Claudia Paul  
South Australia

In early May I was given the incredible opportunity to attend the 2016 RACS Annual Scientific Congress in Brisbane. This provided me with extensive opportunity to network with many surgical trainees and consultants in the various surgical disciplines. I was quite shocked at how welcoming and helpful everyone at the conference was towards all the indigenous awardees and the time many people put aside to discuss our career aspirations. The advice we received for the next step in our medical and prospective surgical careers was incomparable. For me, it has markedly changed how I will tackle the next two years of my career, as I hope to move interstate and undertake several research endeavors whilst starting my journey as a junior doctor. Ruth Mitchell and Trish Davidson in particular had a great impact on my views and ambitions towards becoming a female surgeon, and I am thankful for their time and knowledge over the week.

The ‘Women in Surgery’ events and seminars were really informative but also provided a platform to discuss some of the concerns of entering surgical training in a very relaxed and welcoming environment. Kelvin Kong was incredibly inspiring, and it was a fantastic opportunity to meet with him and yarn about his journey, through medical school and of becoming Australia’s first indigenous surgeon. I was in awe of his many achievements and the continual work he does in indigenous communities. The advice he provided us with throughout the week was invaluable.

Prior to attending the ACS, I never could have imagined being provided with the opportunity to meet such highly regarded professors and surgeons from the various hospitals in Australia and New Zealand. It was very uplifting to meet other indigenous doctors/aspiring surgeons, and to hear their cultural stories, experiences and their plans for the future. Many of us came away from the conference thinking “wow, they’re people, just like you and I”, which I believe resonates a level of achievement that we can aspire to, regardless of previous disadvantage or hardship. It removed a lot of self-doubt I had held, especially as a medical student. I am more confident in addressing senior colleagues and consultants, which is something I found quite difficult in the past.

It was interesting to hear about the ‘big issues’ being raised by the college and how this will change as we, apply for training posts, and I look forward to witnessing the outcome of many of these discussions.

Meeting the Maori awardees and learning of their experiences through medical school and residency was superb. I really enjoyed discussing the connection with their iwi’s and how this compares with our relationships to elders and the land. I believe the friendships formed at this year’s conference will serve us well as we enter into junior surgical training and I hope that there is an ongoing increase in indigenous graduates striving to be surgeons in the near future.

A big thank you to the Foundation for Surgery for the opportunity to attend the conference, it has had a very positive impact on my studies and career aspiration. I look forward to hearing of more indigenous students and junior doctors attending in the future.
I was thankful to have been awarded a Maori ASC Award to travel to Brisbane to attend the RACS Annual Scientific Congress. We first met up on the Sunday night to catch up and meet the other award winners, and plan the week.

Our visit to Inala Health with Professor Richard Perry and members of the Indigenous Health Committee was extremely valuable. Being able to see the best in Primary care, and how having adequate resources results in better health outcomes for patients is plain to see. From the inviting indigenous artwork on the front doors, the waiting room incorporating a garden, the availability of immediate blood testing and increasingly available on-site medical specialist care it seemed as though Inala’s patient were very well covered. As mentioned by a few of the attending group – all they need is a theatre! I am a big believer in primary care as being of utmost importance in Indigenous communities. The benefits of controlling diabetes, heart disease, blood pressure etc. means that surgical illness is often less of a physiological hit and make for a better surgical candidate. It is difficult to see Maori patients be denied access to intensive care or high dependency units because of comorbidities such as end stage renal failure, COPD etc., which means they may not be well enough to access the gold standard management for their surgical illness, which is often an operation involving a general anaesthetic. Excellent primary care can mean that surgical illness is better managed. Inala is doing a great job.

The convocation saw a new Maori FRACS in Benjamin Wheeler, who I worked with as a junior registrar at North Shore Hospital in Auckland. I suspect that brings the number for Maori General Surgeons up to about a dozen. It always inspires me to see my seniors achieve these milestones, it certainly isn’t a cliché when people say ‘Well if he can do it, surely so can I’. Congratulations again, Ben.

The Women in Surgery networking drinks was another highlight. Specifically, it was a pleasure to have met Sareh Parangi, of Harvard University at Massachusetts General Hospital. We discussed minorities in surgery and how to best support each other. Deb Colville, Anne Kolbe and Trish Davidson gave us some pearls of wisdom about how to approach patient advocacy and how to maintain professional relationships. A particular quote I remember was about having children ‘get in, get pregnant, get help’. Excellent advice. Ruth Mitchell was a fast friend and I enjoyed her talk in the neurosurgery section as well the now infamous debate about women as natural teachers.

The Indigenous Health Committee had its breakfast on the Wednesday morning. I was very proud to see Professor Andrew Hill receive the RACS Maori Health medal for his commitment to the career advancement of Maori doctors. The opportunity the South Auckland Clinical School has to use its researchers to conduct outcomes research for the improvement of Maori health is enviable. Thanks to Johnson and Johnson again for their commitment to providing scholarship opportunities to Maori and Indigenous doctors. I have no doubt these awards will result in an increasing number of committed and enthusiastic surgical hopefuls.

Lastly, the opportunity to catch up with my medical school buddy Kopa Manahi, and new friends Zanazir Alexander, Joshua Knudsen, Kersandra Begley and Claudia Paul was invaluable. We discussed our own experiences in medical school, how to advocate for our Maori and Indigenous patients, and how to get through junior doctor years whilst preparing for SET training all the while maintaining a sharp Indigenous lens. I can see us all maintain a close bond and supporting each other through our careers, both personally and professionally. Huge thanks to Philip, Michelle, Lyn, and Melanie for keeping us organised and informed and Jessica from the Foundation of Surgery for your valuable insight about work-life balance and how to navigate a busy congress!

To Kelvin Kong, Jonathan Koea, Maxine Ronald, David Murray and the Indigenous Health Committee, thank you very much for your support and guidance and for your incredible examples. We can only hope to continue the work you have done in increasing the numbers of Maori and Indigenous surgeons and improving the pathway into medicine and surgery for those coming. If the goal is equity in health outcomes for Maori and Indigenous people, achieving equity in the surgical workforce is a huge step towards this. No reira, he mihi aroha tenei ki a koutou katoa.
Joshua Knudsen  
Hawkes Bay  
Beyond Expectations

First and foremost I must thank the Royal Australasian College of Surgeons, the Foundation for surgery and the people involved with the Maori ASC awards. To be honest with you, as a second year house officer, I was nervous heading to the conference. I was going to be in the company of the surgical legends of our time. However the nerves quickly disappeared as person after person not only introduced themselves but also wanted to get to know and find out how they could help me.

Getting to visit the Inala health centre led by Dr Noel Hayman led was an honor. Anecdotally we know that remote/indigenous communities often have worse health outcomes, the Centre’s ability to not only quantify these inequities through research but then to use that data to allocate resources wisely is surely a blueprint for success. I particularly liked the set-up of a Community Study Jury, where members of the community have research topics proposed to them and are able to give valuable input. This intimate involvement with the community empowers the community to take control of their own health. I look forward to seeing what the Centre will achieve next.

The quality of all the sessions was all fantastic. With so much happening during the day you often had to pick between several great sessions. It was often the sessions I hadn’t planned on going to that were the most interesting. With an interest in Orthopaedics I found the masterclasses great with plenty of practical opportunities. Dinners and Breakfasts were not only tasty but lead to the opportunity to meet the people whom I had heard so much about.

With the theme of the conference being technology and communication a session of particular interest to me was the plenary session on databases. Speakers from varied backgrounds gave interesting insights into the current state and future of both Australasia and the United Kingdom. The quote ‘the issues of healthcare are not that special’ highlighted our need to utilise technology and lessons learnt from other sectors to make databases more accessible and therefore more useful.

Talks were not only about the technological aspects of surgery but also the very human aspect of surgery. In his session, Kiki Maoate highlighted the interplay between our own culture and our patients’ culture and our need to be aware of how this could affect our interactions; he also had a great quote “People don’t care about how much you know until they know how much you care.”

What has this week meant to me? It is a highlight of my short career not only for the award but because of the people I have met. I look forward to seeing what the other award winners futures hold. To the members of the college whom I had the privilege of getting to know thank you for looking out for the award winners, organizing us and ensuring we got the most out of the experience, I can’t thank you enough.

Kersandra Begley  
New South Wales

The Annual Scientific congress was an encouraging first insight into the Royal Australasian College of Surgeons. Throughout the week, one feature of the conference theme was highlighted in particular; communication. An emphasis was placed on about how unprofessional behaviours are viewed and addressed in surgery, as well as establishing methods to deal with these behaviours. Messages coming from the College instilled a much-needed direction for change in the culture of surgery, providing leadership from the top. The Let’s Operate with Respect campaign was a promising step towards creating a training environment that I feel good about being a part of. One that is able to adapt to best educate trainee surgeons and provide surgical outcomes for the patient.

These discussions provided an open and promising context for the rest of the conference. At the Indigenous Breakfast event, which was just the second time it had taken place, the room was filled with supporting members and councilors. In a commitment to supporting Indigenous surgical trainees and aspirants, a number of scholarships were launched to reduce the barriers that are faced in attaining an accredited surgical training post and passing examinations. Demonstrations of support ranging from Welcome to Country and Acknowledgement of Country at College events, to substantial scholarships such as these are required across
the board. Discrepancy in the number of Indigenous specialists compared to non-Indigenous is intimidating for trainee doctors. I was glad to see that the College of Surgeons is one of the leading training colleges in Australia at offering support and working to assert itself as a college that welcomes Aboriginal and Torres Strait Islander doctors.

Throughout the week I met a number of College councilors and members who were interested the Australian and New Zealand Indigenous award winners and supporting our journeys into surgery. The RACS staff were relentless in their efforts to facilitate meetings between the scholarship winners and those who shared similar surgical interests. As a result, I felt very welcomed into the ASC environment, and each person I met was happy to impart advice on what they had learnt throughout their careers. This was a major strength of attending the ASC - the appreciation of what it is like for other Aboriginal surgeons, female surgeons, surgeons of different sub-specialties, at different points in their career or with varying engagement with RACS. The ranges of life experiences shared by each individual were so varied and strong; it helped dismantle some of the stereotypes about surgeons portrayed within medical school. Previously, my experiences in discussions about career and family have been strongly negative, and I’ve often been told that career and family are mutually exclusive for women in particular. The ASC allowed me to filter out some of the misinformation that I had been told before about lifestyle and surgery.

Great thanks goes to Foundation of Surgery for offering the Aboriginal and Torres Strait Islander ASC award in 2016, and I am confident that continuing this award long term, as well as the new scholarships launched at the Indigenous breakfast will be effective in reducing the barriers to Surgical Fellowship within Aboriginal and Torres Strait Islander doctors and medical students. It is critical that the initiatives promoted at the ASC persist, and I hope that the leadership from the college demonstrated at the ASC continues and disseminates through to the wider surgical community in Australia and New Zealand.

Kopa Manahi
Hawkes Bay

The RACS Maori ASC award I believe provided an invaluable opportunity.

It was an opportunity that for me marked the beginning of being recognised by the college of my commitment to surgery as an indigenous doctor.

It allowed me to familiarize myself with the activities of the college and most importantly to network and become acquainted with the many sponsors, fellows, staff of the college and the other recipients.

The many events and activities provided insight, knowledge and inspiration

On the first night of arriving an opportunity to meet with all the other recipients in the company of RACS staff began the week. It was truly comforting to be met by Philip and Justine who were ever so inviting and caring. It was a great way to break the ice and provided for a great ambiance to start the week.

One of the highlights of the week was on the first day. It was great to see a large gathering of people interested in indigenous health. The excursion to the Inala Indigenous Health Centre was very informative, I was amazed by the facility and services the Centre had to offer, it was a remarkable example of what primary care can look like, by providing access to the people in their environment, it was an opportunistic approach that provided a one stop shop clinic of services that traditionally perhaps would otherwise be provided in a secondary centre.

The convocation was very inspiring; I was able to see one of my consultants graduate and more so moving was to see Kelvin receive his award.

I got the opportunity to attend a master class and various other session, these were very valuable to my own clinical practice and provided up to date research on the various clinical conditions I deal with on a daily bases. I also made note of the various presenting styles.

The evenings were busy with attending formal dinners, they provided more network opportunities and a great atmosphere to reflect and share experiences.
The day of receiving our awards was a very moving occasion, it was an opportunity for our cultures to express ourselves and be recognised for our commitment to the college to a career in surgery. It was also an opportunity to see the vested interest the college had in their commitment to see indigenous participation in the surgical workforce.

The last evening of the week was celebrated by the congress dinner. There was a lot of appreciation and further networking done at this dinner. I had the privilege of talking to an Auckland surgeon, who gave great advice and that was to get the exams, he saw as the most important.

To conclude I would to thank the college for this opportunity. I look forward to the day that I become a trainee and subsequent fellow of the college; I would like to end with a whakatauki (Maori proverb) that really reflects my intentions as a future Maori surgeon.

“He aha te mea nui o te ao”
What is the most important thing in the world?
He tangata, he tangata, he tangata
It is the people, it is the people, it is the people

Zanazir Alexander
Auckland

It was an honour to be a recipient of the RACS Maori ASC award for junior indigenous doctors aspiring to a career in surgery. To be able to attend the conference at such a junior stage in my career was invaluable, as it helped to clarify my own pathway forward and enabled supportive networks to be established with fellows of the college and other RACS staff.

The entire conference was outstanding; however, there were a few highlights for me. Attending the Inala Health Centre was an eye-opening experience to see the effort and progress made towards improving access to health care services for indigenous peoples in Brisbane. It was inspiring to see established surgeons including Mr Kelvin Kong, Mr Chris Perry and also Mr Richard Perry, be part of the visit. It helped illustrate the link between tertiary and primary care and where better progress can be made back home in New Zealand in terms of making specialist appointments more accessible. Often those leading the charge for improving indigenous health are indigenous doctors, however, it was humbling to see both indigenous and non-indigenous surgeons in attendance all focused on providing better care for those who need it the most.

The indigenous roundtable breakfast was another standout event for me. Firstly, it was an honour to be selected for a Maori ASC award. A warming moment was to see how much support there was from the college for the occasion. This was reflected by the number who attended the breakfast and also the speaker’s comments about their commitment to restoring indigenous health. I was especially moved by the words shared by Mr Chris Perry who even shed a few tears for the moment. Another highlight was to see Professor Andrew Hill, who has been a supervising consultant when I was a medical student on his surgical team, a supervisor for my research work and a mentor, receive his award for his service to Indigenous health in New Zealand.

The conference was an invaluable opportunity to network with fellows and experts in various specialties. Having the opportunity to have one on one conversation with seasoned and new surgeons during these informal meets, I was able to seek advice to clarify my own pathway towards a career in surgery, to best streamline my path into specialty training and how to best prepare for selection.

A common theme throughout the conference was how supportive and eager RACS staff were to provide opportunities for each of the ASC award recipients to connect with surgeons in specialities of great interest as a future career pathway. Their support throughout the week was outstanding.

I left the conference with a renewed energy for pursuing a career in surgery and an added commitment to improving Maori health, and I hope that with the ongoing support from the college for junior indigenous doctors, we will continue to see progress in health status of our indigenous peoples.