National Doctors' Health and Wellbeing Curriculum

Introduction

Doctors' Health Alliance (DHA) is the peak body for doctors' health in Australia and New Zealand.

We are very proud to release the National Doctors' Health and Wellbeing Curriculum. This curriculum outlines the core content themes that should be covered when teaching doctors' health and wellbeing. The aim of this curriculum is to ensure that medical students and doctors are adequately trained in this key field of medicine.

The Doctors' Health and Wellbeing Curriculum reflects shared values across the profession and supports safe, sustainable and compassionate medical practice. It is designed to strengthen the wellbeing of doctors and medical students across Australia.

This curriculum recognises that enhancing the health of doctors' health is essential to the delivery of safe, high-quality care. Supporting doctors' wellbeing improves patient outcomes, strengthens workforce sustainability, and fosters a compassionate healthcare culture. This is valued by our profession and by our community. This approach is consistent with the policy statements from our colleges, professional organisations and regulatory bodies. It sits well with the intention of the Australian Medical Council to ensure that medical education and training is responsive to community health needs. This curriculum is consistent with the recently released (2026) Good Medical Practice.[1]

Last year, our draft curriculum was released and we received extensive feedback to support the development of this document. We are very grateful for the generosity of those who supported this process. We are looking forward to collaborating further as we support national training organisations and professional bodies to integrate this curriculum into their teaching and learning.

Drawing on the experience of doctors' health services across Australia and New Zealand, our curriculum is aligned with national and international frameworks on doctors' health and wellbeing, including RACGP, RACP, ACGME, CanMEDS, AMA STEPS Forward, RCGP. It offers a broad and holistic vison of doctors' health and wellbeing.

[1] Hutt K, Kay M. Personal health of the doctor: illness and impairment. (Chapter 12). In: Milroy H, Tonkin A, Walters T, Wilkinson T. Editors. Good Medical Practice. Professionalism, Ethics and Law. 5th Ed. Kingston, ACT: Australian Medical Council Ltd; 2026. p.159-184.

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High Level Summary of Core Content

1. *Understanding doctors' health:* Individual, systemic, and cultural determinants
2. *Professional identity and medical culture:* Norms, values, and wellbeing impacts
3. *Workplace risks and impacts:* Bullying, harassment, racism, fatigue, and safe hours
4. *Self-care, boundaries and help-seeking:* Practical strategies, pathways to care, and how to be a patient
5. *Caring for colleagues:* Dual roles, confidentiality, and treating colleagues safely
6. *When things go wrong:* Adverse events, error, second victim experiences, and recovery
7. *Complaints, regulation and medico-legal stress:* Navigating processes and staying well
8. *Peer support and responding to colleagues:* Building connection, trust, and early intervention
9. *Environmental and workforce wellbeing:* Broader system pressures and sustainability
10. *Leadership and organisational wellbeing:* Culture, systems, and sustainable change
11. *Research and evaluation in doctors' health:* Using evidence to guide practice and measure impact
12. *Career transitions and sustainability:* Across training, practice, and retirement
13. *When a doctor dies:* Suicide awareness, prevention, and postvention including organisational response
14. *Contextual focus areas:* IMGs, rural medicine, medical students, doctors-in-training, and First Nations doctors, Australian Defence Force doctors, Being a supervisor.

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Purpose of the Curriculum

The Doctors' Health Alliance has developed this curriculum to assist organisations to deliver high quality doctors' health and wellbeing education. It is designed to demonstrate that the teaching about doctors' health extends well beyond teaching self-care and detailing concerns about burnout, mental health issues and impairment.

Currently, many of the core content themes presented in the Doctors' Health and Wellbeing Curriculum are either never taught, or only vaguely acknowledged. This curriculum enables a mature approach to the education of doctors' health and wellbeing.

Education across the medical career

Teaching doctors' health and wellbeing:

- Maintains its relevance across all medical and surgical specialties,
- Is essential across the career trajectory - for medical students, junior doctors, early career fellows and more senior doctors through to retirement.

While doctors' health is a foundational requirement for medical students, understanding of doctors' health needs to be actively embedded during junior doctor years and regularly reinforced during the medical career through professional development activities, whatever the career. Doctors' health requires proactive teaching rather that a deferral to a set of resources. The hidden curriculum needs to support, rather than contradict, the messages of formal teaching with senior clinicians modelling positive behaviours and executive leadership focused on ensuring a healthy workplace.

As our roles change throughout our career, doctors will find they are challenged to ensure they enhance their knowledge regarding doctors' health and wellbeing to ensure their skillset is appropriate as their role and responsibilities change.

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	Core Content Themes	Educational Goals	Sample Learning Outcomes / Competencies	Alignment to Roles of the CanMEDS 2015 Framework
1	**Understanding doctors' health: Individual, systemic, and cultural determinants**	Builds foundational understanding of how doctor health affects safe practice and patient care. Encourages recognition of systemic, cultural, and personal influences on wellbeing.	• Recognise why doctors' health is different • Describe the health issues commonly experienced by doctors • Critically analyse systemic and cultural influences on doctors' wellbeing • Understand specific health issues such as moral injury, post-traumatic stress disorder and vicarious trauma • Identify barriers and enablers of health experienced by medical practitioners.	Medical Expert, Health Advocate, Professional
2	**Professional identity and medical culture: Norms, values, and their impact on wellbeing**	Links identity formation to behaviour and ethics. Promotes reflective practice and exploration of values that shape self-care and professional conduct.	• Explain the concept of professional identity • Reflect on how culture shapes health-seeking behaviour • Explore personal values • Understand the importance of self- reflection and reflective practice • Propose strategies to foster supportive professional cultures. • Recognise how personal values and professional identity impact our work – delivering care, being a supervisor	Professional, Scholar, Communicator
3	**Workplace risks and impacts: Bullying, harassment, racism, fatigue, and safe hours**	Equips doctors to identify, prevent, and advocate against unsafe or discriminatory workplace practices, aligning with advocacy and leadership roles.	• Understand workplace rights • Recognise the impact of unsafe culture, workload, and fatigue • Describe reporting and prevention mechanisms related to workplace issues such as bullying • Analyse how organisational policies and hierarchies of power can unintentionally enable bullying, racism or discrimination	Health Advocate, Leader, Professional

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			• Advocate for safe, inclusive workplaces.	
4	**Self-care, boundaries and help-Seeking: Practical strategies and pathways to care**	Develops capacity for ethical self-care, peer communication, and timely help-seeking, reinforcing professionalism and wellbeing. Recognises that all doctors need to maintain health and wellbeing, including supervisors and trainees	• Identify sustainable self-care strategies • Identify common health problems and other risks to wellbeing (such as financial issues) for doctors • Establish effective mechanisms for monitoring health and wellbeing • Develop a personal wellbeing plan • Describe confidential healthcare options for doctors • Understand the role of being a patient and the potential challenges • Understand the barriers and enablers impacting access to care.	Health Advocate, Leader, Professional
5	**Caring for colleagues: Dual roles, confidentiality, and treating peers**	Builds skills in compassionate communication, ethical practice, and maintaining boundaries while supporting peers.	• Understand the pros and cons of professional courtesy • Define how to maintain appropriate boundaries when treating colleagues • Explain confidentiality standards and legal obligations • Demonstrate how to manage a corridor consultation.	Professional, Communicator, Health Advocate
6	**When things go wrong: Adverse events, error, second victim, moral distress and recovery**	Addresses reflective practice, emotional regulation, and system-based responses after clinical error. Encourages shared learning and team support.	• Explain the 'second victim' concept • Understand how adverse events and error are unavoidable • Outline organisational and peer supports after an incident or error • Develop a departmental response plan.	Professional, Medical Expert, Collaborator
7	**Complaints, regulation and medico-legal stress: Strategies for navigating processes and staying well**	Builds literacy in navigating complaints while maintaining wellbeing and professionalism. Encourages reflection and system-level advocacy for fairness.	• Outline how regulatory and medico-legal processes can impact doctors' health • Identify emotional and practical supports available to doctors experiencing medicolegal issues • Identify strategies for managing ongoing investigations.	Professional, Health Advocate, Scholar
8	**Peer support and responding to colleagues: Building connection and trust**	Embeds peer support principles and empathy as clinical and cultural competencies.	• Describe principles of peer support • Identify when escalation is required and outline referral options, including for the suicidal doctor • Discuss the difference between peer support and treatment of a colleague	Communicator, Collaborator, Professional

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		Reinforces team-based wellbeing approaches.	• Practise active listening and empathy when the patient is a doctor.	
9	**Environmental and workforce wellbeing: System pressures and future sustainability**	Promotes understanding of systemic drivers of burnout and encourages doctors to lead and advocate for sustainable, healthy workplaces.	• Discuss links between system design, workload, and wellbeing • Design strategies to enhance psychological safety for doctors • Develop strategies for managing conflict resolution • Propose system-level wellbeing initiatives and identify drivers to enable change • Determine a process for evaluating workplace sustainability measures.	Leader, Health Advocate, Scholar
10	**Leadership and organisational wellbeing: Culture, systems, and enablers of change**	Develops leadership for health culture transformation, focusing on wellbeing-driven systems, policy, and governance.	• Explain leadership's influence on culture and health • Identify levers for enhancing organisational wellbeing • Determine resources for supporting wellbeing that are available locally • Evaluate strategies for measuring positive change within the organisation.	Leader, Collaborator, Professional
11	**Research and evaluation in doctors' health**	Encourages evidence-based practice, research ethics, and evaluation of wellbeing initiatives to advance doctors' health scholarship.	• Critically review doctors' wellbeing literature • Identify the current gaps in doctors' health research (looking beyond wellbeing and burnout) • Consider the appropriate metrics for evaluating initiatives to enhance wellbeing • Explore the ethical issues related to doctors' health research.	Scholar, Professional, Health Advocate
12	**Career transitions and sustainability: Across training, practice, and retirement**	Addresses resilience, adaptability, and advocacy for healthy career structures across the lifespan.	• Identify common stressors in transitions during a medical career • Explore supports that doctors may need when returning to work • Investigate the steps for a gracious retirement • Outline a positive process for transition to a role beyond medicine.	Professional, Health Advocate, Leader
13	**When a doctor dies: Suicide awareness, prevention, and**	Promotes trauma-informed care, postvention leadership, and	• Identify individual, cultural, and systemic risk and protective factors for doctor suicide	Professional, Health Advocate, Leader, Communicator

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	postvention including organisational response	compassionate communication to support individuals and organisations after loss.	• Demonstrate grief literacy and trauma-informed principles when supporting colleagues • Outline immediate, short- and long-term organisational actions after a doctor's death • Apply communication principles for safe, compassionate discussion about suicide and loss • Describe postvention and its role in preventing further harm and fostering recovery.	
14	**Contextual focus areas: IMGs, rural medicine, medical students, doctors-in-training, First Nations doctors, Australian Defence Force doctors, being a supervisor**	Promotes cultural safety, inclusivity, and equitable access to care for diverse groups within the medical workforce. Recognises unique challenges that impact specific cohorts (with the need to develop specific learning outcomes for each)	• Understand the intersection of professional and personal identities • Apply culturally safe and equity-informed approaches when designing wellbeing responses and policies. • Identify community and organisational supports for specific medical cohorts. • Recognise the ethical dilemmas that may emerge for the different contextual factors when health impacts a doctor's performance	Health Advocate, Communicator, Collaborator, Professional

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Working with this Curriculum

Our curriculum applies a broad, contemporary understanding of doctors' health and wellbeing. The curriculum includes an understanding of the health issues experienced by doctors, the risks of failing to maintain our health and wellbeing, the importance of having the skills to support our colleagues and care for our doctor-patients. This broad understanding of doctors' health and wellbeing ensures a deep understanding of how this field of medicine underpins the care we deliver as individual clinicians, impacts the effectiveness of our health care team and supports our leadership capacity, as we work within the complex system of health care.

The breadth of themes that form the core content

The curriculum outlines 14 foundational elements or themes. Together these form the core content of doctors' health teaching. These Core Content Themes are **not** presented as 'sequential modules'. Each theme intersects with the other themes. Together they form a whole. Each of the fourteen core content themes should be included when developing the curriculum, not matter what career level is receiving the education. Educators will need to tailor the teaching to ensure that the teaching addresses the specific needs of those being taught.

However, this curriculum is designed as a whole. The Core Content Themes are not presented as optional. Clearly each theme will need to be addressed in different ways, understanding the different learning needs of the intended audience (medical students vs senior doctors). It is often generally accepted that all doctors at all career levels need support to enhance their self-care skills. However, the breadth of content presented here highlights the need to ensure teaching addresses the broader issues as listed here. Medical students, as well as doctors, need to develop skills to better support their peers and they need to prepare for their role in caring for their doctor-patients. When medical students only receive 'self-care education', they will lack the foundational understandings of doctors' health and wellbeing required for their future medical career.

The hope is that each of these themes will be integrated into the education programme with a positive lens that enables the skills of health access and self-care and support for others. The example learning outcomes provided can assist educators to understand how the learning can be crafted. Even when the essential messages raise concerns about the health of doctors, the key competencies are focused on enabling wellbeing.

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Addressing each theme within the core content

The fourteen Core Content Themes listed are not presented as stand-alone topics to be tick-boxed and done. This list of themes is not intended as a list of topics that single standalone modules will address.

These themes are the key elements that should be incorporated within the medical teaching about doctors' health and wellbeing. The experienced educator, on careful review, will readily identify how the teaching of many of these themes can be with other teachings. The Doctors' Health Alliance has chosen to present the curriculum in this format so that educators can reflect on which of these themes are already being addressed within their existing curriculum. Once these are identified, the challenge will be to determine how the other themes can also be incorporated. Clearly this will depend on the focus of the teaching that the educators are planning. When developing a curriculum for medical schools or specialty training, then the Doctors' Health Alliance is recommending that all of the Core Content is addressed with the educators determining how that content is addressed in the delivery of the education over time.

The table provided in our Doctors' Health and Wellbeing Curriculum offers sample learning outcomes to support educators when they are developing their own, more specific learning outcomes when designing their own syllabus for the delivery of their medical education. The specific competencies or learning outcomes chosen for each teaching space will therefore reflect the training that is being undertaken as well as the specific career stage of the medical students, junior doctors or fellows that the education is being developed for.

Theme 14 - Contextual focus areas

This final theme outlines a range of focus areas that impact the health and wellbeing of doctors. The contextual factors outlined are a potpourri of important issues, however the detail required to be taught about each focus area will vary significantly.

For example, medical students may not need to have a detailed understanding of each focus area. However, it is valuable for them to be keenly aware of the potential for different contexts to impact health access, emergent health issues and the experience of stigma related to illness. Doctors training for work that has a specific context will need to have an opportunity to explore how this focus area may impact doctors' health and wellbeing, including their personal health, in more detail.

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Integrating doctors' health and wellbeing

Doctors' health and wellbeing is best taught as part of an integrated curriculum. This ensures that the teaching is embedded within the clinical learning. Separating teaching about self-care strategies or understandings of compassionate leadership contributes to the hidden curriculum that suggests that doctors' health is peripheral or separate to medicine, rather than a vital part of the clinical foundation for quality care delivery.

Integration requires creativity in the delivery of medical education, which is an essential quality of effective medical teaching. Examples of such integration could include having a case study in which the patient is a doctor. For example, when exploring breast cancer, the patient could be a doctor. The discussion points of the case study could include an understanding of how to provide support for the doctor managing expectations and making decisions about how they will engage with their clinical work. Time off for surgery, chemotherapy or other treatments, managing the cognitive load when the medication may impact capacity and altered skills with the side effects of peripheral neuropathy could be relevant aspects of the discussion. The education remains focused on the task of learning about the breast cancer with all the nuances intended in the case study but adds a different dimension that can resonate strongly.

Another example could be including doctors' health when teaching about research. Choosing a research paper that explores doctors' health issues as an example of the research teaching can enable doctors' health to be understood as a distinct field of medicine. Research papers that incorporate qualitative or quantitative research as well as reviews are readily available within the literature as examples to interrogate and learn from.

These are just two examples of how the core curriculum themes can be incorporated within the other medical teaching. These examples also demonstrate how a number of the themes can be addressed together in the delivery of these teachings.

It is not uncommon for educators to include a case of an impaired physician or a doctor requesting psychotropic medication from a colleague. While such teaching is helpful, it is often not recognised that if such scenarios are the only scenarios that feature a doctor with health issues, then this approach can reinforce a false narrative that doctors only need help when they have mental health issues or other problematic behaviours. The Doctors' Health and Wellbeing Curriculum focuses on the key message that doctors will experience a range of health issues at different times in their lives and having appropriate pathways to care and appropriate health care support, as well as personal support, in a key requirement for the practice of quality medicine.

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Education and Doctors' Health Alliance

Doctors' Health Alliance is now embarking on developing a series of educational events including webinars and material to support continuing medical education, including peer support groups. Over the coming months we will be providing new material on our website which is currently being upgraded to host more content to support doctors and medical students in understanding their health and wellbeing. This will include link to relevant references and other curated material. Building on our own expertise and collaborating with our partners, we are hoping that our education material will support those working as medical educators in their teaching of doctors' health and wellbeing.

Ensuring Safety

As with all teaching of potentially sensitive topics, the teaching of doctors' health and wellbeing requires careful review and appropriate safety-netting to ensure that both those teaching and those learning about these issues have access to support as required. It is appropriate for all medical educational institutions to have pathways for such support and this would include doctors' health services as well as those provided by the educational institution.

Summary

Teaching doctors' health and wellbeing requires a consistent set of messages delivered across the breadth of medical settings. This curriculum is designed to be adapted to the many settings in which medicine is taught. It has been developed by Doctors' Health Alliance to support the delivery of the high-quality education in the field of doctors' health.

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