result of their choices or actions), but it brings an obligation to be more curious about the unseen messages in the general data. I encourage readers to visit the MTS website and pull out data that allows a better understanding of the experiences of women, non-binary, international graduates and other groups in their college, state or training location.

Dr Jillann Farmer
CEO, A Better Culture

Acknowledgement of Country

A Better Culture acknowledges and pays respect to the Traditional Owners of the lands across Australia and extends gratitude for their contributions to health and healing. We pay respect to Elders and ancestors past and present and acknowledge that Sovereignty was never ceded.

In the news

[Working for Women: Australian Government launches national gender equality strategy](#)

This strategy recognises the long path ahead for Australia to achieve gender equality and raises 5 areas for action. We are particularly interested to see the initiatives around leadership, representation and decision-making and how they will improve Australia's health care workplaces in the next 10 years.

[Giridharan Sivaraman commences as Race Discrimination Commissioner](#)

The new Commissioner raised the importance of being honest and reflective of people's experience of racism in Australia and the urgent need for a united country-wide approach to prevent systemic racism. We are very keen to see the progress of his team's work.

[Fresh lens exposes variations in experience of medical training across genders](#)

The MBA's recent media release follows the addition of the comparison tool on their "Create your own report" section of the MTS website. This now allows you to compare survey data between 2 groups. In our case this has been particularly helpful, as we discuss further in our opinion piece. The MBA highlights the clear difference in the experience of women and non-binary trainees in comparison to men and we welcome this transparency as a good first step towards stamping out sexism and transphobia in the healthcare workforce.

Follow us on





My Australian Nursing Career

Letitia Lewandowski
Registered Nurse, RIPRN, RAN

I am an American trained nurse and have been working primarily in rural emergency departments for the past 12 years. I have had a few days with good staff to know what works well. **A brilliant day for me borders on chaos in the Emergency Department with staff who work in harmony, completing each other's tasks without verbal communication, all the while giving good patient care (with smiles on their face).** No matter how challenging a day is, if you have staff who work in union with positive attitudes, it is a good day

Unfortunately, my Australian nursing career started with me sporting my favourite stethoscope and within the first minute of my first day of work, I was asked **"what do you think you are, a doctor?!"**. Sadly, I turned around and put my stethoscope in the locker. The first four years were filled with hardcore bullying from my co-workers and management.

More recently, I was working in an environment where bullying was not only known but accepted by management. One staff member going as far as saying, through tears, "this place has broken me." **It seems like we go to great lengths to make policies and procedures to combat bullying, but their efficacy doesn't reach beyond the computer screen.** While I have had a good manager and good days, I have found the norm in my Australian nursing career to be filled with oppressive and belittling behaviour from many of my colleagues and managers. I feel like this needs to change.

JOIN THE CONVERSATION



Upcoming Conferences

Dr. Jillann Farmer
FRACMA, CEO A Better Culture

Will be presenting at:

ANZCA
2024 ELC - Breaking Barriers



Session 1: Leadership without borders - Lessons from a UN transformation

Date: Tuesday 30th April 2024 1:00pm - 1:30pm
Global leadership panel: 2:00pm - 3:00pm
Location: The Sanctuary Cedar Creek Lodges, Mount Tamborine, QLD

RACP
Congress 2024 Shaping Healthcare



Session: Focusing on Our Health and Wellbeing

Date: Friday, May 17th 2024 11:20am - 12:50pm
Location: International Convention Centre, Sydney Cockle Bay Room

RDV
Victorian Rural Health Conference 2024



Opening Plenary: Being a GP takes you places and sets you up for a better culture

Date: Saturday 18th May 2024 9:00am
Location: Quality Inn Mildura Grand Hotel, Mildura Grand Ballroom

Follow us on



Helen Szoke AO

Chair of the Advisory Board



Dr Helen Szoke has had a career spanning community, health, education, regulation and international development. She is a non-executive Director, currently sitting on the Council of the University of Melbourne, the Board of Life Without Barriers, Advisory Committee Member of the Climate Project Griffith University, member of the Expert Panel to Indigenous Business Australia and is an independent member of the Judicial Commission of Victoria. Helen has also completed a number of Reviews into cultural workplace issues with organisations such as VCAT and the Victorian CFA. Helen has served as Australia's Federal Race Discrimination Commissioner and as the Victorian Equal Opportunity and Human Rights Commissioner. Helen has also provided her expertise on a number of advisory groups. These have included chairing the ACEM Expert Advisory Group investigating racism and the Victorian DHHS Bullying and Harassment Advisory Group. She was Deputy Chair of the RACS Expert Advisory Committee examining bullying, harassment and sexual harassment.



Carly Dober

Australian Association of Psychologists Member

Carly Dober is a Melbourne Psychologist and the Policy Coordinator at the Australian Association of Psychologists Incorporated. She has previously worked in educational settings, not-for-profits, private practice and is passionate about healthy and equitable communities.



Karen Stringer

Independent Member

Dr Karen Stringer is the Acting Chief Medical Officer for the Northern Territory Department of Health. Karen is a general practitioner, with a long history of involvement in organisational general practice, medical education and system improvement. Karen is a past Director of Clinical Training (prevocational) 8 years.



David Clarke

Health Consumer Body Member

David has had an extensive career in the leadership of not-for-profit industry associations and peak bodies across the disability, mental health, parks and environment, and workplace health and safety fields – his immediate past role being CEO of the AIHS for 8 years, where he introduced widespread long-term reforms. His current role is CEO of the Australian Patients Association. David has also consulted and held board positions for not-for-profits, worked in government and been involved in small business.



Elise Buisson

Australian Medical Association Member

Dr Elise Buisson is a doctor-in-training working in Sydney. For Elise, one of the great joys of being a part of the medical profession is the opportunity to advocate for a fairer health landscape for the populations we serve. Elise is a Deputy Co-Chair of the AMA Council of Doctors in Training, a past AMA(NSW) State and Federal Councillor and a past President of AMSA.



Judy Finn

Independent Member

Judy Finn has held executive positions in several highly regarded not-for-profit organisations, most recently for RACS, responsible for the implementation of a multi-year program of work in the area of Bullying, Discrimination and Sexual Harassment. Other organisations include Beyond Blue, the Victorian Responsible Gambling Foundation and the National Heart Foundation of Australia. Judy's academic background and expertise lie in the areas of public health, management and education.



Karen Grace

Nursing and Midwifery Member

Karen currently leads the professional practice portfolio at the Australian College of Nursing. She is a RN and Midwife with almost forty years' experience in healthcare. She holds a Master of Health Administration. Prior to joining ACN, she held various executive leadership roles across a variety of health care settings. Most recently she was the Executive Director of Nursing and Midwifery and Quality, Safety, Innovation, and Improvement at Canberra Health Services.



Clare Skinner

Council of Presidents of Medical Colleges Member

Dr Clare Skinner is a specialist emergency physician with interests in leadership, advocacy, workplace culture, quality and safety, clinical redesign and health system reform. Her current areas of focus include transformation of the emergency department workforce, improving care of people with mental health symptoms, building positive culture in hospitals, and fostering diversity and inclusion in health services. Clare works as a clinician, manager and educator.



Louis Peachey

Aboriginal and Torres Strait Islander Member

Dr Louis Peachey is a Gurrimay and Djirribal man from the Djirribaligan language group (Rainforest People) of North Queensland. He is a Senior Medical Officer at the Atherton District Hospital where he works as a Rural Generalist Anaesthetist, and runs a regular clinic at Lotus Glen Correctional Centre. Dr Peachey was the founding President of AIDA, and is a former Board member of the ACCRRM. Dr Peachey Served on the National Board of Headspace between 2012 and 2016.



Michael Gorton AM

Independent Member

Michael Gorton AM is a senior partner at Russell Kennedy Lawyers and has more than 30 years' experience advising the health and medical sector, assisting boards of health organisations to understand their legal obligations for effective governance structures, governance policies and implementing risk management strategies. He is the Chair of Peninsula Health, Chair of Wellways Australia and Chair of Holmesglen Institute and Board member of Latrobe Regional Hospital. He is the former Chair of Alfred Health, a past Board member of Ambulance Victoria and is the former Chair of AHPRA and former Board member of ACEM.



Nicole Higgins

Council of Presidents of Medical Colleges Member

Dr Nicole Higgins represents the depth and breadth of general practice. Nicole is an active GP who is a business owner, director, supervisor, medical educator and working parent. Having previously worked with Tropical Medical Training and RVTS in medical education and training, Nicole has been recognised for her entrepreneurship and innovation in her workplaces. Nicole is the recent ex-chair of GP Supervision Australia and has had directorships from the old days of the Divisions of General Practice through the PHNs.