



Republic of Namibia

**Responses to Questions presented by Hon Mike K.
Kavekatora's on the Admission of First Year Medical Students
at the University of Namibia**

By

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Minister of Higher Education, Technology and Innovation

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Hon. Speaker, I rise to provide responses to questions raised by Hon Mike Kavekatora. Thank you, Hon. Kavekatora, for asking these questions.

**Hon Speaker,
Hon Members,**

Students' admission into different university programs is generally guided and controlled by set rules and regulations of the university Senate. However, there are some highly specialized and regulated programs that require strict adherence to set requirements and stipulations by the relevant professional regulatory bodies, in addition to the Senate rules and regulations. The field of medicine falls within the category of the highly regulated and controlled professions.

**Hon Speaker,
Hon Members,**

The University of Namibia's School of Medicine annually receives over a thousand applications. For the year 2023, the school of medicine received 1,428 applications. The interest to pursue medicine among the Namibian citizenry is very high. Of these applicants, only 337 met the minimum requirement for admission into medical training. From this figure, only 70 students could be admitted, and 267 students could not be admitted due to limited space and other factors, which I will get to soon.

As alluded to in the preceding paragraphs, besides the Senate approved rules and regulations, there are other rules and policies that govern admission into studying in the field of medicine.

**Hon Speaker,
Hon Members,**

There are various pieces of legislation that have a direct bearing on admission requirements and the overall teaching in this discipline, for instance;

1. The Medical and Dental Act, Act No.10 of 2004;
2. The Government Gazette No. 6442 of 2017 on Regulations relating to minimum requirements of study for registration as a medical practitioner;
and
3. Government Gazette No. 5680 of 2015 on Regulations relating to minimum requirements of study for registration as a clinical officer governing the education of health professionals in the Republic of Namibia.

In Namibia, the body to enforce these regulations is the Health Professions Council of Namibia (HPCN). The curriculum is developed by the university, UNAM, quality assured through internal processes at HPCN and approved for implementation. The School of Medicine then submits their curriculum and the regulations pertaining to admission to Senate, which approves the program. Once the program is approved, it goes to the Namibia Qualifications Authority for registration on the Namibia Qualification Framework. When this process is completed, the program is submitted to the Namibia Council on Higher Education for accreditation through the use of external assessors.

**Hon Speaker,
Hon Members,**

Many factors are considered in approving the program and the number of admissions in the medical field. Some of those factors are

- a) the clinician - student ratio;
- b) the lecturer - student ratio;
- c) sufficiency of simulation labs;
- d) the availability of specialists in training hospitals and others;
- e) expression of interest - application, etc, etc

In turn, these obliges the HPCN to set a minimum number of students to be admitted into the program to comply with the regulations and international standards of training and practice. This is in addition to minimum scores required to be enrolled into a credible medical school like the one at UNAM.

In its quest to uphold regional representation in the admission into the medical school, UNAM uses the regional quota system. The quota system has been developed to ensure equity (not necessarily equality) in regional representation. The quota system follows a methodology of assigning a ratio to the population size of the specific region. Each of the 14 Regions in Namibia is allocated a quota based on the regional population based on the recent national census data. The Regional Quota is calculated as follows:

Regional population ÷ country population × approved Grade 12s =quota per region.

Therefore, mathematically, regions with high populations receive higher quota allocations. When a regional quota cannot be filled with qualifying applicants, the

unfilled places are returned to the pool and filled by the next best national candidates.

I am reliably informed that in earlier years, in their attempt to bring regional balance to this flagship program, top qualifying students were academically ranked and selected for enrolment into the medical school. However, experience and practice has shown over the years that, high performance sometimes comes with a clear focus on the field of study, and that field may not be the field of medicine; also, high performance is not always a good indicator of interest, tenacity, passion resilience and consistency in self- application.

The quota system may not be fair to students with higher points, for instance, say from Windhoek, who are not admitted into the medical school, in order to provide for other students from other regions (those who are top performers in those regions), with lower points, but meeting the minimum requirements. Currently, the quota system, as it is used as a tool for selection, seeks to address regional representation based on the region where the prospective student did his or her Grade 12 examination. It, therefore, has got nothing to do with the tribe of a prospective student.

**Hon Speaker,
Hon Members,**

Allow me to state that as a multicultural and heterogeneous society, it is important that this heterogeneity is reflected in all spheres and sectors, not just in education. This is exactly what the quota system, as applied by UNAM at its school of medicine, is trying to address. However, if you, Hon Kavekatora, or any other Hon member, or member of the public who is well endowed with creativity

and wisdom in this regard, your inputs in refining and perfecting regional representation at the UNAM Medical School, are most welcome.

Hon Speaker and Hon Members, as I move towards sharing with this August House and the Namibian nation, the regional admission statistics and concluding, allow me to recap by saying, there are many internal and external factors that inform admission into this UNAM's flagship program, medicine. However, there are two critical factors that complicate and compound equity and regional representation at UNAM Medical School, these are access and funding.

Now, Hon Kavetora the whole spectrum of our National Education System is anchored on the principles of access, quality, equity and democracy. You will agree with me that, amidst the diverse challenges our country has faced over the year, our public institutions have done reasonably well, and continue to uphold these cardinal principles, under difficult and trying times.

Registered students in the MBCHB Program, 2023 intake per Region.

Table 1: MBCHB registered students, 2023 intake per region

REGION	NUMBER REGISTERED STUDENTS	OF PERCENTAGE (%)
Erongo	4	5.7
Hardap	1	1.4

Karas	1	1.4
Kavango East	13	18.6
Kavango West	3	4.3
Khomas	8	11.4
Ohangwena	5	7.1
Omusati	9	12.9
Oshana	4	5.7
Oshikoto	9	12.9
Otjizondjupa	2	2.9
Zambezi	2	2.9
International	6	8.6
BSc (articulating students)	3	4.3
TOTAL	70	100%

I so submit Honourable Speaker.

