



## LETTER FROM BAHRAIN

## Is the grass greener where we like sheep have gone astray?

Dear Aunt Ethel

The rain in Bahrain falls inanelly, that is plain. Although the rare downpour, together with the 53% poll in the election, was hailed as a triumph for democracy by the local daily, it modified our beach-braai and turned the car-park into a lake. After eighteen months of globe-trotting I am in the Gulf again, having been to New Zealand twice for the same locum and to the UK twice for three separate jobs.

In the UK Midlands, two final-year medical students from Germany and I formed a mutual admiration society. I had the utmost regard for these intrepid, insightful young women, who had nipped across Europe, the Channel and England in a left-hand-drive Polo, for a three-month elective period in a foreign culture, language and practice of medicine. Each was named Eva and both of their fathers were specialist physicians. The Evas were impressed that a grey-beard could sally forth far from his comfort-zone and remain smiling among junior doctors. Their fathers would never dream of such adventure.

'Aha, but their fathers are not driven by the same motivation!' retorted a wag from Awali Hospital, implying of course the lure to rand-earners of pounds, dinars or dollars, rather than greener grass (or abundant Bahraini astroturf). My candid admission, to quote H C Bosman, is that I have been going overseas because there are certain features associated with foreign travel that are not altogether disagreeable. If one hastens to add that home has many pleasant aspects, comparisons become fruitful.

New Zealand, godzone-country to the locals, is so green that buxom sheep barely stray from one tussock to another. Bahrain is desert-ugly, but the winter is wonderful for evenings on the beach. Keep away in summer. The grass is always green in Britain but winters are bleak. The long summer evenings are lovely and the Peak District is most beautiful. Nonetheless, South Africa can match most of what one finds abroad, and the climate is better.

Here is what you are waiting for: the profit-and-loss column. Accommodation (for locums) is free. In New Zealand this means charming cottages on golf-course or lakeside. In Bahrain you live in comfortable bachelor houses or the well-appointed home of the doctor whose locum you are doing. UK lodgings vary from pretty awful to acceptable. Bahrain and distant New Zealand pay your airfares and provide you with a car: the UK does not. Petrol is reasonable in NZ, free in Bahrain — not that

there's far to go. Public transport is very expensive in Britain, but works pretty well: a pleasure not to be at the wheel. Food is affordable in NZ, exorbitant in Bahrain and the UK. Gross income is best in the UK, lowest in New Zealand, with moderate taxation in both. The Bahrain salary is quoted in sterling and is tax-free. The rand still goes a long way within South Africa, but food prices have risen steeply. I have complied with regulations exempting one from the new Residence Tax when working abroad: outcome awaited.

In Bahrain work is at a cottage hospital: quiet, especially during Ramadan. Elsewhere it is typical general medicine — frantic teaching hospital in Southampton, hectic district general hospitals in Chesterfield and Wolverhampton. The North Island provincial hospital is not as busy. The spectrum resembles private practice in South Africa, with plenty of geriatrics and lifestyle diseases. AIDS simply does not feature. I was a registrar for the first two UK posts through work-permit constraints: a privilege to work alongside eager and supportive junior doctors; but never again — hard and, at times, hair-raising work. In New Zealand and Bahrain one socialises with colleagues: not so in the UK. People are more reserved, but the main issue is that living is hard in the northern hemisphere. My excellent Chesterfield consultant remarked that he had felt tired since the day he qualified!

What are the prerequisites? One needs a rut to get out of, children who are educated, and an understanding, exceptional spouse. Then there is the paperwork: registration with medical councils, locum agencies; applications for UK specialist register and Irish passport; never-ending — just do it. Be prepared to walk: cheap, keeps you fit, gets you to know an area and passes the time. You need self-sufficiency to survive, friends old and new to thrive. Having offspring in the UK helps greatly.

Is domestication essential? My Chesterfield 'floor-mate' Rau, tall with wonderful rolling eyes, prepared mouth-watering Indian dishes weekly. He found me sloshing tuna over a 'naked' potato.

'Cook-king Rob-bairt?' he enquired. 'It doesn't look very good.' Getting closer: 'It doesn't smell very good.' Pause. 'Very bland.'

He mourned the passing of the era in the UK when: 'We doctors in residence were treated like em-per-rorrs. Now? Now they don't even vac-cuummm!'

When asked by lawyer-friends whether one likes being a peripatetic: suspect sour grapes, if not suurveld. For once, their qualifications have let them down regarding off-shore financing. The Emerald Isle beckons next summer, but it will be South Africa in the long term.

Yours affectionately

Robert-Ian

*'Doc' has been in specialist physician practice in Pietermaritzburg for almost a quarter-century. As Robert-Ian Caldwell he performs musical revues and writes an 'Aunt Ethel' column for the local SAMAnewsletter. He and his wife (doctorate in plant pathology) and three children are all past UCT students.*