

Addiction medicine

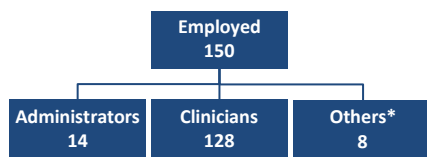
2016 Factsheet



Addiction medicine physicians provide comprehensive care to improve the health outcomes for patients with a wide range of addiction disorders, including drug and alcohol addiction, and pharmaceutical dependency. A minimum of three years full-time training is required through the Royal Australasian College of Physicians to specialise in this area.

Workforce

In 2016, there were 150 addiction medicine specialists employed in Australia, of whom 28.7% worked in the private sector. The majority (85.3%) of addiction medicine specialists indicated they were clinicians.



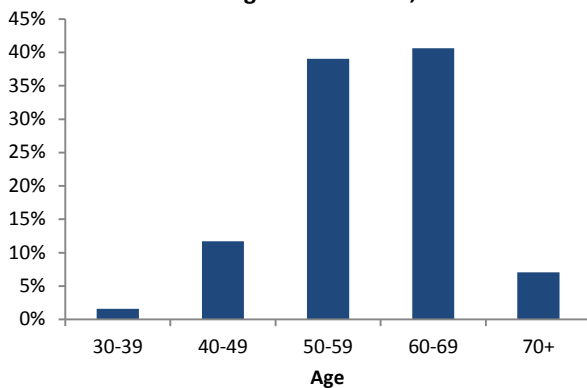
* Includes educators, teachers, researchers and roles reported by survey respondents that did not fit predefined survey categories.

Demographics of clinicians

Males represented 75.0% of clinicians in 2016 and had an average age of 59.8 years. Females represented 25.0% of clinicians and were on average 4.4 years younger than male clinicians.

Category	% of clinicians	Average age	Average hours per week
Male	75.0%	59.8	25.6
Female	25.0%	55.4	24.2
Clinician total	100.0%	58.7	25.2

Ages of clinicians, 2016



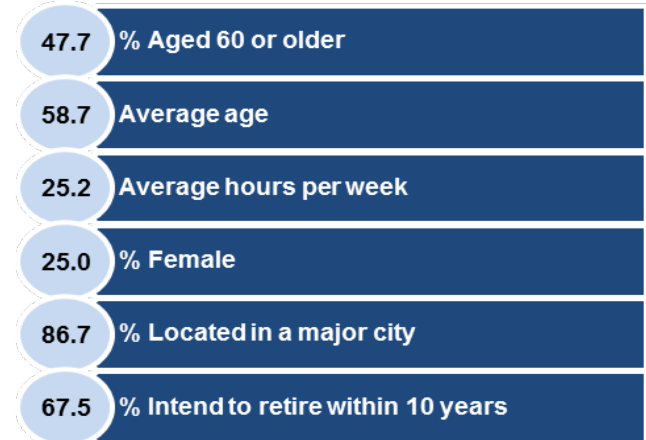
Distribution of clinicians

In 2016, most clinicians (86.7%) were located in a major city or a location considered as MMM1 under the Modified Monash Model classification system.

Location of clinicians by remoteness, Modified Monash Model (MMM*)							
MMM category	1	2	3	4	5	6	7
%	86.7	6.2	4.7	0.8	-	1.6	-

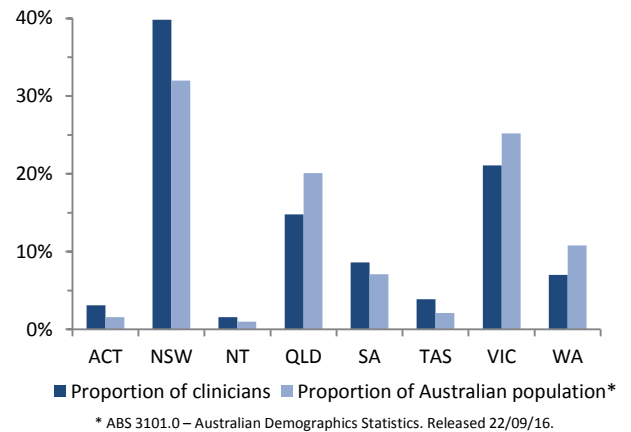
* Further information on the Modified Monash Model is available at doctorconnect.gov.au

Quick facts of clinician workforce



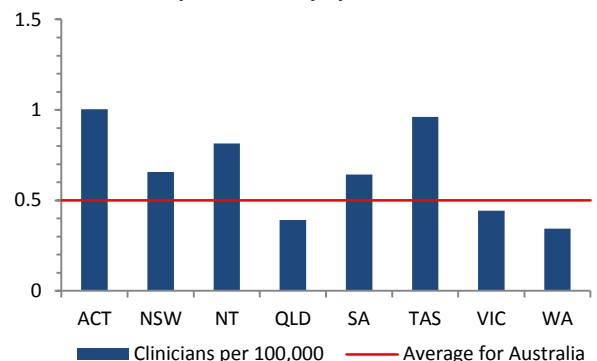
The largest concentration of clinicians was in New South Wales with 39.8% of clinicians indicating their principle place of practice was located in this state.

Clinicians by state & territory, 2016



The Australian Capital Territory and Tasmania had the highest ratio of clinicians in 2016 with 1.0 per 100,000 population. By contrast, Western Australia had the lowest ratio with 0.3 per 100,000 population.

Clinicians per 100,000 population, 2016



New fellows

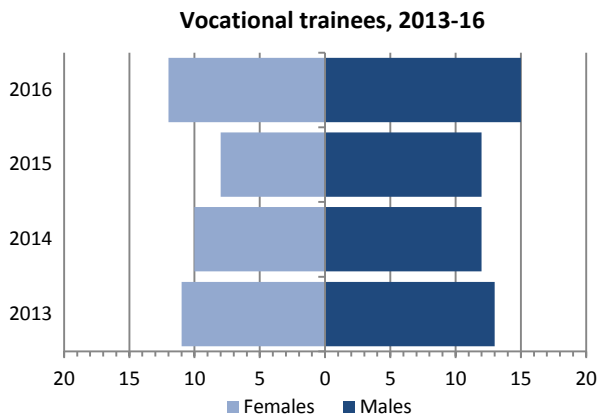
There were no overseas trained new fellows in addiction medicine between 2013 and 2015.

Number of new fellows, 2013-15			
Year	Females	Males	Total
2013	1	2	3
2014	2	0	2
2015	1	7	8

Vocational training

The number of trainees in 2016 was 12.5% higher than in 2013.

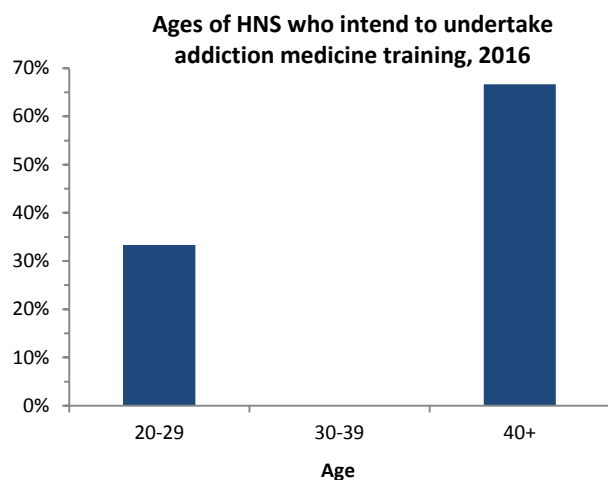
Trainee numbers, 2013-16			
Year	Females	Males	Total
2013	11	13	24
2014	10	12	22
2015	8	12	20
2016	12	15	27
Change 2013-16 (%)	9.1%	15.4%	12.5%



Vocational intentions

In 2016, there were 9 Hospital Non-Specialists (HNS*) who indicated their intention to undertake vocational training in addiction medicine. Over 65% were aged 40 years and over and over 30% were aged 20-29 years.

* A HNS is a medical practitioner employed in a salaried position mainly in a hospital. They do not hold a specialist qualification and are not training to obtain one. They include career medical officers, hospital medical officers, interns, principal house officers, resident medical officers and registrars.



Workforce dynamics indicator*

The workforce dynamics indicator highlights areas of concern in the future. The indicators measured and their current status is highlighted in the table below.

Note: The workforce dynamics indicators are for workforce assessment purposes only and are not intended to guide future training numbers.

* Further information on the workforce dynamics Indicator is available at health.gov.au



Indicator	Description	Status
Ageing of workforce	Workforces with higher average ages are more susceptible to higher exit rates due to retirements.	Orange circle
Replacement rate	This measure indicates whether trainee numbers are sufficient to replace the numbers leaving the workforce.	Green circle
Reliance on Overseas Trained Specialists (OTS)	Workforces with high proportions of OTS are of concern because they depend on a supply stream affected by immigration policies that change.	Green circle
Duration of training program	This measure indicates how long it takes to train a replacement workforce. Indicator considers basic and advanced training components.	Green circle

References

- 1) National Health Workforce Dataset (NHWDS): Medical Practitioners 2016.
- 2) Royal Australasian College of Physicians – Australasian Chapter of Addiction Medicine.
- 3) Australian Medical Association (AMA) Career Pathways Guide.
- 4) Medical Education and Training Report 1st edition (Unpublished).
- 5) ABS 3101.0 – Australian Demographics Statistics. Released 22/09/16.
- 6) National Medical Training Advisory Network (NMTAN) – Prevocational Doctor Factsheet Methodology Paper.

Copyright

© 2017 Commonwealth of Australia as represented by the Department of Health

This work is copyright. You may copy, print, download, display and reproduce the whole or part of this work in unaltered form for your own personal use or, if you are part of an organisation, for internal use within your organisation, but only if you or your organisation:

- a) do not use the copy or reproduction for any commercial purpose; and
- b) retain this copyright notice and all disclaimer notices as part of that copy or reproduction.

Apart from rights as permitted by the Copyright Act 1968 (Cth) or allowed by this copyright notice, all other rights are reserved, including (but not limited to) all commercial rights.

Requests and inquiries concerning reproduction and other rights to use are to be sent to the Communication Branch, Department of Health, GPO Box 9848, Canberra ACT 2601, or via e-mail to corporatecomms@health.gov.au.