



# Media Statement

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10 February 2026

## **Placement poverty threatens the future rural health workforce**

Rural Health West has welcomed the national attention being drawn to placement poverty this week, as health students shared their lived experiences of financial hardship while undertaking mandatory, unpaid placements.

As an organisation working directly with health students undertaking placements across rural Western Australia, Rural Health West sees and hears firsthand the financial strain that mandatory, unpaid placements place on students – particularly those from rural backgrounds.

“Placement poverty is not an abstract policy issue – it’s something we hear about every week from students who are trying to do the right thing by training in rural communities, but simply can’t afford the cost,” Rural Health West Deputy CEO Kelli Porter said.

“Rural placements are one of the strongest predictors of whether a graduate will return to work in the country. But when students are forced to choose between completing their placement and paying rent, buying food or keeping a roof over their head, the system is failing them – and it’s failing rural communities.”

Rural Health West supports students where possible through limited travel and placement assistance, but demand far exceeds available funding.

“These are not optional experiences – students cannot graduate as clinicians without completing them. Many tell us they are taking on debt, skipping meals, or losing all income for weeks at a time just to meet placement requirements,” said Kelli.

Students contacting Rural Health West describe the reality of trying to pursue a placement in country WA.

A paramedicine student seeking a placement in a remote Goldfields community said travel costs alone were a major barrier.

“Flights from Perth are around \$850 return, or an 11-hour drive. As a full-time student, the financial aspect is the biggest barrier to undertaking a remote placement.”

A physiotherapy student who relocated from regional WA to study in Perth described the strain of returning to the regions for placements.

“I will go without any income for five weeks. I want to work rurally when I graduate – this placement is critical – but I need financial support just to get through it.”

Others spoke of struggling to afford food and fuel while living away from home for extended periods, or the stress of trying to find paid work around full-time clinical hours.

“These students are motivated, committed and often deeply connected to rural communities,” Kelli said.

“Many intend to work rurally after graduation. Yet placement poverty is creating a powerful disincentive that undermines the very workforce pipelines we are trying to strengthen.”

Today’s student gathering was arranged by independent Member for Indi, Dr Helen Haines MP and independent Senator for ACT, David Pocock to highlight findings from the [Australian Universities Accord Final Report](#) which found there is a need to pay students for mandatory placement work, to ensure placement poverty does not deter students from rural and disadvantaged backgrounds from tertiary participation and successful degree completion.

Dr Haines and Senator Pocock subsequently independently commissioned Parliamentary Budget Office costings, which show that expanding the Commonwealth Practice Payment Scheme to medical and allied health students would cost just \$290 million over four years.

The PBO costings coincide with survey data from the Health Students Alliance showing 42 per cent of students were going hungry while on placement.

“Extending this support is not welfare – it is a workforce investment. If we want a sustainable, diverse rural health workforce, we must ensure students are not financially punished for undertaking the training rural communities depend upon,” Kelli said.

“Equity in rural health begins in training. If we want graduates to choose country, we have to make sure country is a choice they can afford to make.”

ENDS

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*Rural Health West aims to improve access to quality healthcare for rural communities through the provision of a highly skilled, motivated and sustainable medical and allied health workforce. We are a not-for-profit organisation primarily funded through the WA Country Health Service and the Australian Government Department of Health, Disability and Ageing.*