



Fact Sheet 6

Further education and health

OCTOBER 2010

Education is a significant determinant of an individual's health, mainly through its impact on their employability, financial capacity and social wellbeing. It is also one of the keys to regional development and the sustainability of rural communities.

The higher a person's level of education and literacy, the better their health is likely to be. Having greater educational attainments carries better prospects of employment, occupation and income. All this serves to help people gain the knowledge and confidence throughout life to look after themselves and obtain the best health care.

Evidence from both the 2006 Census and the Review of Australian Higher Education shows that people living in rural and remote areas are significantly under-represented in higher education. Country people comprise over 31 per cent of Australia's population but only about 19 per cent of tertiary students. Despite recent improvements and a strong government focus, the 'education revolution' still has a long way to go in the bush.

Degree of under-representation in higher education, 2007

Group	Per cent of the total in higher education	Per cent of total population	Participation ratio (where equitable representation = 1)
Rural/regional	18.1	25.4	0.71
Remote	1.1	2.5	0.44
Indigenous	1.3	2.2	0.59

Review of Australian Higher Education, Final Report, 2008

In 2006, 27 per cent of people aged 25-64 in Major Cities had a Bachelor Degree or higher qualification, compared with 15 per cent of people in this age group in Inner Regional areas, with even lower rates in the other remoteness categories. Because of the nature of work available, more jobs in rural and remote areas do not require tertiary qualifications, and young people there are likely to perceive higher education and training as less relevant. Local community aspirations may not encourage a commitment to tertiary education and there will be fewer role models and mentors



in the community, and lower levels of positive peer pressure to achieve high 'leaving' scores.

Concern for their children's educational opportunities has a negative impact on the supply of professionals willing to work in country towns: whether as teachers, nurses, doctors, dentists, veterinarians or accountants.

Barriers

Barriers to university participation by people from rural areas include lower high school completion rates, the higher cost of accessing higher education, and social or cultural factors such as the lower educational aspirations referred to above.

The ABS report, *Education across Australia: Australian social trends*, showed that, in 2006, 72 per cent of 19 year olds in Australia overall had completed Year 12 but in Very Remote areas the figure was less than 40 per cent. The proportion of young people who leave secondary school without completing Year 10 is also higher in Remote and Very Remote areas.

Only 12 per cent of tertiary education is provided in rural and regional areas, and over half of the rural and remote students undertaking tertiary study have to live away from home.

Cost is therefore a major inhibitor for people from rural areas seeking to obtain further education, especially for those in lower socioeconomic groups. Many rural students and their families are faced not only with the direct costs of university or TAFE education, but also the need to cover the costs of relocation and accommodation. It has been estimated that the annual living cost for a regional student living away from home is \$15,000-\$20,000 – not including relocation and start-up costs of \$3,000-\$6,000.

As part of its response to the Bradley Review of Australian Higher Education, the Commonwealth Government is progressively introducing reforms to government student income support from April 2010. Key features of the new arrangements include:

- an increase in the parental income test threshold for access to the maximum rate of Youth Allowance or ABSTUDY and higher cut-out points for access to payments for dependent students;
- progressive lowering of the age of independence for student payment purposes from 25 years to 22 years by 2012;
- tightening of the workforce participation criterion for eligibility for independence, requiring students to have worked for an average of at least 30 hours per week for at least 18 months during a two year period to be considered financially independent of their parents. There are special arrangements

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for students from Outer Regional, Remote or Very Remote areas (ASGC-RA categories RA3, RA4 and RA5) whose parents' income is less than \$150,000 and who are required to relocate to study. Such students will be able to qualify as independent through a less stringent workforce participation test; and

- students receiving at least part-payment of Youth Allowance or ABSTUDY may also receive other benefits including annual scholarships, relocation scholarships, rent assistance and/or fares allowance.

The Government's stated purpose is to ensure that student income support payments are better targeted to those students who need it most, including in rural areas. The Government has estimated that the changes will improve access and lift the coverage of students receiving income support by 17 per cent. However, it will be some time before it will be possible to judge the impacts of these changes on rural students and whether the serious financial disincentives for rural students have been reduced. A common view among rural education advocates is that the changes have not gone far enough in addressing the financial disadvantages faced by rural students.

The Alliance has proposed the adoption of an eligibility criterion for student income support based on an arbitrary distance from home – perhaps 100 km – that has to be travelled for a student to access the nearest available course in the field of study of their choosing.

Access to health courses

The shortage of health professionals in rural and remote areas is well documented, but could be eased by raising Year 12 completion levels in those areas, and by positive discrimination to assist rural students gain access to university and TAFE courses.

University campuses in regional centres are well patronised by rural students and their existence contributes to the availability of professionals in rural areas. In recent years there has been a very welcome increase in health courses offered by regional universities or regional campuses. Some universities also provide special entry schemes for rural students to selected courses.

If appropriately supported, University Departments of Rural Health, in collaboration with governments and health professions, can support a broad interdisciplinary system for quality rural placements for health science students.

Scholarships and incentives to study health disciplines

A significant number of scholarships are available to support rural students undertaking medical studies and, on a smaller scale, scholarships have been introduced for other health disciplines. This is a useful mechanism for increasing rural student enrolment and participation rates in tertiary studies.

Rural origin is a key determinant of a professional person's likelihood of pursuing a career in the rural workforce. The Alliance manages the Commonwealth's Rural Australia Medical Undergraduate Scholarship Scheme (RAMUS) and sees it as a successful demonstration of the value of scholarships for students from a rural background.

Since 2006, around 21 per cent of commencing medical students each year have described themselves as having a rural background. With the expansion in the number of medical school places, the absolute number of commencing medical students with a rural background increased by 42 per cent from 2006 to 2009.

Nevertheless, rural students continue to be under-represented in the health sciences, and there are far more applicants than scholarships in the rural scholarship programs, particularly for the allied health disciplines.

Well-supported rural clinical placements also increase the likelihood of a health professional's decision to enter rural practice. To date, support for allied health and nursing student placements has been on a much smaller scale than for medical students.

Targeted support for Indigenous students

Seventy per cent of Australia's Indigenous people live outside the major capital cities. Aboriginal and Torres Strait Islander young people have to date been largely overlooked in the nation's educational and workforce policy developments and therefore represent a significant untapped resource. There would be substantial benefits from increasing the number of Indigenous doctors, nurses, allied health professionals, accountants, builders, plumbers, farmers and town planners.

In particular, a greater number of Indigenous people in the health workforce is a key way to improve the health outcomes of Indigenous people.

ABS figures show that in 2006, only 37 per cent of Indigenous people aged 19 had completed Year 12, compared to 74 per cent of non-Indigenous young people of the same age. Only 20 per cent of Indigenous 19-year olds from Very Remote areas had completed Year 12.

However there have been recent improvements. At the time of the 2006 Census, 51 per cent of Indigenous 15-19 year olds were participating in education, up from 43 per cent in 1996. The biggest proportional change occurred in Very Remote areas: from 22 per cent in 1996 to 28 per cent in 2006.

Targeted programs will continue to be needed to ensure that Indigenous students have equivalent educational outcomes and to increase their number training in the health disciplines.

The need for further investment

The existence of barriers to further study is not just an equity issue for country people but, if allowed to continue, will in the long term impede economic development. Providing the opportunity for first class schooling and further education for all those eligible requires substantial new investment and innovation in rural education. But it would reap major rewards: over half of the tertiary students from rural areas stay in or return to rural areas after graduation.

Maintaining access to equivalent educational opportunities, professional services, infrastructure and telecommunications are keys to keeping rural communities viable.