



Australasian College for Emergency Medicine

Position Statement

Aboriginal and Torres Strait Islander and Māori Workforce Parity in Emergency Medicine

Acknowledgement of Country

The Australasian College for Emergency Medicine (ACEM; the College) acknowledges the Wurundjeri people of the Kulin Nation as the Traditional Custodians of the lands upon which our office is located. We pay our respects to ancestors and Elders, past, present, and future, for they hold the memories, traditions, culture and hopes of Aboriginal and Torres Strait Islander peoples of Australia. In recognition that we are a bi-national College, ACEM acknowledges Māori as tangata whenua and Te Tiriti o Waitangi partners in Aotearoa New Zealand.

1. Purpose and terminology

The Australasian College for Emergency Medicine's (ACEM; the College) goal for parity is to increase representation of Aboriginal and Torres Strait Islander and Māori FACEMs, trainees and the broader emergency medicine workforce. This will increase culturally safe care for Aboriginal and Torres Strait Islander and Māori patients and enable culturally safe emergency departments (EDs) for all patients and staff.

This statement has been developed by ACEM. It accords with the following [ACEM Strategic Plan 2025-2030](#) priorities:

Equity of access to emergency care: The health outcomes of Aboriginal and Torres Strait Islander peoples and Māori in need of emergency care is consistently and persistently worse than that of their non-Indigenous counterparts. Providing timely access to culturally safe emergency care to Indigenous peoples with complex medical conditions is a significant issue in RRR areas, given the total proportion of Indigenous peoples increases with remoteness.

- **Imperative:** To serve our College's future as an inclusive representative and strong bi-national organisation.
- **Objective:** To strive to be culturally safe, pro-equity and anti-racist.¹

The principles of the statement align with the goals of the ACEM Reconciliation Action Plan 2022-24 (RAP) and Te Rautaki Manaaki Mana (Manaaki Mana). The RAP is ACEM's commitment to reconciliation and has actions to engage with Aboriginal and Torres Strait Islander communities, build the Aboriginal and Torres Strait Islander ED workforce and promote best-practice in emergency care.

¹ Australasian College for Emergency Medicine. 2025. Strategy 2025-2030. Accessible at: <https://acem.org.au/getmedia/8f4f3930-b0bc-4e48-9152-8940f7820f0d/ACEM-Strategy-2025-30-Design-Draft-22>

The Manaaki Mana is ACEM's commitment to achieve Pae Ora – excellence in emergency care for Māori patients, whānau, and staff. The strategy provides practical ways for health equity to be delivered for Māori in EDs.

This Statement has been developed in accordance with:

- **RAP Item 3. Deliverable 13.3:** to deliver a position statement on Aboriginal and Torres Strait Islander Workforce Parity.
- **Te Rautaki Manaaki Mana. Action 10.1:** Develop a position statement on Māori Fellow and trainee parity with the Māori population of Aotearoa New Zealand.

This statement is an agreement from the College to increase efforts to grow the Aboriginal and Torres Strait Islander and Māori, FACEM, trainee, and associateship emergency medicine workforce, and advocate for increased Indigenous ED workforce, with the aim of achieving parity. It provides a parity goal for workforce growth. It is applicable to all EDs in Australia and Aotearoa New Zealand.

The ACEM parity goals in Australia and Aotearoa New Zealand were determined with the expertise and knowledge of ACEM's Indigenous Health Committee (IHC), Reconciliation Action Plan Steering Committee (RAPSG) and Manaaki Mana Rōpū based on their community's needs for emergency care, relevance to Indigenous presentations and opportunities to grow their respective Indigenous emergency medicine workforce.

2. Priorities for Achieving Parity Goals

The ACEM RAP and Manaaki Mana sets goals and objectives to enhance the emergency medicine workforce. These are specified in:

- **Reconciliation Action Plan:** Action 10, Action 14, Action 15, Action 15
- **Te Rautaki Manaaki Mana:** Goal 10, Goal 11, Goal 14, Goal 16, Goal 17

Integral to increasing parity is ensuring the College will provide ongoing culturally safe support to Aboriginal and Torres Strait Islander and Māori graduates and trainees throughout their journey to Fellowship.

3. Related ACEM Documents

- *S52 Statement on Health Equity for Aboriginal and Torres Strait Islander Peoples*
- *S913 Statement on Health Equity for Māori*
- *S63 Statement on Culturally Competent Care and Cultural Safety in Emergency Medicine*
- *G23 Constructing a Sustainable Emergency Department Medical Workforce*

4. ACEM Position

The College strives for greater Aboriginal and Torres Strait Islander and Māori representation in the emergency medicine workforce. A more representative workforce of Aboriginal and Torres Strait Islander and Māori Fellows of the Australasian College for Emergency Medicine (FACEMs) and trainees will progress ACEM goals for:

- Reconciliation and Aboriginal and Torres Strait Islander and Māori health equity.
- Enabling culturally safe workplaces.
- Excellence in culturally safe care is delivered to Aboriginal and Torres Strait Islander and Māori patients and their whānau.
- Improving immediate to long-term health outcomes and a reduction in the burden of disease in Aboriginal and Torres Strait Islander and Māori communities.²

2 Lahn, S. et.al. 2021. Beyond Parity in Aboriginal and Torres Strait Islander Health Workforce Planning: Achieving Equity through Needs-Based and Strengths-Based Approaches. Centre for Aboriginal Economic Policy Research. Accessible here: https://caepr.cass.anu.edu.au/sites/default/files/docs/2021/8/CAEPR_CR_no_6_2020_Lahn_Puszkas_Lawton_Dinku_Nichols_Markham.pdf

- Addressing cultural load (see appendix 1) experienced by Aboriginal and Torres Strait Islander and Māori physicians and health professionals in their workplace, and responsibilities to address this within the College.
- Creating opportunities for genuine representation, voice, and leadership in setting future College policy directions.

The College is committed to supporting improved economic and social outcomes for Aboriginal and Torres Strait Islander people and Māori and should prioritise support and opportunities for Indigenous medical graduates and trainees to specialise in emergency medicine. This will have long-term positive impacts on healthcare, self-determination and tino rangatiratanga (self-determination, sovereignty, independence, autonomy, authority) in the communities they are from and work in.

The value and expertise Aboriginal and Torres Strait Islander, Māori emergency physicians and other health professionals bring to emergency care is immeasurable to achieving health equity and cultural safety in EDs. Therefore, ongoing, targeted, and strategic initiatives must be prioritised to increase Aboriginal and Torres Strait Islander and Māori workforce and leadership in emergency medicine.

5. Parity Goals

The following parity goals should be measured at bi-yearly intervals to monitor progress on growth of Aboriginal and Torres Strait Islander and Māori FACEMs and trainees.

ACEM should investigate opportunities to collect demographic data from EDs on the makeup of their Indigenous workforce.

In Australia, it was determined that need was based on the location and local populations served by an ED. In Aotearoa New Zealand, there is an opportunity to grow the emergency medicine workforce in step with medical graduates, a more ambitious target.

5.1 Aboriginal and Torres Strait Islander Workforce Parity Goal in Australia

In Australia, ACEM seeks to continuously increase the number of Aboriginal and Torres Strait Islander FACEMs and trainees. There are diverse proportions of Aboriginal and Torres Strait Islander presentations to Australian EDs, making a nationwide parity goal less representative.

Therefore, ACEM determines that the parity goal is that EDs must prioritise a more representative Aboriginal and Torres Strait Islander ED workforce commensurate with Aboriginal and Torres Strait Islander presentations of the communities they serve. This includes medical, nursing, and allied health workforces, Aboriginal Liaison Officers, clinical support roles and the many other occupations that make up the ED staffing profile.

Goal: Health services must adapt staffing requirements in EDs, to secure responsive, timely and equitable healthcare. Therefore, an ED should determine a staffing model that would enable an Aboriginal and Torres Strait Islander staff member to deliver part of an Aboriginal and/or Torres Strait Islander patient's episode of care. This will help secure culturally safe care for patients, and support their medical, social and spiritual healthcare needs, improving their overall experience in the ED and health outcomes.

5.2 Māori Workforce Parity Goal in Aotearoa New Zealand

ACEM strives for Māori emergency medicine trainees to be according with, or greater than population parity of Māori medical graduates in Aotearoa New Zealand by 2035.

Benchmarking parity to Māori medical graduates as a yearly measure is an opportunity for ACEM to increase FACEM and trainee numbers year on year, to ultimately achieve Māori presentation parity to Aotearoa New Zealand EDs.

Goal: Therefore, Māori trainees completing their fellowship to become FACEMs should achieve population parity with the medical workforce of Aotearoa New Zealand by 2045.

This goal acknowledges the changing demographics of the Māori population and will be tracked over the ten- and 20-year cycle.

Note: In 2021, 21.6 per cent of Otago University graduates and 13.6 per cent of Auckland University medical graduates were Māori.³ In 2022, 19 per cent of Otago University and 13.5 per cent of Auckland University medical graduates were Māori.⁴

6. FACEM and Trainee, National Population and ED Presentation Data

6.1 Fellows of ACEM (FACEM)

The ACEM 2023 FACEM and Trainee Demographic and Workforce Report⁵ showed that ten (0.3 per cent) Australian FACEMs self-identified as Aboriginal, with eleven (2.6 per cent) FACEMs who self-identified as Māori. No FACEMs self-identified as Torres Strait Islander.

6.2 FACEM Trainees

In 2023, sixteen (0.7 per cent) FACEM trainees in Australia self-identified as Aboriginal, and three of these trainees (0.1 per cent) self-identified as Torres Strait Islander, with two of these trainees also identifying as Aboriginal. A higher percentage of FACEM trainees in Aotearoa (7 per cent, n=12) self-identified as Māori.⁶

6.3 Current National Populations

Aboriginal and Torres Strait Islander Population in Australia

The latest Australian Bureau of Statistics census data reports as of 30 June 2021 there were 983,700 Aboriginal and Torres Strait Islander people, representing 3.8 per cent of the total Australian population.⁷

Māori Population in Aotearoa New Zealand

The latest Aotearoa New Zealand data reports the Māori population was 892,200, 17.4 per cent of the national population.⁸ It is estimated 170,000 Māori currently live in Australia.

6.4 Current ED Presentations

Aboriginal and Torres Strait Islander Presentations to Australian Emergency Departments

In 2023-2024, nationally, 9 per cent of ED presentations were for Aboriginal and Torres Strait Islander people.⁹

EDs must also consider raw presentation numbers of Aboriginal and Torres Strait Islander people to have a clear determination of workforce needs.

3 Medical Council of New Zealand, 2022. The New Zealand Medical Workforce in 2022. Accessible at: <https://www.mcnz.org.nz/assets/Publications/Workforce-Survey/64f90670c8/Workforce-Survey-Report-2022.pdf>

4 Medical Council of New Zealand, 2023. The New Zealand Workforce 2023. Accessible at: <https://www.mcnz.org.nz/assets/Publications/Workforce-Survey/Workforce-Survey-Report-2023.pdf>

5 Australasian College for Emergency Medicine, 2024. FACEM and FACEM Trainee Demographic and Workforce 2023. https://acem.org.au/getmedia/1c63f0f6-5554-4390-a027-49181e052115/2023-FACEM-and-Trainee-Demographic-and-Workforce-Report_Final-pdf_for-publication

6 Australasian College for Emergency Medicine, 2024. FACEM and FACEM Trainee Demographic and Workforce 2023. Accessible here: https://acem.org.au/getmedia/1c63f0f6-5554-4390-a027-49181e052115/2023-FACEM-and-Trainee-Demographic-and-Workforce-Report_Final-pdf_for-publication

7 Australian Bureau of Statistics (2023). Estimates of Aboriginal and Torres Strait Islander Australians; Preliminary 2021 Census-based estimated resident population of Aboriginal and Torres Strait Islander and non-Indigenous Australians. <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/latest-release>

8 Stats Tauranga Aotearoa, 2023. <https://www.stats.govt.nz/information-releases/maori-population-estimates-at-30-june-2022/#:~:text=At%2030%20June%202022%3A,17.4%20percent%20of%20national%20population>

9 Australian Institute of Health and Welfare, 2024. Emergency Department Presentations. Accessible at: <https://www.aihw.gov.au/hospitals/topics/emergency-departments/presentations>

Percentage of Aboriginal and Torres Strait Islander Presentations to EDs per jurisdiction 2023-2024¹⁰

New South Wales	Victoria	Queensland	Western Australia	South Australia	Tasmania	Australian Capital Territory	Northern Territory
8.9%	3.1%	9.8%	12.8%	6.7%	8.6%	4.4%	49.3%

Māori Presentations to Aotearoa New Zealand Emergency Departments

In 2021-22, there were 270,721 people who identified as Māori that presented to EDs in Aotearoa New Zealand, this accounts for 22.1 per cent of the 1,223,125 total ED presentations.¹¹

Appendix

Cultural Load

Cultural load in the workplace and health system is often an invisible workload placed upon Aboriginal and Torres Strait Islander and Māori people. Knowingly or unknowingly, it is an expectation to provide cultural knowledge, education, and support to within the workplace and for business purposes. This means there are regularly additional cultural, and workload demands that other colleagues may not be skilled to provide, or an assumption Aboriginals and Torres Strait Islander and Māori staff are expected and/or happy to provide. These demands and expectations may be regarding patients, carers, colleagues, peers, or organisational requirements.

Aboriginal and Torres Strait Islander and Māori emergency physicians face additional demands and expectations to educate others. An expanded Aboriginal and Torres Strait Islander and Māori emergency medicine workforce reduces the expectation on individual colleagues to constantly provide cultural advice, insights, and care. Colleagues who are not Indigenous need to be encouraged to expand their own cultural knowledge and find solutions to issues typically taken to Indigenous colleagues and staff.

Providing cultural knowledge should not be an expectation but built on reciprocity and respect and not contribute to additional workload, compared to other colleagues. Cultural load can lead to staff burden, burnout, and lower workplace satisfaction.

In a 2020 survey of more than 1,000 Aboriginal and Torres Strait Islander workers, 39 per cent of respondents reported they carried the burden of 'high cultural load', whereby additional work demands to educate their peers, and others was an expectation of their employment.

Cultural load placed on Aboriginal and Torres Strait Islander and Māori Doctors is additional to their day-to-day clinical work, and responsibilities to their communities, whānau, hapū, and iwi. Emergency departments, hospitals, the healthcare system and the College need to make concerted efforts to minimise cultural load, by empowering their workforce to learn and expand their own cultural understanding, and when and how it is appropriate seek help from Aboriginal and Torres Strait Islander and Māori colleagues.

10 Australian Institute of Health and Welfare, 2025. Emergency Department Care Tables.

11 Ministry of Health – Manatū Hauora. 2022. National non-admitted patient collection (NNAPAC) data. Wellington NZ: Ministry of Health – Manatū Hauora; 2021-22.