## News @ a glance

Indigenous health: Australian indigenous health services urgently need 430 doctors and 450 allied health professionals. A report from the Australian Medical Association (AMA), "Healing Hands: Aboriginal and Torres Strait Islander Workforce Requirements" (www.ama.com.au /web.nsf/doc/WEEN-63O9J7), highlights current workforce shortages as well as future training needs to ensure indigenous representation in the medical workforce. AMA President Bill Glasson says "We'd like to build on what the Canadians are doing and train more indigenous workers and get them into their communities. This will only happen with funded training positions for indigenous students." To address the shortage of indigenous workers, the report estimates a need for 928 doctors, 149 medical imaging professionals, 161 dentists, 2570 nurses, 275 pharmacists, 110 occupational therapists, 59 optometrists, 213 physiotherapists and 2000 other health care workers. "This can't wait," says Glasson. "At the moment we're not even treading water, we're going backwards." — Dr. Sally Murray, Melbourne, Australia

Northern school accredited: It

has been a productive summer at the Northern Ontario School of Medicine. Canada's first new medical school in over 30 years is now accredited, accepting student applications and seeking more faculty for a planned startup in August 2005. It is Canada's first school to focus on rural medicine. Since July, the school has been accepting applications from students for 56 spots at the 2 campuses: Laurentian University in Sudbury will accommodate 32 students, while 24 will attend at Lakehead in Thunder Bay. More than 200 faculty and clinical supervisors across a range of disciplines have already been recruited, but a total of 600 will be needed. Dr. Daniel Hunt is the new dean for the West Campus (Thunder Bay); a dean for the East Campus is still being sought. Construction of a new building in Sudbury began in March, and various dignitaries showed up for the groundbreaking event in Thunder Bay on Aug. 24 (see photo).

**R&D rises:** The proportion of research and development dollars spent on health is steadily rising, reports Statistics Canada. In 1996, health accounted for about 18% of all research and development expenditures in Canada. By 2003, it reached 23%, or \$5.1 billion nationally. This is an increase of 7% over 2002.

Global Fund wants you: The Global Fund to Fight AIDS,

Tuberculosis and Malaria is now tapping the public's shoulder. Since it was established in 2002 by the G8 and the United Nations, more than US\$3billion has been committed to programs to combat these pandemics in 128 countries. Now the Global Fund organizers have launched a campaign aimed at "mobilizing" the public, with hope of raising both funds and awareness. The fund's ultimate aim is to stop the spread of these 3 preventable and treatable diseases, which caused 6 million deaths in 2002 (www.theglobalfund.org).

CPP invests in tobacco: The CMA is calling on the Canada Pension Plan to stop investing in the stock of tobacco companies. The investment in tobacco, which totals almost \$95 million, "undermines our national tobacco strategy," said Dr. Jay Duncan, who presented a resolution to CMA General Council, Aug. 18. Duncan, an FP in Brandon, Man., said "It's perverse than an arm of the government is supporting an industry that kills 40 000 Canadians a vear and maims many more." Federal Health Minister Ujjal Dosanjh agreed that government money shouldn't be invested in tobacco companies. "I'm willing to work with you to do the right thing," he told CMA delegates.

"Abortion pill" use: Three years after the US government approved mifepristone (Mifeprex or RU-486), use of the so-called "abortion pill" has increased 70%. Planned Parenthood, which provides the drug at 201 sites, reports that 43 153 American women used the drug in 2003, compared with 12 712 in 2001. Mifepristone, a progesterone blocker, induces abortion in women who are up to 8 weeks pregnant. It is not available in Canada. — Compiled by Barbara Sibbald, CMAJ



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