



Contents

From the RAMUS team

RAMUS gets a new look

RAMUS in the news

A short week as a RAMUS scholar by Scott Robson

High school visits – scholars' experiences

Conference report – 6th Australian Women's Health Conference by Ashlee Finckh

National University Rural Health Conference (NURHC), Alice Springs

Australian Journal of Rural Health

11th National Rural Health Conference

Conference Placement Program

Contributions to *Gone fishin'* are welcome. Please send contributions to ramus@ruralhealth.org.au

From the RAMUS team

More than 170 new scholars have started with the RAMUS Scheme in 2010. So far this year we have also welcomed more than 90 new mentors to the Scheme.

Take a look at the new website for RAMUS at <http://ramus.ruralhealth.org.au>. The website has a fresh new style and logo and a new layout which we hope makes it easier to find what you are looking for.

After three and a half years with the RAMUS team, Carol Paice has moved to another position within the National Rural Health Alliance office. During her time with the team, Carol was the first point of contact for many RAMUS scholars, mentors and prospective applicants and made an enormous contribution to the smooth running of the Scheme.

We have now welcomed Lesley Crompton to the team. Lesley has spent the last 3 years with Sports Medicine Australia and is looking forward to getting to know the RAMUS scholars, mentors and alumni.

This issue of *Gone fishin'* features an article by scholar, Scott Robson, on the week he spent recently with his RAMUS mentor, Dr David Deutscher, who is a general surgeon based in Central Victoria. Scott's article is a great illustration of what can be gained from the mentoring program.

In other articles, scholar Ashlee Finckh describes her experiences at the 6th National Women's Health Conference held in Hobart in July and we report on the recent National University Rural Health Conference (NURHC) held in Alice Springs in July.

Susan attended the NURHC on behalf of the RAMUS scheme and the National Rural Health Alliance. One of the pleasures of the Conference was meeting so many RAMUS scholars there.

We welcome contributions for the newsletter – articles, photos or suggestions – so we hope you might be inspired by Scott's article or other items in this issue to submit a piece yourself for a future newsletter.

Susan, Lesley and Janine
The RAMUS team

RAMUS gets a new look



Go to <http://ramus.ruralhealth.org.au> to see the new website for the RAMUS Scheme.

The site features a fresh new look and logo and improved layout and navigation. A RSS feed service for the 'Current Scholars' page is coming soon.

The RAMUS newsletter will also be getting a makeover from the next issue. We are looking for your ideas and suggestions for the newsletter –

- * What would you like to see in the newsletter?
- * How can we encourage contributions (stories and photos) from scholars, alumni and mentors?
- * How about a new name? When the newsletter started back in 2003, it was given the name of 'Gone fishin', but where the name came from is obscure. We think that the new look newsletter should also have a new name.

Please email your suggestions to ramus@ruralhealth.org.au

Does RAMUS have your current contact details?

Please contact the RAMUS team straight away if your address or other contact details change or if there are any changes to your university enrolment or status.

RAMUS in the news

RAMUS scholars, alumni and mentors featured in the June 2010 issue of *Australian Rural Doctor*. An article by Fiona Van Der Plaat focused on how medical practices can influence medical students to follow a rural career path. For her article Fiona interviewed Gordon Gregory, Executive Director of the National Rural Health Alliance, and Susan Magnay, RAMUS Manager at the Alliance, about the RAMUS mentoring program. She also spoke to several current and former RAMUS scholars about their experiences of rural placements and to RAMUS mentors, Assoc. Professor Bruce Chater and Dr Ros Bullock, whose tips for successful rural placements include: making students part of the team, involving them in community activities and winning over students' partners to the idea of a rural life. (To love, honour and learn: how you can win over medical students. *Australian Rural Doctor*, June 2010, p.18-22)

David Corbet, RAMUS scholar and final year medical student from the Australian National University, has been awarded the inaugural Australian Medical Students' Association (AMSA) National Student Award. The AMSA National Student Award was created to allow medical students to publicly acknowledge the dedication and contribution of their peers on a national stage. David's award is in recognition of his extensive community involvement, especially in support of refugees; high academic achievement; and participation in student organisations, including ARMS, the ANU rural health club. (<http://www.amsa.org.au/press-release/canberran-medical-student-receives-national-honour>)

Lachlan McIver, RAMUS alumnus has been awarded the APCHRI/Robert Graham Center Visiting Fellowship. The fellowship gives an Australian primary health care clinician five weeks international experience working in Washington USA on a research project of interest to both [APHCRI](#) and the [Robert Graham Center](#). (ACRRM *Country Watch* newsletter, 16 July 2010)

A short week as a RAMUS Scholar

by Scott Robson

I had finished semester one of my fourth year and my RAMUS mentor, Dr David Deutscher, had offered me the chance to spend a week with him, and what a great week it was. David is a general surgeon who works in a busy practice in a regional centre in country Victoria. He undertakes both private and public work and also does some teaching with the students at the hospital.

On day one I meet David and we head to the hospital for a morning operating list. We start off with a laparoscopic inguinal hernia repair. I have seen this operation done before though this is the first time I have had the perspective and the anatomy of the area explained to me. Next is a reversal of a Hartman's procedure. David asks me to scrub in. This is a procedure I have never seen done before let alone reversed. It is quite a major operation which requires a large laparotomy to gain access and significant dissection internally. Throughout the operation I am kept involved by holding retractors providing suction and with David firing questions like 'What do you think that is?' All too soon the operation ends and I look up to see David's smiling face offering me a high five and telling me I did a great job and a phrase I would become very familiar with over the week, 'Ballarat fantastic!'

After lunch, I sit in while David sees his patients. David encourages me to ask questions of the patients and examine them and he quizzes me throughout. The afternoon sees a wide range of patients from skin cancers, lap bands, surgical follow ups and patients for investigation.

The next day starts with a ward round of the patients who were operated on yesterday. We then cross to the teaching hospital to conduct a ward round there, as this is the day David works in the public sector. David takes time with each of the patients; first to talk to them and then to quiz the different members of the team on aspects of the patients' disease, treatment, and details or prognosis and recovery. This makes surgical ward rounds the most interactive that I have ever seen, but I am glad to have two other students to share the questions. Next, David offers that I see a triple A repair with his partners. I agree excitedly as I have never seen one before and head into theatre. I am asked to scrub in and assist throughout the operation and am astounded by the scale of the operation and what they are seeking to do. I am asked questions throughout the operation and am kept on my toes but perhaps the most exciting part of the operation was being

asked to place my fingers on a structure and feeling it pulse below them, as this is the aneurysm. 'Ballarat fantastic!' echoes in my mind.

The first operation of the afternoon is the removal of three large skin cancers on an elderly gentleman's shoulders. This was the first lesion I have removed. Next we conduct a lumpectomy and then a laparoscopic cholecystectomy and again I am able to assist with second operation. At the end of the day we go into the other hospital because one of David's partners requires assistance with a mastectomy so again I scrub in to assist and observe two consultant surgeons working in tandem, a very impressive sight.

Day three is a day of operating. The morning starts with a laparoscopic cholecystectomy which I am able to scrub in on and assist with. Next is a thyroidectomy. David and his partner are almost silent in their concentration over this difficult operation. Again I find it remarkable how proficient and intuitive the two surgeons working together are.

We head out for lunch and talk about my elective for next year and all the opportunities there are out there. David tells me of some of the places he has visited and in which he has practised medicine.

After lunch we have a laparoscopic cholecystectomy. By this stage I am beginning to understand the different steps of the operation and the structures that need to be visualised and avoided. David's questions have become more difficult over the progression of the operations and keep me very attentive. He is also allowing me to do more in the operations with a guiding word here and a repositioning hand there. The final operation is a mastectomy where I am now assisting with an increasing level of confidence. The operation and day ends with another high five and the words that still echo in my mind: 'Ballarat fantastic'.

The next morning we are off to a rural hospital an hour and a half away. We arrive and are given a list of patients. The anaesthetist asks if I would like to do the cannulas. I agree and luckily don't miss any.

During the week I learnt a little more about what it means to be a surgeon and a consultant doctor in general. I experienced the health systems of my home town and could compare them to other areas I had been. I met students from other universities and met doctors from all areas of the hospital in both public and private practice. I

gained invaluable experience in the operating theatre and learnt not only about the content of surgery but also about the ethics involved and the administration required for it to function. It was a great week which has left me with a new zest for medicine and the words resounding in my mind: 'Ballarat fantastic'.

High school visits – scholars' experiences

During 2009 several scholars took part in visits to regional high schools organised by their Rural Health Club. Here are extracts from selected 2009 scholar reports that describe and reflect on these experiences:

Sophie Toster (University of WA, 2nd year) reflects on her time in the rural health club and visiting different high schools:

'I have really enjoyed my involvement with UWA's rural health club SPINRPHEX in 2009. I have also participated in the Dr Yes program, through which medical students are trained to present positive health messages to high school students. Over the year I participated in 19 sessions including a week-long trip to schools in towns in the lower great southern area of WA.'

Joanne Baker (University of Notre Dame, completed 2009) visited her local district high school to discuss depression:

'During the year I visited my local District High School in Corrigin to hold an information session with the year 9 and 10 students about depression. The session was conducted under the supervision of the high school health and sciences teacher. During the session we discussed with students the signs and symptoms of teenage depression and suicide, and how to recognise depression in themselves and others. We also discussed what options are available for seeking help with depression, especially in rural areas. I think this session increased students' awareness of adolescent depression and provided them with some basic skills for discussing depression with their peers and parents. Undertaking this session has increased my own awareness about depression in rural communities and also developed my understanding of the need to increase awareness of adolescent mental health in the community. The session also highlighted the challenges which young adults face with seeking help for mental health issues and how isolation can greatly affect the continuity of specialist care which is required with some mental health conditions. This emphasised to me that as a

Rural GP, dealing with complex mental health issues in an isolated community can be very challenging.'

Steven Smith (Flinders University, 2nd year) reflects on enlightening students to the prospect of attending university:

'After a couple of stress and study-filled months, May [2009] saw eight students studying health related degrees at Flinders, Adelaide Uni and Uni SA, head down to Mount Gambier on a rural high school visit. During the two-day trip we spoke at a number of schools in Mount Gambier, Penola and Naracoorte. Many of the students we spoke to had not even considered going to university and had a lot of questions about how to apply for uni, where to live, costs, making friends, leaving home, etc. Coming from a rural area, I had asked many of the same questions and hopefully was able to inspire some of the students to consider further study at university and hopefully a future career in health. Fingers crossed I will see some of them about at Flinders in the coming year.'

Matt Irwin (University of NSW, 3rd year) recalls a rural high school visit in the Hunter valley:

'I took a team of five medical students from my university on a rural high school visit tour of the Hunter Valley. We each came from significantly different backgrounds, and the cumulative and varied experience among us proved a helpful resource for students during the visit. We visited six high schools and saw a total of 190 students in Singleton, Aberdeen, Scone and Muswellbrook. Our presentations aimed to spark interest in rural health in both the students we visited and the team I selected to come with me. The spark for the students was the plastering and clinical skills workshops, as well as information sessions on courses, scholarships and a student's experience of studying at university. The spark for my team was observing the fun that can be had in a rural setting and the health discrepancy between city and country.'

Chris Jarvis (University of Tasmania, completed 2009) was asked to do a motivational speech at his old high school:

'Whilst somewhat petrified of public speaking, I knew it was something I should do to encourage students, many in the same position as myself a few years ago, to continue their studies. I used this opportunity to reinforce the message that you can do whatever you set your mind to, and whilst there may be more barriers to someone living in the country, there are very few which can't be overcome. This fitted one of my RAMUS learning plan

goals, which was to encourage younger students in rural areas to consider pursuing a university education. This year has been very busy with university work, yet I have continued to pursue my interest in rural life, rural medicine and talking to my younger peers about the lifestyle and rewards rural practice can bring. I am completing my internship at a rural hospital in 2010 and hope to get onto a rural GP training program in years to come.'

Conference report - 6th Australian Women's Health (AWH) Conference

by Ashlee Finckh

Ashlee (University of WA, 6th year) attended the 6th Australian Women's Health (AWH) Conference in Hobart in May 2010, with support from the RAMUS Conference Placement Program. Here is an edited version of her report.

The conference had approximately 620 delegates and 150 speakers over three days. Many of the organising committee and delegates present had been involved in the AWH Network since the first AWH conference in 1986 and in developing the first National Women's Health Policy in 1989. It was exciting to be in the same room as these women, especially as one of the purposes of the conference was to release the National Aboriginal and Torres Strait Women's Health Strategy.

Much of the program revolved around the issues of policy formation and advocacy. Many keynote speakers presented on areas that require increased advocacy and recognition in policy including Indigenous women, women with disabilities and lesbian women, and ways in which policy could be more inclusive of these groups.

Highlights for me over the three days were:

- Hearing Professor Fran Baum's keynote address on gender inequity and other social determinants of health. This was a great presentation, as Professor Baum was involved in the World Health Organisation commission on this subject which gave the presentation local and global relevance. One of the most interesting recommendations to come from the commission was the idea of keeping health and the impact on health in mind when forming all new policy. This is a concept that I think could have relevance in rural and remote Australia where public policy has the potential to have great impact on health outcomes.
- A session on 'myths surrounding women during their reproductive life span' from the public health

department of Monash University. The department has researched social stereotypes surrounding issues such as teenage motherhood and influences on the decision to have children. This session provided some great research that not only has influence on public health initiatives, but which will be clinically useful to me in future practice when dealing with patients in these situations.

- Another session that I found interesting was on engaging people in rural areas in health promotion programs. One presentation was on a program in NSW which involved a co-operation between the local community health nurses, the high school and parents to provide a culturally appropriate forum for mothers to participate in their daughters' sexual and cultural education. Another presentation discussed a program to engage farmers and station people in improving their health through education on modifiable lifestyle factors such as diet and exercise. The program promoted the health of the family as part of the 'health' of the farm.
- A performance by Sista Act, a pop group made up of young Indigenous women who sing original music about their pride in their culture. I thought they were really uplifting, and I would love to see them perform again!

I even met some other RAMUS scholars from South Australia and Victoria, which was great!

My attendance at this conference has helped me to see the health of my patients within the wider perspective of local and international health policy. It has also inspired me to, in the future, try to identify weaknesses in health care provision and find a solution which is gender and culturally appropriate and, through this strength, more effective.



Louise Spillman, Ash Finckh, Clare Finnigan and Madeleine Honner

National University Rural Health Conference (NURHC), Alice Springs

More than a dozen RAMUS scholars were among the almost 400 students who descended on Alice Springs for NURHC'10. The strong emphasis of the conference program on Indigenous and remote health was very appropriate to the setting of the conference in Central Australia. There were some outstanding keynote speakers, student presentations and workshops and a full social program.

Some RAMUS scholars had active roles in the conference. As NRHSN Co-Chair, Shannon Nott (UNSW, 4th year) was everywhere, making sure all aspects of the conference ran smoothly.

Laura Smith (Deakin, 2nd year) and Matt Irwin (UNSW, 3rd year) gave papers in the student presentation sessions.

Halli Kleinig (UNSW, 6th year) commented: 'There were some common underlying themes amongst many of the speakers who had worked or were working with Indigenous people. One was.

that relating to people on a human level by having an open and honest approach and attitude is the most effective way to engage and the other being a large emphasis on community consultation as every community is different.'

Geoffrey Keighley (UNSW, 3rd year) said that by the end of the conference he felt 'amazingly inspired to get out and work in rural health'. He also noted that the social and networking activities 'not only gave me an opportunity to interact with medical and allied health students from around the country (including fellow RAMUS scholars) but also gave me a chance to get to know some of the other students at my own university which may be very handy when I undertake rural placement for my studies next year'.

Libby Buchholz (Monash, 3rd year) said 'Over the course of the conference, the most memorable speakers were those who shared their stories of living and working in rural and remote communities on a personal, relatable level.'

For Susan Magnay, RAMUS Manager, the highlights of the conference were: meeting RAMUS scholars; hearing some terrific student presentations; and taking part in the 'Dying Shame' workshop led by Louise Lawler.



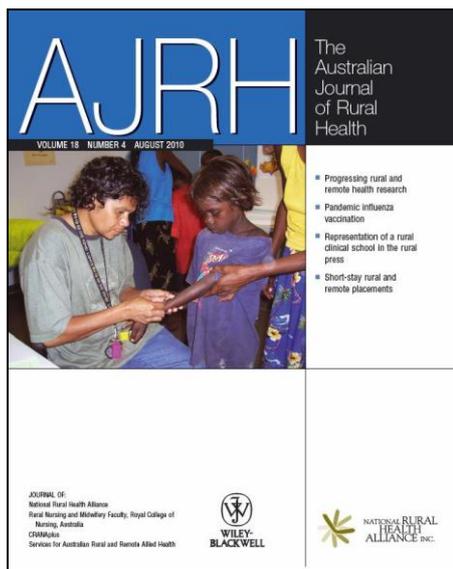
RAMUS scholars get together at NURHC



The NURHC banner



The Todd River flowing



Rural student doctors top city colleagues is the provocative headline of an article in the current issue of AJRH (Vol 18:4) which examines the representation of a rural clinical school in the rural press. The article encourages rural clinical schools to be aware of the potential value of local newspapers to influence positively perceptions of rural lifestyle and education. As the authors point out, these can be key influences on decisions to spend time at rural clinical schools.

The outcomes of the 2nd Rural and Remote Health Scientific Symposium held in Brisbane during July 2010 are reviewed in the latest issue of AJRH. The review sees considerable progress over the last 20 years: initially concerned with the glaring deficits of rural and remote health, the discipline now emphasises the strengths of rural and remote lifestyles, people and services. As the review points out: 'Increasingly, [the] focus is on helping to transform the health sector rather than merely describing it.' The Symposium is also the subject of an editorial comment.

Original research articles cover: pandemic Influenza vaccinations among rural hospital staff; Western Australian short stay dental placements; mental health literacy among young men in South Australia; genital chlamydia testing and notification patterns in NSW; and an approach to evaluating the impact of sustainable comprehensive rural primary health care.

For those with an international outlook there is a report of a Turkish study of rural hospital outcomes that indicates improvement of early transfer and pre-hospital fibrinolysis capabilities should decrease mortality.

Don't forget: RAMUS scholars can access current and back issues of the AJRH at

<http://ramus.ruralhealth.org.au/ajrh>

You can also sign up for regular alerts of AJRH contents by email and RSS feeds.

11th National Rural Health Conference

Perth Convention Centre 13-16 March 2011

The program for the 11th National Rural Health Conference is starting to take shape with James Fitzpatrick confirmed as the Conference MC and invitations going out to keynote speakers.

Keynote presentations will focus on 'resources for regions', child and maternal health, healthy Indigenous communities, workforce redesign, and change management in rural and remote health services. Concurrent streams will include sessions on mental health, sustainable communities, the rural and remote health workforce, chronic disease, e-health and presentations from the Women's Health Longitudinal Study. An arts and health stream will also feature again in the concurrent sessions.

Go to <http://11nrhc.ruralhealth.org.au> for all the information about the conference.

The 11th National Rural Health Conference will be an eligible conference for the RAMUS Conference Placement Program (CPP). Later this year we will be calling for applications for CPP support to attend the Conference.



Conference Placement Program

There will be one more opportunity this year to apply for Conference Placement Program (CPP) support to attend a conference in 2nd semester 2010.

Applications for eligible conference being held in late November – December 2010 are due by 5 October.

Eligible conferences in this period include the Royal Australian and New Zealand College of Ophthalmologists Annual Scientific Congress (Adelaide 20-24 November) and the Australian College for Emergency Medicine annual Scientific Meeting (Canberra 21-25 November).

Go to the CPP web page at

<http://ramus.ruralhealth.org.au/conference-placement-program> for the CPP guidelines and application form.

A preliminary list of eligible conferences for 1st semester 2011 will be issued before the end of this year.

The CPP is open to current RAMUS scholars and former scholars who are members of the RAMUS Alumnus program.



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The opinions expressed in *Gone Fishin'* are those of the contributors and not necessarily of the National Rural Health Alliance or its individual Member Bodies.



Lesley, Janine and Susan, your RAMUS team



Gone Fishin'



August 2010 A newsletter for RAMUS Scholars, Mentors and Alumnus members