"POLYPREF"

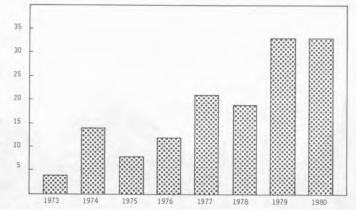
Necessity or discrimination?

Colin D. Mantell, himself a Maori, is Professor of Gynaecology at Auckland Medical School. In this article he talks about Polynesian preference entry schemes, designed to encourage more bright Polynesian students to take the long, hard road leading to medical qualifications. The scheme at Auckland, which has been approved under the terms of the Race Relations Act, has had its critics. Nevertheless, Professor Mantell feels that the scheme has value: we need more Maori doctors for the inspiration and the service they can provide.

In the thirty years between 1950 and 1980 only fourteen Maori and only a mere handful of Polynesian doctors graduated from N.Z. medical school. In the same period the Maori population raced from 115,000 to 280,000, while the Pacific Island population in Auckland alone reached 39,000 and for New Zealand as a whole 61,000. The so-called Polynesian Preference Scheme, designed to assist Maori and Polynesian students gain entry to medical school, has been of marginal benefit, but why were so few Polynesians qualifying?

The study of medicine is a long and arduous struggle and one which not all bright students are prepared to contemplate. However, a more major factor was the small number of Maori students reaching the necessary academic standard to be even considered for medicine. For example, a Pakeha student was seven times more likely to reach the seventh form. There were simply not enough students able to make the grade through School Certificate, University Entrance and Bursary examinations, let alone stand much chance of succeeding at the science subjects at university.

One can imagine the joy and pride we can now have in seeing the increasing figures of well-qualified Maori and Pacific Island students applying for entry to Auckland Medical School under the Polynesian Preference Scheme. The figures speak for themselves — only four in 1973 to thirty-three in 1980. Furthermore, the number with good academic grades is also increasing.



Maori and Polynesian students applying for entry to Auckland Medical School 1973-8

The system at Otago Medical School requires students leaving secondary school to do an intermediate year at university before competing for a place in the second-year medicine class. The competition is high, with only about a third of suitably qualified applicants gaining a place. The scheme at the much younger Auckland Medical School is different, with students applying from school for a place in the first-year class — again, this is a difficult assignment with only 110 of the approximately 600 applicants gaining places.

Why then, do we need a preference scheme for entry to medical school? The reasons are quite clear. To gain entry to Auckland Medical School, a student would normally require a high A Bursary pass mark and even then 100-150 students with A Bursaries will fail to gain entry. Consequently, there is great competition and without the allowance of the preference scheme few Polynesian students would gain a place. However, are examination marks so vital if we are to produce good doctors? Obviously, they are a means of measuring whether students have sufficient intelligence to cope with the course and this is a very important consideration when one considers the \$100,000 cost of training a doctor. A high pass mark may also indicate that students have developed discipline and study habits to stand them in good stead throughout professional life.



Polynesian Preference students at Auckland Medical School. The carvings, which frame the doorway of the students' common room, are the work of David Tipene-Leach, a sixth-year student (at left in doorway) from Ngati Kahungunu.

Yet, in troubled times, isn't empathy with our people equally as important as examination marks to our country's health services?

It must be emphasised that Maori students chosen to join the medical course are not travelling in the soft lane. Of all Maori eighteen-year-olds, less than 0.5 per cent can be expected to gain a bursary from the seventh form. This compares with approximately 8 per cent of Pakeha youth. The Maori medical students are thus more elite than their Pakeha classmates. The only concession granted to them is at entry. Once in the medical school there are no other concessions — no easier course nor easier pass levels in examinations.

Our community needs Maori doctors, for both the example they can set to inspire Maori youth and for the service they can provide. Our medical schools need Maori students in sufficient numbers to influence each medical class, and all our young girls and boys need to see a career in medicine as a realistic goal for which few may strive.