

Media Statement

8 May 2025

Medical specialist shortfalls persist in rural WA despite workforce growth

Rural Health West's latest *Profile of the Rural Resident Specialist Workforce 2024* reveals modest growth in the number of specialists living and working in rural Western Australia, but highlights ongoing inequities in access to care for more remote communities.

The number of medical specialists based in rural WA rose to 205 in 2024, up from 193 the previous year, and represents a 28 per cent increase over the past decade.

However, almost 80 per cent of specialists are located in larger regional centres, particularly in the South West, while the most remote areas continue to have limited access to local specialists.

"While it's encouraging to see slow and steady growth in the rural specialist workforce, the reality is that many rural and remote communities still have limited access to specialist care," said Professor Catherine Elliott, Chief Executive Officer of Rural Health West.

The 2024 report shows:

- Paediatrics, general surgery and emergency medicine are the most common specialties
- 55.6 per cent of the rural medical specialist workforce is internationally trained
- 44.4 per cent completed their primary medical training in Australia, with over half of those trained in WA
- The average age of rural specialists is now 52 years, with a growing proportion planning to retire in the next five years

Much of the workforce growth is occurring within WA Country Health Service, which employs over half of all rural resident specialists.

However, to ensure access to a full range of services, there must also be greater support for private specialists to establish practices in rural areas.

"Equity for rural communities will only be achieved when both the public and private systems are supported to operate sustainably and collaboratively outside the metropolitan area," Professor Elliott said.

On a positive note, the report shows the average length of stay in a rural practice has increased to nine years, suggesting that rural-based roles are becoming more sustainable for those who choose to stay.

Outreach services continue to play a critical role in addressing healthcare equity, with nearly half of all resident specialists visiting additional rural locations – many supported by federally funded outreach programs administered by Rural Health West.

Professor Elliott said the findings underscore the need for renewed investment in rural training pathways, locally based positions, and policies that make long-term rural practice more viable for specialists and their families.

"Growing and retaining a stable rural specialist workforce is essential to addressing persistent health disparities in our regions. It's not just about access—it's about outcomes, equity, and supporting people to live well, close to home," she said.

To read the full report, visit www.ruralhealthwest.com.au/rural_specialists_2024

ENDS

Report graphics available on request (sample below)

RESIDENT SPECIALISTS BY REGION

SPECIALTY	GOLDFIELDS	GREAT SOUTHERN	KIMBERLEY	MIDWEST	PILBARA	SOUTH WEST	WHEATBELT	TOTAL
Anaesthetics		3		2	1	9		15
Cardiology						4	1	5
Dermatology						1		1
Emergency		7		1	1	13		22
ENT						1		1
General Medicine	3	1	5	2	2	7		20
General Surgery	1	3	2	3	3	11		23
Geriatric Medicine		2				2	1	5
Intensive Care						2		2
Medical Administration			1		1			2
Medical Oncology						1		1
Obstetrics/Gynaecology	2	2	4	3		7		18
Ophthalmology		3	3	2		6	1	15
Orthopaedic Surgery				2		6		8
Paediatrics	4	5	7	2	5	6		29
Palliative Medicine		1				2		3
Public/Population Health			2	1	1			4
Psychiatry	1	5	2	2		8	1	19
Radiation Oncology						2		2
Radiology				1		3		4
Renal Medicine		1						1
Respiratory Physician		1				1		2
Urology						3		3
Total	11	34	26	21	14	95	4	205

Media enquiries: