

# Where the rubber meets the road: Teaching and learning encounters between International Medical Graduate general practice Fellowship candidates and supervisors.

## Aim and objectives

Like all general practice trainees, International Medical Graduate (IMG) registrars learn their vocational practice through working as a GP under supervision. However, there are claims that their training experiences can be different to domestically trained doctors, which may be due to a number of factors, such as, the challenges they face in transitioning to a new country or how their earlier educational experiences influence how they engage with and learn through work activities. There are also claims that teaching IMGs is different to teaching domestically trained doctors, although in what ways the teaching is different is not clearly articulated. Nonetheless, these claims flag that the education and training provided is likely to be a significant factor in a positive (or difficult) training trajectory. Given that supervisors have an important role in the successful integration of IMGs into the Australian general practice workforce we decided to investigate the educational interactions between GP supervisors and IMG registrars with the aim of expanding our understanding of a workplace pedagogy<sup>1</sup> for the education of IMG GP registrars. The research was guided by this overarching question: What can teaching and learning interactions between supervisors and IMG general practice Fellowship candidates tell us about a workplace-based pedagogy for IMG education?

We hoped to provide an account of the teaching and learning of IMG registrars in the workplace, which could be used to inform our knowledge about how supervisors can enhance their educator practices and IMG registrars optimise their training experiences.

## Method

An embedded multiple-case study design using qualitative methods provided the framework for the research. We recruited five pairs of IMG registrars and their supervisors, with each pair being a case (i.e., five cases).

The data corpus comprised of three data sets: foundational interviews; real-time recordings of teaching and learning encounters; and stimulated recall interviews, where participants articulated their 'thinking' about the recorded teaching and learning encounters.

We used template analysis to analyse the data, which allows both inductive and deductive approaches to analysis. This allowed us to acknowledge the sensitizing concepts that had shaped our initial thinking, such as the perceived importance of the educational relationship between supervisors and registrars, and be open to new interpretive insights at the same time.

We completed both a within and cross-case analysis; the latter aggregating the findings across the individual cases.

## Findings

The five registrar participants were awarded their primary medical qualification from countries in Melanesia (1) Western Africa (1), and Southern Asia (3). Two were in General Practice Term 2 (GPT2), and two were in GPT4 on the RACGP's AGPT program. The fifth was an ACCRM registrar in her second year of training. Three of the supervisors were Australian trained doctors; one was an IMG from a country in Southern Asia; and one began studying medicine in a country in Southeastern Asia and completed his degree in an Australian partner university. The five pairs were situated in three states in Eastern Australia: in a metropolitan area (1), regional centre (1), large rural towns (2), and a small rural town (1). Recruiting the participants was onerous, and the requirement for consenting pairs most likely contributed to the recruitment of participants who were well-disposed towards each other. All the pairs put themselves forward to participate in the project in response to multiple advertisements.

For all of the participants – that is, the IMG registrars and supervisors – being a novice GP was perceived as being more significant to teaching and learning interactions than being an IMG. The registrars had made successful adaptations – an acculturation process – to the Australian healthcare system, Australian language, and Australian culture prior to joining the general practice training program. Thus, much of the significant acculturative stress had been experienced prior to joining the training program. This meant that the teaching and learning was predominantly focused on the process of becoming a GP who can practice independently anywhere in Australia.

This is not intended to downplay the challenges that the IMGs experienced in emigrating to Australia to practice medicine. Collectively, participants told of the challenges they faced, such as obtaining AMC registration, encountering racism, finding a first job, the loss of income and status, and the trials of learning Australian English.

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<sup>1</sup> Pedagogy encompasses the relationship between teaching and learning and therefore includes the perspectives and practices of both supervisors and registrars.

Yet, these early challenges were offset by examples of supportive workplaces and helpful supervisors in tertiary settings. Thus, although IMGs experienced significant challenges during their early years in Australia, those experiences were diverse and not exclusively stressful.

There was evidence that both partners regarded each other and the educational relationship favourably. Although not a novel finding, the empirical data is able to illuminate abstract processes, like the mobilisation of teaching and learning resources and the moderation of power; demonstrate ways in which supervisors show commitment to the registrars and the learning process; report on registrars' perceptions of the educational relationship and the actions that their supervisors enact as educators; and give examples of the registrars agency as learners. All the supervisors manifested a strong teacher identity and the registrars a strong learner identity. Yet, how participants approached teaching and learning was largely a result of tacit 'theories-in-use'; that is, more unconscious beliefs and values that guided their teaching and learning behaviours. The value of the stimulated recall interviews was that it provided participants with the space to try and articulate these tacit theories, a process (and outcome) that was augmented by the analytic work. Thus, a key outcome has been to uncover these varied and personal tacit 'theories-in-use' and link them to more formal theoretical perspectives.

## Discussion

Even though the findings are based on a small number of cases, it is useful to report on IMG registrars who are doing well in their training, who are positive about the support they are getting from their supervisors and the scaffolding provided by the training programs, and depict them as agentic learners. This is a useful counter-narrative to 'the struggling IMG' or only reporting on the challenges they face.

Adopting a social constructivist perspective was valuable in keeping the interactions between the supervisor and registrar 'front and centre', and in turn shining a theoretical light on the educational relationship. As a reflexive comment, it was initially almost automatic – a bias of some kind – to foreground the actions of the supervisors, rather than give equal weight to those of the registrars. Having a theoretical perspective that put a spotlight on both partners ensured that registrars' voices were heard in the research and that attention was drawn to their significant agency. This is an important methodological choice.

The opportunity to partake in the stimulated recall interview, with its focus on teaching and learning, was valued by the participants. The aspiration for doctors to be 'reflective practitioners' is necessarily skewed towards their clinical practice. However, this project suggests that there are merits in broadening the focus to include supervisors' teaching and registrars' learning practices, through some form of guided reflection.

## Implications

There are likely to be benefits in:

- Supporting supervisors and registrars to explore preexisting expectations about teaching and learning.
- Intentionally paying attention to the educational relationship, as learning comes from the relationship between the supervisor and the registrar.
- Learning to pay attention to the process of teaching and learning as it unfolds between teacher and learner.

## Future research

We were struck by the concern of the general practice stakeholders who we spoke to during the course of the project about the plight of IMG registrars, especially from ineligible IMG supervisors (i.e., who were not currently supervising an IMG registrar), and IMG registrars who wanted to share their views, but not involve their supervisors. Since IMGs are actively encouraged to come to work in Australia in large numbers, the training stakeholders have a duty to do as much as they can to support IMGs in their training journeys. Crucially, this requires listening to their voices and drawing out the lessons from their views. We advocate for more research focused on how to support IMGs 'in general'.

Although the supervisor-registrar relationship is often cited as the key factor in the success of general practice training, with the GP supervisor typically framed as being the 'cornerstone' of general practice training, there are a 'trellis of practices' that support registrars' learning, such as formal out-of-practice education requirements, informal networks, and self-directed learning. Decentering the role of the supervisor would allow these other elements to be investigated, which would create a broader and richer account of the teaching and learning of IMG registrars. We think such research will be useful to all forms of medical educators and registrars undertaking general practice training.

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