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**HEALTH CAREERS
— IN RURAL WA —**
SPRING 2025 EDITION

**RURAL
HEALTH
WEST**

Choose Country for a challenging,
varied and rewarding health career



Rewards of rural medicine

Building health careers

Northam GP Obstetrician Dr Pip Gray's path to rural medicine began long before she knew she wanted to be a doctor.

After growing up loving science, Pip took a gap year to explore her options including a stint on a cattle station before choosing medicine.

"I think I knew I wanted to work in the country before I even knew I wanted to be a doctor. The city's just not really for me," she said.

A career grown in WA

Pip studied at The University of Western Australia and the Rural Clinical School of WA (RCSWA) in Derby, before completing her general practice training in Geraldton.

Along the way, she developed a strong interest in women's and children's health and chronic disease management, gaining her Diploma in Obstetrics and practising procedural obstetrics in Geraldton before moving to the Wheatbelt town of Northam.

Since graduating in 2013, Pip has spent all but 18 months of her career in rural WA – a commitment driven by both lifestyle and purpose.

"We know access to healthcare and health outcomes are lower in rural areas. I wanted to do what I could to help bridge that gap," she said.

In addition to her clinical work, Pip joined the RCSWA Regional Training Hubs Program Wheatbelt team in 2024. The program aims to improve the recruitment and retention of rural doctors by creating more opportunities for medical students and junior doctors to train in rural areas.

In this role, Pip provides both mentoring and career planning while helping connect trainees to the right networks – from hospital training posts to GP training placements and specialist pathways.

By working closely with local hospitals, training providers, and health services, Pip helps make it easier for future rural doctors to build long-term careers in the communities that need them most.

Whole-of-community care

One case that stayed with Pip highlights the power of rural healthcare, a simple visit for a minor issue led to the discovery

that a patient was decades overdue for cancer screening.

"They weren't ready to commit right then," Pip said.

"But over time, through caring for their family, delivering their granddaughter, looking after their wife and daughter, the trust grew."

Eventually, the patient agreed to be tested. A cancer was detected early, and the treatment was likely to be curative.

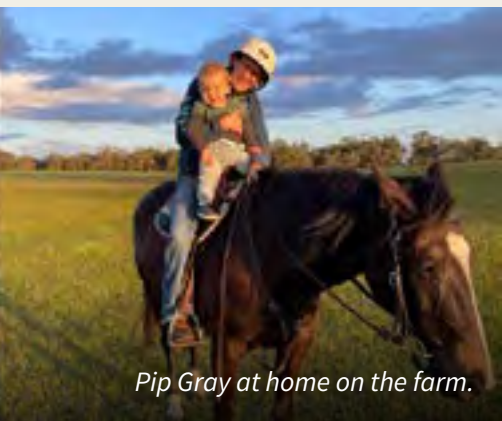
"That's the beauty of rural medicine. You care for whole families over years. That trust can change lives," she said.

Skills for the bush

Working in rural WA demands adaptability, strong clinical judgment and teamwork.

"You never quite know what's going to walk through the door. You need to be confident in your skills but humble enough to ask for help. Telehealth has made that much easier," Pip said.

She is also quick to point out the unique professional and learning opportunities.



Pip Gray at home on the farm.



Pip Gray at Barton Park Emergency Simulation and Wellbeing Workshop with Northam JMOs and medical students.

“You see interesting pathology, develop procedural skills, and work closely with senior doctors. You become a vital part of a small, supportive team.”

Her message to those unsure about rural training was to just give it a go.

“Even if it’s just a term or two, you’ll come away with excellent skills and a better understanding of rural healthcare. And you might just find it’s where you belong.”

Pip believes building a strong rural medical workforce is critical for WA’s future.

“Rural communities need and deserve consistent, appropriately skilled healthcare services. The best way to ensure that is to train doctors in the places we need them most.”

With doctors like Pip Gray leading the way, the future of rural health in WA is looking bright.

For further information about rural training pathways, contact hubs@rcswa.edu.au



Dr Pip Gray embracing the rural lifestyle.

Red earth change reignites podiatry passion



Emma Campbell.



The diversity of practice, working with other clinicians, and testing her problem-solving skills are just some of the career benefits Emma Campbell has discovered while working in rural WA.

Relocating to Karratha from Mandurah in early 2024 (and originally hailing from Scotland), Emma has found new purpose as the sole full-time podiatrist in West Pilbara.

“Working in the Pilbara has changed my perspective on podiatry, especially within the remote communities,” Emma said.

“In just six months, I’ve seen more foot issues than in my past seven years as a podiatrist.

“I work with such a diversity of age groups, types of conditions and cultural backgrounds.

“It’s made me realise how much I love working with high-risk patients, different cultures, and within a multidisciplinary team.

“I enjoy liaising with nurses, collaborating within a bigger team and I’d love to continue working remotely.”

Emma said her experience in Karratha had expanded her perspective on podiatry and taught her to adapt her approach to the often-limited resources available in remote settings.

“I’ve learned that you just have to work with what you’ve got.

“You don’t always have all the tools and fancy dressings, but you just do your best and hope to make a small difference.

“It’s also about building rapport with patients, making sure they feel comfortable coming to you again for help.”

One of the key challenges Emma has faced is the logistical difficulty of treating patients across a vast geographic area with limited local healthcare resources.

“Being the only one that services a huge area makes it challenging to coordinate with other healthcare professionals to help manage chronic cases,” she said.

“I visit some communities only every couple of months, and linking up with



others for things like diagnostics requires many emails and coordination.

“Everyone does their best, but each patient has unique needs and circumstances to consider.”

She added being in regional WA, she had also gained an understanding of the healthcare infrastructure in rural Australia and had developed creative solutions to improve patient outcomes despite the challenges.

“Working in the Pilbara has influenced my understanding of rural healthcare,” she said.

“It’s challenging, and you have to be creative, but things can be done — just not as quickly as in metro areas.

“Technology helps a lot here, too. Video calls and virtual meetings are widely used to access information and collaborate.”

The experience of working remotely has reignited Emma’s passion for podiatry, exposing her to cases she might never have encountered in the city.

“I think there’s a lot of knowledge I still need to gain to progress my career, and working remotely offers me that and more.”

Rural Health West’s Health Workforce Scholarship Program has been a vital support system for Emma.

“The program has helped me attend events in the city and work on my professional development, which directly benefits my community here,” she said.

“For rural practitioners, access to support like this is so important; otherwise, it could feel very isolating.

“With few CPD events held in remote areas, it’s great to have this kind of funding to attend in-person training.”

Looking ahead, Emma hopes to continue building her knowledge in high-risk foot care, with a focus on wound management — a common issue she has found in rural areas.

“Wounds are unfortunately common here, and I’d like to keep expanding my knowledge in that area,” she said.

“In the future, I’m also open to working elsewhere remotely, maybe in Darwin or doing stints in Arnhem Land.

“This experience has been eye-opening, and I’m grateful I took the plunge out of my comfort zone.”

Applications for Round 17 of the Health Workforce Scholarship Program (HWSP) is now open until November 23, 2025.

The Health Workforce Scholarship Program (HWSP) is an initiative of the Australian Government Department of Health and Aged Care, administered in Western Australia (WA) by Rural Health West. The HWSP provides scholarships and bursaries to help health professionals in rural and remote Australia retain and enhance their skills, capacity and scope of practice.

Visit:
ruralhealthwest.com.au/hwsp

The rewards of a ‘city kid’ going bush

Dr Hareesh Menon has found rural generalism so satisfying, he now ‘can’t imagine doing anything else’.

By Jo Roberts

Whatever Dr Hareesh Menon thought would await him when he became a rural generalist, there was always something unexpected around the corner – and every day was different.

That is what he loves about what became his “calling” after completing his training in Queensland.

“I did all my training, did my hospital rotations, and then realised that I honestly couldn’t choose,” he said.

“I loved everything I did – women’s health, general medicine, surgery.

“I remember thinking, ‘what can I do that brings all of this together?’ I considered emergency medicine, but it lacked the continuity of care I wanted.”

Today, Hareesh might give a six-week old baby a routine check-up, treat a fracture, sadly diagnose a patient with cancer, remove several skin cancers, and consult others with mental health concerns.

“I don’t know what I’m going to see when I show up,” he says. “Today was a normal day.”

A self-described ‘city kid’, Hareesh and his girlfriend (now wife) decided to “try this country thing”

and began scouring a map of Western Australia.

Although rated a seven on the Modified Monash Model of remoteness, they found the seaside town of Hopetoun, 600 kilometres south-east of Perth, and a two-hour drive west from the nearest big town, Esperance.

“I thought it was an interesting little location and there was one spot for a training position.”

Hareesh divides his time between the Hopetoun clinic and Ravensthorpe, a 30-minute drive away.

He also provides emergency care across an area spanning 500 square kilometres, serving a diverse community of young mining families, FIFO workers, multigenerational farmers and an ageing population of city retirees.

But this former city kid is embracing remote life.

“You don’t have to sit in a traffic jam, and the air is cleaner,” he said.

“I don’t see a traffic light for six months at a time.”

Somehow, he has found time to set up a new business with his wife. After buying a 120-year old bakery and some renovating, they recently opened Café Lounge.

It is both a family project and a community hub, with Hareesh, an avid cook, spending Friday nights making focaccias for the cafe.

Having put down roots in Hopetoun, and committed to rural generalism, Hareesh knows he’s made the right choice.

“It’s so fun. It’s stressful and tiring and a lot of juggling at times,” he said.

“But I love the job and can’t imagine doing anything else.”

He encouraged medical students that come to him on rotation to also try work in the bush.

“The medicine is more interesting and you’re more open to being able to manage trickier things by yourself, with support of specialist care.”

Junior doctors are invited to apply for specialist GP training, including rural generalist training, with the RACGP. For more information visit www.racgp.org.au



RACGP
Royal Australian College
of General Practitioners



Dental **students** immersed in rural **life**

By Peter Dignam, Nikhil Thomas, Jewel Ajimon and Amir Charousaei.

Kimberley

Our trip began in Broome, where we connected with the community and undertook cultural capability training. This was an important and enriching start to our journey, deepening our understanding of the cultural context in which we would be working.

These early experiences helped us appreciate the importance of culturally sensitive care and strengthened our ability to engage meaningfully with the community we were about to serve.

From Broome, we travelled to Derby, spending two weeks delivering much-needed oral health care to the local community. The experience was both rewarding and confronting.

Clinically, we encountered a significant burden of acute oral disease. The high number of infections and reliance on antibiotics as a first-line response highlighted the challenges residents face in accessing timely, preventative dental care.

The scarcity of preventative services, combined with limited restorative options requiring travel to Broome, underscored the inequities that persist in rural and remote health. It was an eye-opening experience that revealed the systemic barriers affecting remote oral health and reinforced the need for sustainable, prevention-focused solutions to improve access to care.

Overall, the Derby placement was both professionally and personally impactful. It strengthened our commitment to health equity, and left us with a deep appreciation for the resilience of remote communities and the importance of culturally oriented practice in making a meaningful difference.





**By Ashlee Cronin, Shivangi Sharma,
Alyssa Wiebe and Carina Chen.**

Pilbara

We were four final-year dental students from The University of Western Australia who undertook a three-week rural placement in the Pilbara. During this time, we travelled to remote Aboriginal communities to deliver oral health education, conduct dental checkups, and provide general dental care at Wirraka Maya Health Service.

We had the privilege of visiting several incredible communities, including Yandeyarra, Marble Bar, Warralong, and Strelley. The children at each school were enthusiastic, engaged, and eager to learn about oral health especially when we introduced our friend Craig the Croc.

Travelling to these remote locations gave us a deeper appreciation of the barriers to accessing dental care. Reaching these communities often meant long drives on dirt roads, sometimes over an hour, highlighting the challenges residents face in accessing regular dental services.

Our final two weeks were spent at the Wirraka Maya Health Service Dental Clinic. Working in a rural Aboriginal community was incredibly rewarding. We gained valuable insight into the community's culture, values, and approach to health, and felt genuinely welcomed by both patients and staff. The patients were kind and appreciative, and the supportive clinic team created a friendly and professional environment.

The placement offered a refreshing contrast to our usual metropolitan setting, enhancing our clinical skills and deepening our understanding of community-focused healthcare.

Outside the clinic, we visited wildlife rescue Lisa's Kangaroo Retreat, toured the RFDS Port Hedland base and Hedland Health Campus, and witnessed the stunning Staircase to the Moon. Exploring the Pilbara, its people, landscapes, and industries was an unforgettable highlight. We are grateful for the experience and highly recommend rural placements to other students.



Rural Health West proudly supported six dental student placement programs in 2025, providing opportunities for 28 students to gain hands-on experience across the Pilbara and Kimberley regions.

Student insights from the **Aboriginal Health Conference 2025**



Curtin University Students from left; Kaitlyn Lee, Saba Sarandili, Aadhikar Sharma and Mary Gough.

By Shantelle Jeyakumar

(Second year dental student at The University of Western Australia)

Attending the Aboriginal Health Conference, themed “Writing the Narrative – Telling Our Stories,” was an invaluable opportunity to reflect on the importance of culturally safe and community-led care – insights deeply relevant to my future dental practice.

Michael ‘Sonny’ Walter’s keynote set the tone by emphasising resilience and the power of personal narrative in shaping health journeys. The Kimberley Dental Team story particularly resonated with me, highlighting both the impact of dentistry in rural and remote communities and the ongoing challenges of access and equity.

Sessions such as Moorditj Marp (Strong Skin) and the Aboriginal Environmental Health Model of Care demonstrated how culturally grounded approaches can promote both physical and community wellbeing.

The presentations on Trauma-Informed Care and Dermatology in Skin of Colour were especially impactful, combining vulnerability and lived experience with practical strategies for safe, supportive care – principles integral to building relationships with patients.

The Bush Medicine Workshop and yarning session on day two provided a more intimate learning experience, highlighting the value of traditional knowledge and its continuing importance in holistic healthcare.

The conference deepened my appreciation that dentistry is not just about treating teeth, it is about contributing to broader health narratives grounded in respect, listening, and culturally responsive care.



By Aadhikar Sharma

(Third year medicine student at Curtin University and President of CROHC)

I had the privilege of attending the Aboriginal Health Conference for the first time in 2024, and it was an amazing learning experience, but this year felt even more impactful.

One of the most eye-opening experiences for me was hearing about the new national lung cancer screening program and how it's being rolled out with the Heart of Australia trucks.

Having attended the Nextgen Medics Program by Heart of Australia in Queensland with the support of Rural Health West, it felt like a full circle moment and realisation that innovative solutions are driving change in rural health. The trucks are an efficient and practical way to provide specialist-level care to remote areas, helping bridge the gap in access and equity that continues to challenge rural communities.

The session on sepsis prevention also particularly stood out. Learning about its impact on paediatric patients and discussing Aishwarya's Care Call was both confronting and motivating.

It reinforced the importance of early recognition, patient advocacy and listening to the parents' concerns regardless of how the patient may present. I also

walked away with a thermometer and resources from the session, which was amazing!

It was so special to network with healthcare professionals and explore the diverse range of stalls.

The presenters were inspirational, not only in their expertise but in their passion and commitment to improving Aboriginal and rural health.

Overall this was one of the best conferences I've attended and I'm very grateful to Rural Health West for the opportunity, and I'll do my best to come back next year, even if it means driving from Albany!



Delegates enjoying the opportunity to ask questions to keynote presenters.

Rural Health West sponsored 13 students to attend the Aboriginal Health Conference.

Visit: ruralhealthwest.com.au/financial-support/students/ or sign up to the Choose Country e-bulletin to find out more.





Finding **belonging** in **rural medicine** or belonging in the **bush**?

It's not just what you do, or where you do it, but also who you do it with that matters. Dr Thomas Drake-Brockman is a Rural Generalist trainee in the Great Southern, and has recently discovered the challenges, rewards, and relationships of a move into small town primary care in Mount Barker.

"The quality of the support I have received, from my supervisors, other practice staff, and even my patients has been exceptional," Thomas said.

"As a new doctor in a small town, you really feel valued by

the community, and I've been supported to reap the full rewards of the general practice setting."

As a former Co-Chair of the Australian Medical Association (WA) (AMA (WA)) Doctors in Training group, Thomas knows how

important it is for trainees to be backed up as they find their feet.

“Moving to a new town, and to a different kind of medicine, was always going to be a bit of a shock,” Thomas said.

“However, I’ve been able to learn the ropes without feeling pressured to go faster than I can. I’ve also been afforded a great deal of flexibility as to how I structure my work, which is a great introduction to one of the benefits of general practice – being able to have some control over your working week.”

Thomas is training at the Australian College of Rural and Remote Medicine (ACRRM) fellowship program and completing advanced skills training in Academic Practice alongside a PhD at the University of Western Australia. Thomas is embracing the challenges of rural practice, and looking further afield, completing studies in Healthcare in Remote and Extreme Environments at the University of Tasmania.

Closer to home, Thomas continues to advocate for doctors and patients in WA and is the ACRRM trainee representative to the Doctors in Training group, helping to reinvigorate the AMA (WA) Rural Doctors group, and is an ordinary member of the AMA (WA) Council.

“There remains so much to do to ensure that all doctors and patients in WA are treated fairly. Queer people, in particular gender diverse people, continue to have a terrible experience in much of the medical system, and particularly in rural areas. Doctors in Training, women, and International Medical Graduates are all groups in our profession where we need to advocate loudly to end inequity, discrimination, and bullying.”

At the recent AMA National Conference, Thomas led a motion for the AMA to recognise people with intersex variations as part of the diversity of human life. The motion, which passed with unanimous support, has garnered national and international attention.

Being an out and proud queer non-binary doctor has been a gratifying experience for Thomas in their new workplace.

“The team have been amazing, and really the patients have been as well. In fact I’ve got a lovely group of queer and trans patients who seek me out for their care, including some who drive from nearby towns instead of seeing their local GP. It’s really fulfilling to be able to provide a high level of support and care to your own community.”

Thomas’s message to colleagues, particularly those considering a move into GP, is to find a placement that will adapt the experience to meet their needs.

“I love variety in my week, and I’ve been able to achieve that. I do a few days in the practice, a few days in academia, and a day in the hospital. I work late some days and early on others. Making it work for me is essential for a long, happy career in rural general practice.”

Physio students **discover** the **rewards** of **rural practice**



Benjamin and friends camping and below at the Broome Crocodile Park.



We spoke to two fourth-year physiotherapy students from The University of Notre Dame Fremantle, about their experiences taking part in the Rural Clinical Year Program. From overcoming challenges and building friendships to discovering the rewards of rural practice, both shared how the program has shaped their passion for working in country communities.

Benjamin Edgar

Can you tell us a bit about yourself and what inspired you to study physiotherapy?

I was inspired to study physiotherapy because I am passionate about anatomy, love problem-solving, and strive to provide service to others. Plus, it's a job that keeps you on your feet, not stuck at a desk.

What motivated you to take part in the Rural Clinical Year Program, and how did you feel about heading to a rural placement?

I completed a rural placement in Geraldton in my second year and had a great experience. I really enjoyed the community, learning opportunities and what rural life had to offer. My family is also based in the country, so I have always been surrounded by a rural environment, which cemented my interest in completing my placements there.

What has been the highlight of your rural placement?

My highlight was my placement in Bodyworks Broome. The team

there was incredibly supportive of the students, allowing us to manage a student clinic, which helped me to develop my confidence and clinical skills. Broome is also a fantastic place with almost too many things to do.

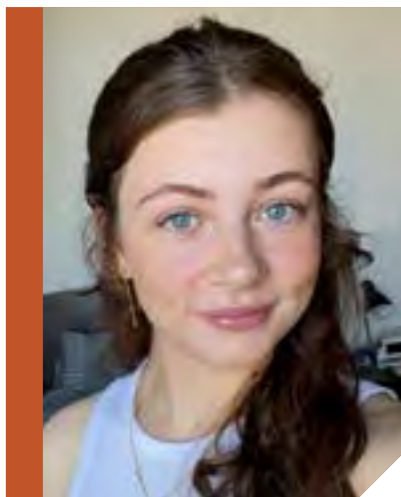
Have you faced any challenges working in a rural or remote setting, and how did you adapt?

Working rurally can be challenging due to the isolation from family and friends who live in the city. To adapt, I got involved in the country community and actively met heaps of other students in rural areas, forming good relationships with them. Country people are also super relaxed and approachable, which made it easy.

How has this experience shaped your perspective on living and working in rural WA in the future?

This experience further solidified my interest in working and living in rural areas in the future. Rural work offers professional growth, a great working environment, and

Kristen Parker



Can you tell us a bit about yourself and what inspired you to study physiotherapy?

I was born and raised in the South West. My passion for rural health began during high school work experience at a country hospital, where I saw the dedication of the multidisciplinary team bringing healthcare to rural communities. Having a family member who needed to travel for treatment also showed me the importance of local services that allow people to stay close to their support networks during difficult times.

What motivated you to take part in the Rural Clinical Year Program, and how did you feel about heading to a rural placement?

Being from the country, I always planned to work rurally after graduation, so the Rural Clinical Year Program was a perfect fit. It offered the chance to experience a variety of locations, roles, and caseloads while getting back to where I feel most at home. I was excited to head out on placement, though moving to a new town where I didn't know anyone was daunting. Fortunately, there were always others in the same position, and everyone was eager to make the most of the experience. I also

completed a rural Honours project, which complemented the program perfectly.

What has been the highlight of your rural placement?

The highlight has been the people I've met. Across four rural placements, I've connected with kind, like-minded students who were keen to explore, learn, and have fun. I've made lifelong friends and professional connections that I'm very grateful for.

Have you faced any challenges working in a rural or remote setting, and how did you adapt?

Being away from your usual support network can be tough. Planning ahead helps. Talking to friends and family about how you might feel, scheduling regular calls, and even bringing a few homemade meals for comfort can make a big difference.

How has this experience shaped your perspective on living and working in rural WA?

Living and working in rural WA has always been my goal, and this program has only strengthened that desire. It's helped me build strong professional relationships and reaffirmed my commitment to rural health.

What advice would you give to other students considering a rural placement or career?

Moving, starting placement, and adjusting to a new environment are big steps, so give yourself grace! Rural placements are the perfect opportunity to try rural life, meet great people, and experience the rewards and challenges firsthand. The lifestyle, community, short commutes, and access to nature make it an experience well worth having.

the opportunity to contribute to country communities.

What advice would you give to other students who might be considering a rural placement or career in rural health?

I encourage all students complete at least one rural placement to see if it is for them. There is only one way to understand what it's like truly, and that's by giving it a go, keeping an open mind, and getting involved in the rural communities.



Benjamin enjoying four wheel driving on the doorstep, oh what a feeling.

Rural Health West proudly supported five physio students to participate in the Rural Clinical Year Program.

Visit: uwa.edu.au/rcswa or email admin@rcswa.edu.au to find out more.

Inspiring the next generation of rural health professionals

By Anushree Gogulakrishnan
(Year 3 Curtin University Medical Student)

Rural high school visits have always played an integral part in bridging the gap between rural and metropolitan health outcomes, but the Growth Project is like no other. Spanning three years, health students from UWA, Notre Dame and Curtin visit the same cohort of rural students each year through their high school journey – an initiative that emphasises early exposure and showcases the breadth of healthcare.

Recently, I had the privilege of taking part in one of these visits, meeting Year 8 students from Bunbury. Through hands-on workshops in nursing, physiotherapy, paramedicine, occupational therapy and medicine, our aim was to inspire the next generation to pursue rural health careers.

The students' curiosity and enthusiasm were inspiring. They asked thoughtful questions and applied what they'd learned in previous visits to navigate new concepts.

Seeing the spark of interest firsthand was incredible, and it reinforced the value of early exposure, particularly for young people in areas where health careers can seem out of reach.

Personally, I found the experience deeply rewarding. Rural health disparities are something we often discuss in theory, but the Growth Project gave me the opportunity to take practical action and contribute to reducing such challenges. Working alongside an interprofessional team enriched the experience, mirroring the collaboration that defines real-world healthcare and bringing a new level of respect for each discipline's unique role.

The Growth Project not only inspired high school students, but it brought meaning to the work that we want to do. It reminded us why we chose healthcare – to reduce the disparities in rural health and ultimately, grow a stronger rural health workforce.

By Rujoola Wagh
(Year 1 Curtin University Medical Student)

Earlier in the year I volunteered for the 2025 Growth Project at Grace Christian High School in Bunbury as part of CROHC's rural high school visits.

We ran interactive stations to showcase the different health care careers. I helped run the nurse's station which involved showing the students how to take blood pressure and oxygen saturation measurements and reading observation charts.

These practical activities really engaged the students. They particularly enjoyed taking each other's blood pressure and comparing their results, while also sharing their own understanding and experiences of health care.

I had the opportunity to speak with the students about their career aspirations and what it's like to study medicine as someone from a rural town.

The Growth Project gave students an insight into what careers in health can look like. This is valuable as it is inspiring to the students and reinforces their career goals or broadens their awareness of different pathways in health.

Additionally, it was a great experience travelling with fellow students, making new friends and connecting across disciplines.

Experiences like this not only build community, but also strengthen the commitment to improving rural health.

Overall, this was a great experience that I would encourage healthcare students. I am looking forward to participating in similar rural focused programs in the future.



Rural Health West is the proud sponsor of the Growth Project.

To find out more visit your student rural health club: CROHC, KRASH, SPINRPHEX, or WAALHIIBE.



ARE YOU A BONDED MEDICAL PARTICIPANT?

Rural Health West provides support to bonded participants. We can assist with placement into rural roles that are eligible for various Return of Service Obligations (RoSOs), provide information on professional development opportunities and rural medical network support, offer access to grants, help with general program enquiries, and track your RoSO progress.

For support contact Rural Health West at choosecountry@ruralhealthwest.com.au

RURAL HEALTH WEST SPONSORSHIP OPPORTUNITIES

Rural Health West offers sponsorships for medical, nursing, midwifery, dental, allied health students and junior doctors to attend conferences and professional development related to rural practice.

Interested in sponsorship opportunities?

Visit the Rural Health West website for opportunities to gain insight into rural health careers, develop additional knowledge and skills, and provide an opportunity to develop collegiate relationships with future colleagues and employers.

For more information visit ruralhealthwest.com.au/financial-support/students



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