

Sexual Health Medicine



Health

The Workforce

Sexual Health Medicine is the specialised area of medical practice concerned with healthy sexual relations, including freedom from sexually transmissible infections (STIs), unplanned pregnancy, coercion, and physical or psychological discomfort associated with sexuality.

In the 2010 calendar year, there were 29 Sexual Health Medicine Physicians who primarily worked within NSW. This workforce had the following characteristics:

Average Age: 53 years

Females: 55.2% of the workforce

Average Hours: Sexual Health Medicine Physicians worked an average 39.0 hours per week (of a standard 40 hour week)

Over 50s: Approximately 66% were aged 50 years and over

Source: AIHW (2012) 2010 Medical Workforce Profile extracts for NSW (unpublished data)



Trainees and New Fellows

Advanced Trainees (AT)*: 10 ATs in 2012 with an average of 11 ATs in Australia between 2010 and 2012

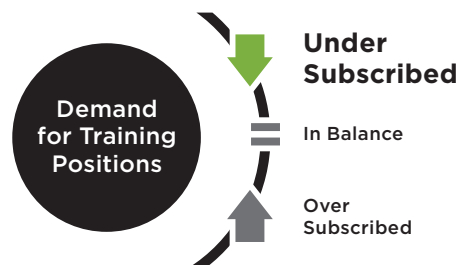
Females: Female AT numbers in Australia have averaged 7 from 2010-2012 (60% of total)

New Fellows: Nationally, an average of 1 new fellow per year from 2009-2011 (100% female)

Medical Specialty College: Royal Australasian College of Physicians (RACP) – Australasian Chapter of Sexual Health Medicine (www.racp.edu.au).

HETI Supported Training: Not part of Health Education and Training Institute Training Networks (www.heti.nsw.gov.au)

Source: Medical Training Review Panel (MTRP) * Basic Physician Training must be completed before entering Advanced Training



Retirement Intentions in NSW

1-2 Years: 0.0% of Sexual Health Medicine Physicians intend to retire within 1-2 years

3-5 Years: 3.4% of Sexual Health Medicine Physicians intend to retire within the next 3-5 years

6-9 Years: 13.8% of Sexual Health Medicine Physicians intend to retire within the next 6-9 years

Source: AIHW (2012) 2010 Medical Workforce Profile extracts (unpublished data)



Supply and Distribution



Distribution: Sexual Health Medicine Physicians are located mainly within Local Health Districts (LHDs) in metropolitan Sydney.

Rural & Regional: Limited numbers of Sexual Health Medicine Physicians located in rural and regional LHDs.

The Future in NSW – Workforce Planning to 2025*

Estimated Demand Growth: Not Applicable

Estimated Workforce Size: Not Applicable

Additional Fellows: All demand scenarios suggest a small number of additional trainees required

Range: Not Applicable

*Workforce Planning to 2025 combines the physician sub-specialties of Addiction Medicine, Occupational and Environmental Medicine, Pain Medicine, Palliative Medicine, Public Health Medicine, Sexual Health Medicine, Clinical Pharmacology and Clinical Genetics. These physician sub-specialties were grouped and modelled together due to small workforce size in the individual sub-specialties.

Workforce Planning Priority and Risk Rating



Ageing: The risk associated with the workforce aged over 60 and 70.

Small Workforce Size: The risk associated with the sustainability of small workforces.

Retirement Intentions: The risk associated with the retirement intentions of the current workforce.

New Fellow Requirements: The risk associated with the requirement to recruit additional trainees, based on workforce planning to 2025.

Training Supervision: The risk associated with the availability of the existing workforce to provide supervision to new trainees.

Future Workforce Considerations

Addressing rural and regional workforce maldistribution