

18 September 2020

Professor Rathan Subramaniam
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By email to: rathan.subramaniam@otago.ac.nz

Tēnā koe Professor Subramaniam

Re: The proposal to cap the numbers of Māori and Pacific medical students at the University of Otago

The Royal Australian and New Zealand College of Psychiatrists is concerned that the University of Otago may be considering capping the number of Māori and Pacific students entering medical school.

We are seeking urgent clarification from the University regarding this proposal as we have only obtained information indirectly from the media and other sources. It appears that the basis for revising this long-standing policy is due to a legal challenge.

We anticipate that if a policy change is imminent then key stakeholders will be consulted regarding the potential catastrophic impact on health services in New Zealand. The University's strategy to seek population parity (for Māori and Pacific students) within medical training has long been aspirational. Now this has become a recent reality, it makes no logical sense to discontinue the gains made. The meaningful impact of these trainee cohorts into specialist training will not be felt for many decades to come.

A diverse and culturally rich workforce will ultimately lead to better health outcomes for vulnerable populations and for all New Zealanders. The pervasive structural and systemic bias within health care and poorer outcomes for iwi Māori and Pacifica, has meant that specialist medical colleges all have strategies and policy initiatives to attract Māori and Pacifica into their specialist training. The proposed cap will only demoralise a health care system that is already broken and advantage the dominant culture in power. This is not only unethical and unjust, but also breaches te tiriti under article three.

There is robust evidence showing greater number of Māori and Pacifica medical practitioners will help to reduce the stark health inequities currently experienced by Māori and Pacifica populations. Not only do Māori and Pacifica people prefer their healthcare to be delivered by someone from their own culture but Māori and Pacifica doctors are able to advocate for their people, contribute to research that improves their peoples' health and wellbeing and provide alternative health perspectives that challenge biomedical models of medicine that can benefit all, for example Te whare tapa whā model / Te Wheke.

In this current debate, around setting targets for admissions, it is disheartening that the narrative suggests that Māori and Pacifica students are given 'special' admission rights and do not have to meet the rigours of academic standards. These accounts stigmatise our Māori and Pacifica students as "not good enough" and is divisive and dispirited aimed to distract from the clinical reality of disadvantage. It ignores the contextual reality of our colonial history and processes that demoralises the dispossessed. This situation will further impact negatively on Māori and Pacifica medical students, placing them under further unfair scrutiny.

Maintaining an equitable access to medical school entry for Māori and Pacifica is fundamental to addressing health status inequalities and restoring balance to a broken health care system.

It would be disappointing if this great work is now undone by the University reconsidering limiting their admissions and allowing this issue to be politicalised. We note the University's proposal to consider capping Māori and Pacifica students is at odds with Government priorities to increase the numbers of Māori and Pacific in the health workforce. It is also at odds with your own Māori Strategic Framework 2022, goal five: Te Taumata Angitu: Māori Student Success, which aims to increase Māori student success at Otago. The proposal to cap placements will diminish the potential successes of Māori at Otago.

We call for the University to maintain the status quo for Māori and Pacific populations to boost medical practitioner numbers. It has taken twenty years to get good numbers of Māori and Pacifica students engaging in medicine. We need a long-term commitment to this strategy to make population parity a reality across all medical specialties.

If you have any further questions, please contact the New Zealand National Office - Tu Te Akaaka Roa. Ms Rose Matthews, National Manager, supports our mahi and may be contacted by email rosemary.matthews@ranzcp.org or by telephone 04 472 7265.

Ngā mihi



Dr Mark Lawrence FRANZCP
Chair, Tu Te Akaaka Roa - New Zealand National Committee



Dr Claire Paterson FRANZCP
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cc Dr Francis Agnew FRANZCP - Pacific Representative, Tu Te Akaaka Roa
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