



Occupational and spatial mobility of rural physiotherapists: insights for workforce development

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While 25% of the Australian population lived in a rural or remote area according to the 2011 Census, just 15% of physiotherapists worked in rural or remote areas. Furthermore, rural and remote physiotherapists tended to be much younger and therefore less experienced than their urban counterparts. Addressing undersupply and lack of experience in the workforce requires both attracting more people to the profession (occupational mobility) and attracting professionals to live and work in rural and remote areas (spatial mobility). The purpose of this paper is to examine the extent to which contemporary and historical occupational and spatial mobility of physiotherapists contributes to, or alleviates, rural and remote undersupply of the profession. Data are drawn from each Australian Census between 1986 and 2011, with a focus on detailed analysis of data from the 2006 and 2011 Census. Despite some limitations, the Census provides a useful source of information because it is historically consistent, and it provides details about the demographic, economic and educational characteristics of physiotherapists that are not available in other national data sets. Specifically, the research describes the flow of practising physiotherapists in to and out of rural and remote areas in each State and Territory, the occupations of people who have physiotherapy qualifications, and the impact of migration and education-occupation match on the number and demographic characteristics (particularly age) of physiotherapists who work in rural and remote areas. The research suggests that migration streams favour young physiotherapists moving to rural and remote areas from urban areas, and older physiotherapists moving from rural and remote areas to urban areas. There are also substantial numbers of qualified physiotherapists living in rural and remote areas and who work in other occupations, suggesting that occupational mobility may be as important as spatial mobility in its contribution to workforce undersupply. The paper is innovative in the context of health workforce research because it specifically considers workforce shortages as a migration issue, and because it examines migration over a 25-year period. This research is valuable to workforce planning since it reveals a potential underutilised capacity in rural and remote areas that may be targeted to return to rural professional practice, as well as revealing inefficiencies in the current physiotherapist migration system that could be addressed through location specific initiatives.