

Who do you think they are?

My journey

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A close-up photograph of an elephant's face, focusing on its eye and the surrounding wrinkled, textured skin. The eye is a striking reddish-brown color with a dark pupil. The skin is heavily creased and has a pebbled texture. The lighting is natural, highlighting the intricate details of the elephant's skin.

Sri Lanka





Asian culture

Cultural shock!





Hierarchy


```
for object to mirror...
mirror_mod.mirror_object

operation == "MIRROR_X":
mirror_mod.use_x = True
mirror_mod.use_y = False
mirror_mod.use_z = False
operation == "MIRROR_Y":
mirror_mod.use_x = False
mirror_mod.use_y = True
mirror_mod.use_z = False
operation == "MIRROR_Z":
mirror_mod.use_x = False
mirror_mod.use_y = False
mirror_mod.use_z = True

@selection at the end -add
mirror_ob.select= 1
modifier_ob.select=1
context.scene.objects.active
("Selected" + str(modifier_ob.name))
mirror_ob.select = 0
= bpy.context.selected_objects
data.objects[one.name].select

print("please select exactly one object")

--- OPERATOR CLASSES ---

bpy.types.Operator):
on X mirror to the selected
object.mirror_mirror_x"
mirror X"
```

Language



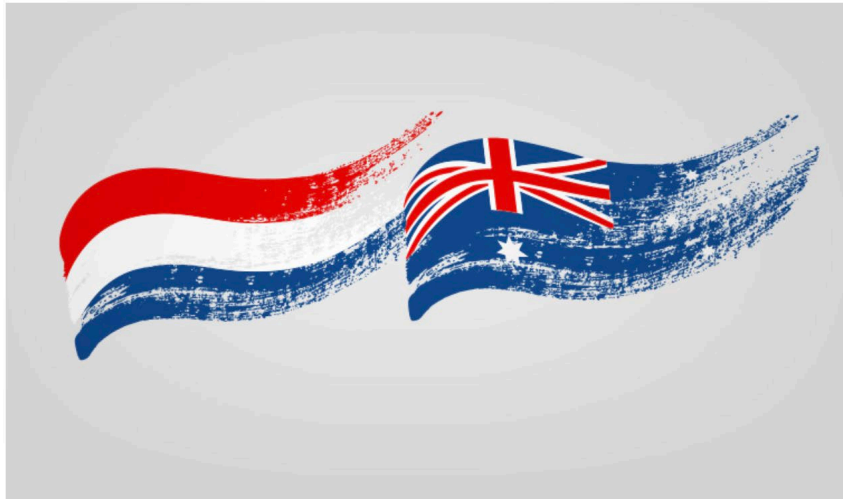


Dr Edwin Kruys


30 Nov 2018

What is it really like for overseas doctors settling in Australia?

Dr Edwin Kruys writes about his journey from the Netherlands to Far North Queensland.



The move from the Netherlands to Australia presented a number of hurdles for Dr Kruys, including the intricacies of the local accent and the liberal use of slang terms.



G'day doc, I'm right off me tucker and crook azadog. Yesterday arvo me neighbour said it's just the collywobbles but, crikey, he's mad as a cut snake so I thought I'd better find out what the doc has to say.



How are you going?



I go by bus!

Bewdy
bottler!

Flat out
like a lizard
drinking

Strewth
mate!

Australian
Slang


G'day

In like
Flynn

What a
corker!

Health as a business model!





Often well-established and respected at home, immigrant doctors start all over again. They are initially temporary residents with limited rights and no access to Medicare. Their medical registration is conditional, they have to work in places where many Australian-trained health professionals don't want to work, and their future is uncertain and dependent on passing health checks, police checks, language tests, assessments and exams.

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ORIGINAL RESEARCH



WILEY

Towards more effective health workforce governance: The case of overseas-trained doctors

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Abstract

Objective: The over-reliance on overseas-trained doctors remains a pressing problem in a handful of countries. This study aimed to explore the experience of rural and remote overseas-trained doctors as regards to their migration, recruitment and ongoing support in Australia as the basis for more effective health workforce governance.





Diversity

The 'doctors from overseas' bring diversity, expertise, experiences, cultures, innovation and stories to Australia. Cross-cultural experience appears to be valuable in many ways; some have argued that immigrants are more **entrepreneurial**, resilient and creative. Whether this is true or not, one thing is for sure, starting a new life in a different country takes courage and perseverance.

Thank you

Next few slides are optional for discussion



Chart 5 – Medical graduates 1999 - 2017

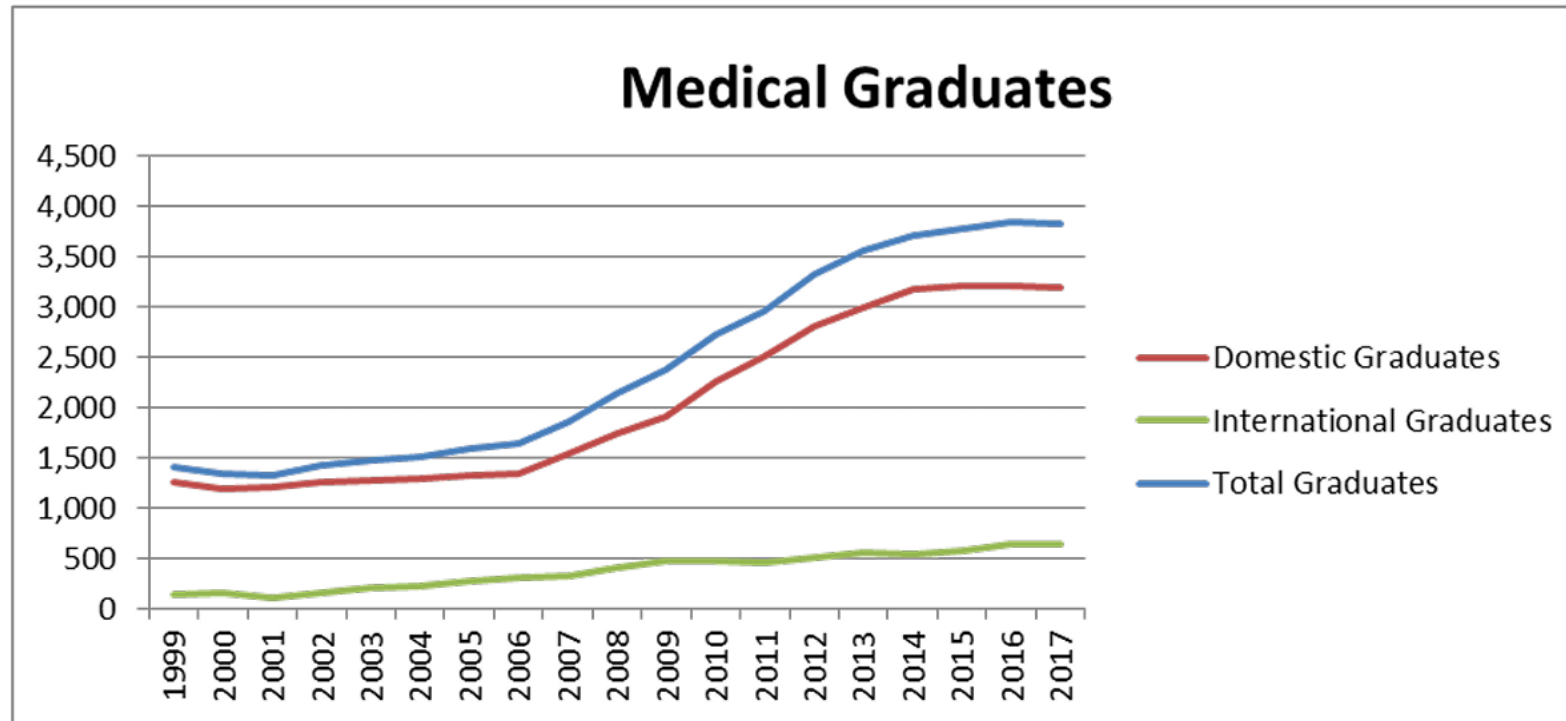


Table 2- Demand for advanced training places compared to available places¹⁰

Category	2012	2018	2024	2030
First year advanced training positions available	2,335	3,103	3,272	3,526
Doctors seeking first year advanced training positions	2,558	3,672	3,961	4,537
Difference	224	569	689	1,011

Our dependence on immigration remains high

Australia, like the majority of OECD nations, has been highly dependant on immigration to meet medical workforce shortages. The total number of visas granted to international medical graduates (IMGs) remained around 5,000 a year between 2006-2012, however there is a significant change in the proportion with an increase in permanent visas compared to temporary ones. Further work is required to fully understand this, however, changes in immigration policy and the development of new pathways into registration are likely to have contributed to this.

IMGs are disproportionately represented in rural and regional areas as well as in the less “popular” specialties.

The future!

