

RWAV Snap Survey 03: Rural Accommodation Availability and Suitability for Healthcare Workers

April, 2025

Over the last few years, Rural Workforce Agency Victoria (RWAV) has heard from health professionals and stakeholders that a lack of suitable accommodation impacts their ability to attract and retain healthcare workers in rural and regional Victoria. In some areas, there are concerns about housing availability, affordability, and quality – particularly for those relocating for short-term placements or outreach work. While anecdotal evidence suggests this is a growing issue, the scale and specifics of the problem were unclear. To better understand the extent and nature of these accommodation challenges, RWAV launched a dedicated survey to health professionals across the state to gather further insights and clarification.

Between 15 January and 15 February 2025, RWAV conducted a Snap Survey to better understand issues related to the availability and suitability of accommodation for healthcare workers in rural and regional Victoria.

RWAV is a non-profit organisation, funded by State and Commonwealth governments, that aims to improve access to quality health services for rural, regional and First Nations communities throughout Victoria. We seek to improve health outcomes through effective and customised health workforce solutions that are informed through partnerships, workforce and population health data, and collaboration with communities. RWAV has previously conducted Snap Surveys on rural internet access and nonurgent patient waiting times. This document refers to the RWAV Snap Survey 03: Rural Accommodation Availability and Suitability for Healthcare Workers

Figure 1

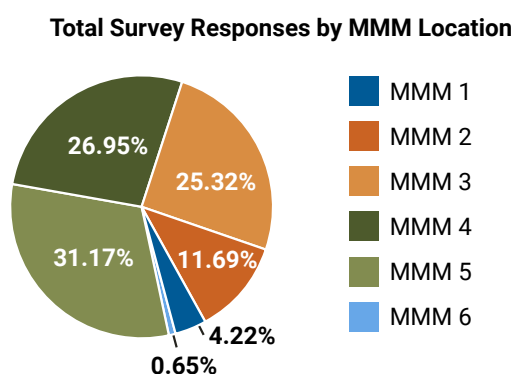
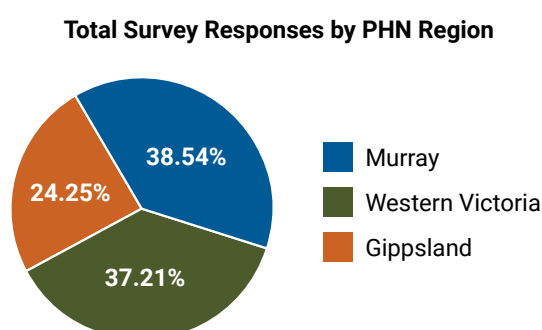


Figure 2



We received 315 useable survey responses, with 39% from the Murray PHN region, 37% from the Western Victoria PHN region, and 24% from the Gippsland PHN region. The highest number of responses were received from MMM5 (31%) locations, followed by MMM4 (27%) and MMM3 (25%) locations (figure 1).

The survey found that 75% of all respondents agreed that accommodation availability is a disincentive to rural practice. Many respondents across each PHN region reported that there was no available accommodation, and that wait times could be over 12 months. Overwhelmingly, most respondents (82%) agreed that access to an accommodation advocate or navigator for health professionals in rural locations would be beneficial.

Survey results

In the Murray PHN region, 40.16% of responses indicated that there is only ‘few/ some’ available accommodation options in the region. In the Western Victoria PHN region 36.55%, and in the Gippsland PHN region 23.29% of responses also indicated that there is ‘few/some’ available accommodation. (figure 3)

Figure 3

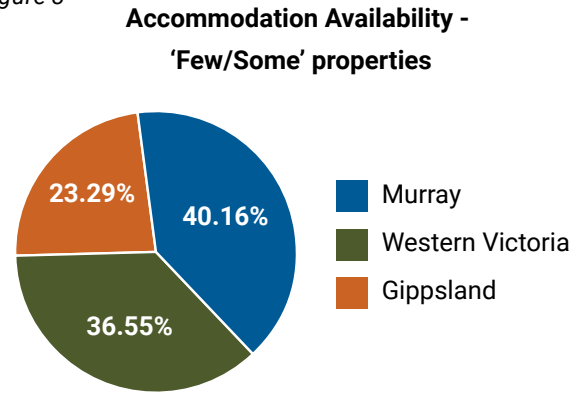
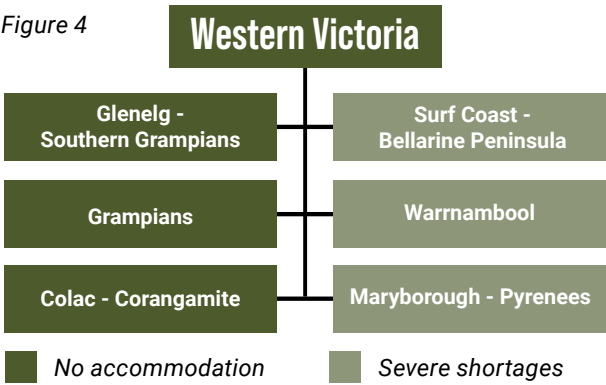


Figure 4



There are eight (SA3) critical areas in the Murray PHN region where the survey found there is **no available accommodation**, with Shepparton, Upper Goulbourn Valley, and Murray River - Swan Hill the top three areas identified. (figure 5)

Figure 5

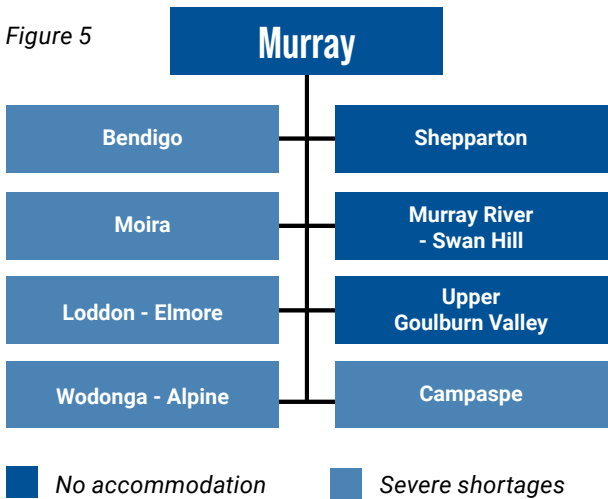
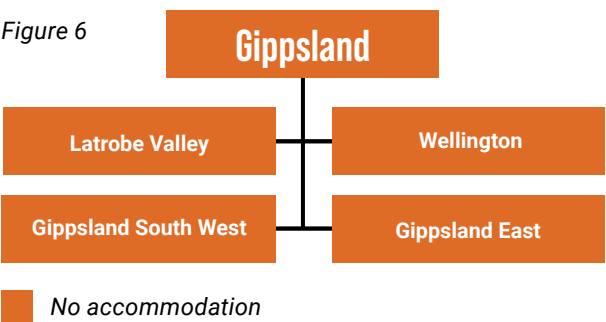
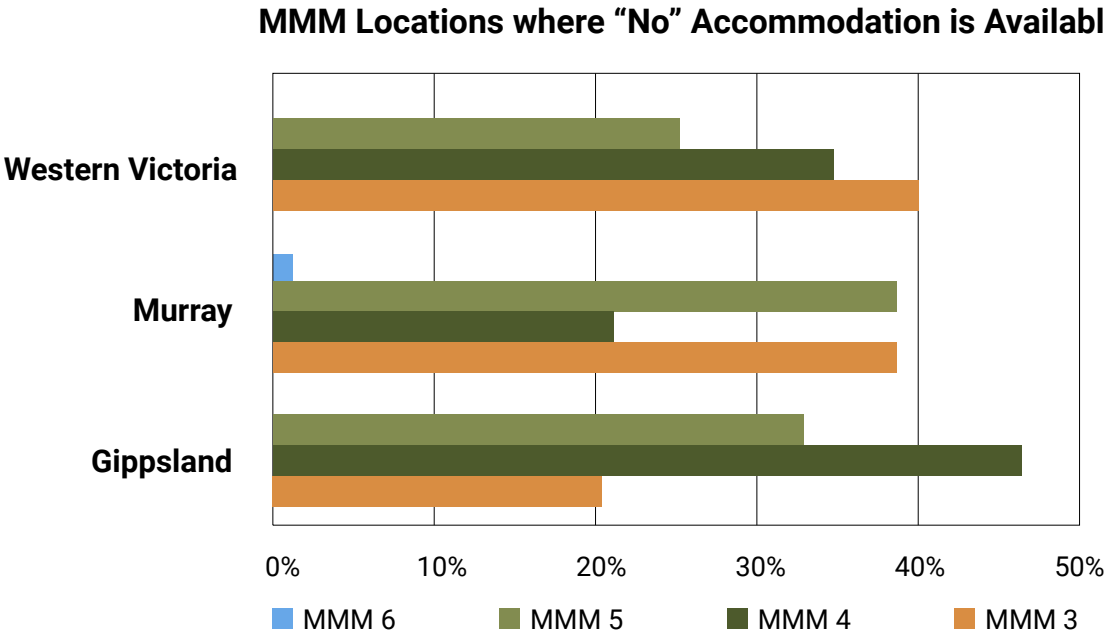


Figure 6



The four areas in the Gippsland PHN region where the survey found there is no available accommodation, are Gippsland East, Gippsland-South West, Latrobe Valley, and Wellington. (figure 6)

Figure 7



Within the Gippsland PHN region the majority of areas reported to have no available accommodation are in MMM4 locations, in the Murray PHN region the majority are across MMM3 and 5 locations and in the Western Victoria PHN region the majority are in MMM3 locations. (figure 7)

Across the three rural PHN regions, 56.81% of all respondents rated accommodation as suitable for all categories (single/couple/family/single parent/student/shared).

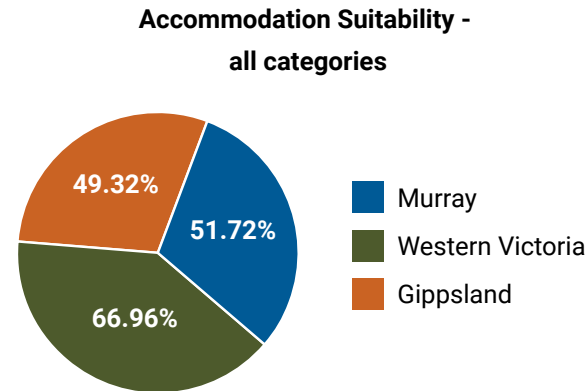
In the Western Victoria PHN region, 66.96% of respondents indicated that accommodation is suitable for all categories, whereas 20.54% indicated available accommodation is suitable for couples only. In the Gippsland PHN region, 49.32% of respondents indicated that accommodation is suitable for all categories, with 36.99% indicating available accommodation is suitable for couples only. In the Murray PHN region, 51.72% of respondents indicated that accommodation is suitable for all categories however 31.90% of respondents indicated available accommodation is suitable for couples only. (figure 9)

Figure 8

MMM	Estimated Resident Population (ERP)
1	5,259,855
2	505,304
3	325,331
4	295,477
5	424,797
6	4,677

Australian Government Department of Health and Aged Care. (2025, 03 11). Modified Monash Model 2023: Estimated Resident Population (ERP). Australia: Australian Government Department of Health and Aged Care.

Figure 9



While 52.68% of respondents from the Gippsland PHN region noted that the condition of accommodation meets market expectations, 39.73% of respondents indicated that available properties are old and in need of renovation. In the Murray PHN region 6.9% of respondents noted that properties in their area are new, while 30.17% of respondents indicated that available properties are old and in need of renovation. In the Western Victoria PHN region 52.68% of respondents noted that the condition of accommodation meets market expectations, however 32.14% said the properties in the region are old and in need of renovation. (figure 10)

Figure 10

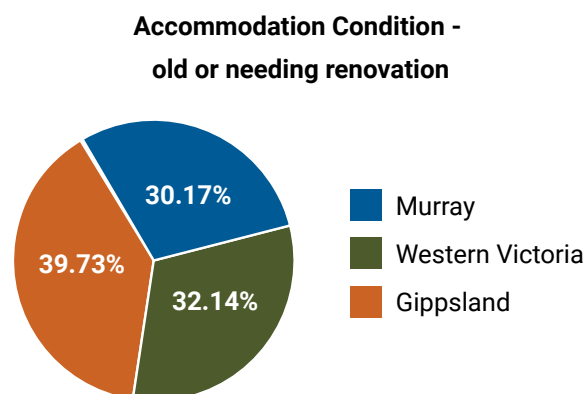
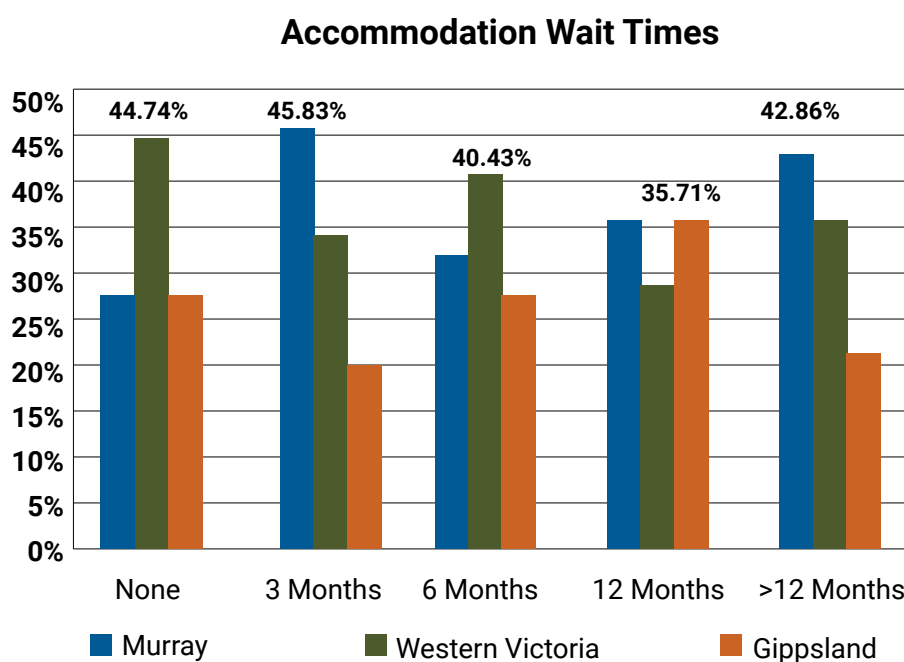


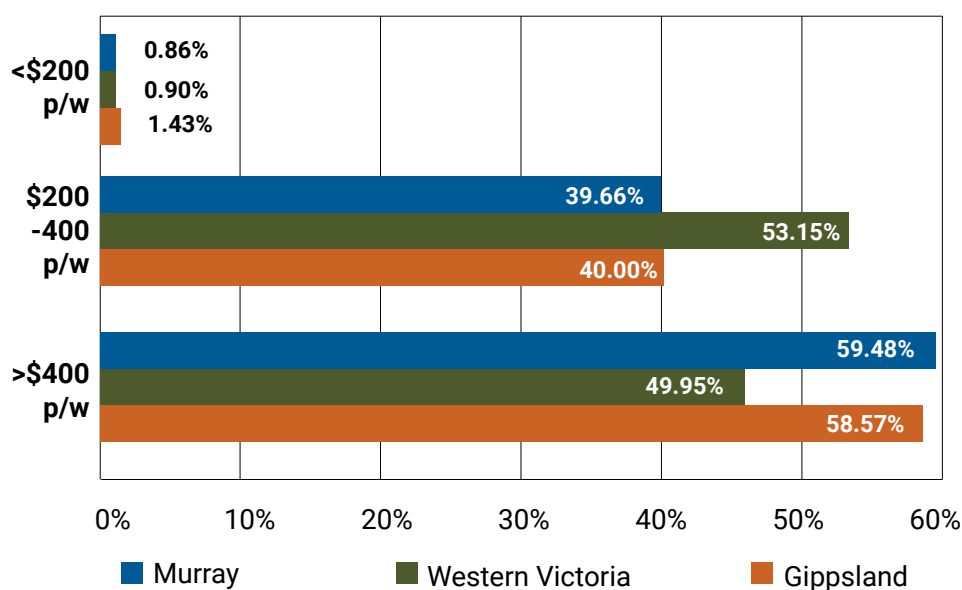
Figure 11



Waiting times for available accommodation vary from area to area. In the Gippsland PHN region, the highest number of respondents reported that the waiting time for accommodation is 12 months, in the Western Victoria PHN region 44.74% of respondents indicated there is no wait time, and in the Murray PHN region the highest number of respondents reported that the waiting time for accommodation is 3 months, with over 40% reporting a wait time of over 12 months. (figure 11)

Figure 12

Accommodation Cost - Rural Victoria



The Snap Survey found that 53.15% of rental accommodation in the Western Victoria PHN region costs between \$200-\$400 per week whereas 59.48% of rental accommodation in the Murray PHN region is over \$400 per week and in the Gippsland PHN region 58.57% is over \$400 per week. Overall, the majority of rental accommodation costs over \$400 per week. Percentages are provided for responses within each PHN. (figure 12)

Figure 13

Accommodation Disincentive

There was a significant response to the question on whether the availability of rural accommodation is a disincentive to work in rural locations, with 75.42% of all respondents agreeing that it is a disincentive. In the Murray PHN region 79.31% of responses agreed, in the Gippsland PHN region 73.97% agreed, and in the Western Victoria PHN region 72.32% of respondents agreed. (figure 13)

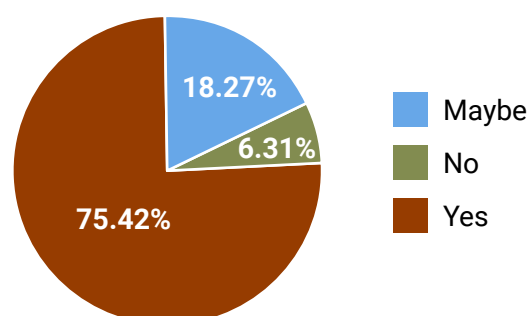
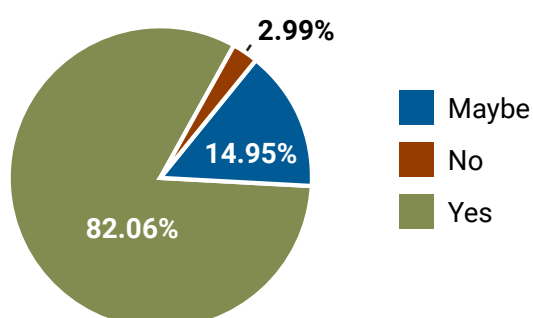


Figure 14

Accommodation Advocate/Navigator

Another significant response was received in relation to a question on the benefit of access to an accommodation advocate or navigator for new health professionals in rural locations. The majority of respondents - 82.06% (figure 14) agreed that it would be beneficial to have access to support in securing accommodation in rural Victoria.



Conclusion

The RWAV Snap Survey on Rural Accommodation Availability and Suitability for Healthcare Workers has confirmed that access to appropriate housing is a significant and widespread challenge across rural and regional Victoria. With 75% of respondents agreeing that accommodation availability is a disincentive to rural practice, and many reporting limited or no options, particularly in MMM3–5 locations, the findings highlight an urgent need for targeted solutions. The lack of affordable, high-quality, and fit-for-purpose accommodation—especially for short-term placements—continues to impact health workforce attraction and retention.

Key issues identified include long wait times, high rental costs (often exceeding \$400 per week), and poor-quality housing, with many properties old and in need of renovation. Despite more than half of the respondents reporting that accommodation is suitable for all living arrangements, many others indicated limited suitability for anything beyond couples or singles.

Importantly, the majority of respondents (82%) supported the idea of an accommodation advocate or navigator to assist health professionals in securing suitable housing in rural locations. These findings underline the need for a strategic and collaborative approach to address rural accommodation challenges, supporting a sustainable health workforce for Victoria's rural, regional, and First Nations communities.



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