

Train five. Keep five.

Tēnā koe [Candidate name],

I am a constituent in your electorate and a supporter of the Neurological Alliance of NZ, which speaks for the 1 in 3 New Zealanders affected by neurological conditions. I am asking you and your party to support the Neurological Alliance of New Zealand campaign, **Train five. Keep five.**

As someone who [insert personal connection], I know timely access to diagnosis, treatment and neurologist care can change lives. For too many people in Aotearoa New Zealand, that care is delayed, limited or unavailable because there are not enough funded public neurology roles.

Please commit to funding two additional public hospital neurology positions each year, so New Zealand can train five neurologists and keep five, and support a national neurological workforce strategy.

The evidence is clear. Research published in 2026 and led by Professor Anna Ranta shows New Zealand has one neurologist for every 74,604 adults, compared with one for every 41,000 in Australia and one for every 14,000 across other high-income countries.^[1] In 2024, New Zealand had 67.3 full-time equivalents across the public and private sectors. Demand already exceeds supply, and the gap will widen over the next 12 years if current training, recruitment and retention patterns continue.

New Zealand trains up to five neurologists each year, yet funds public hospital roles for only about three. That means we train specialists, then risk losing them to private practice or overseas because there are not enough funded public roles for them to stay and serve patients here.

Train five. Keep five. Funding two additional public hospital neurology positions each year would allow New Zealand to employ the neurologists it already trains. It would lift the publicly funded intake from three to five and begin to close a workforce gap that is already affecting patients, whānau, general practice, emergency departments and hospitals.

The shortage has real system impacts. Clinically appropriate referrals are declined because there are too few neurologists and funded hours. People who need ongoing specialist review may be discharged back to general practice after one appointment. Follow-up capacity is far below what chronic neurological disease requires, with Health NZ reporting an overall ratio of first specialist assessments to follow-ups of about 1:1, while the Ranta workforce research says around six follow-up appointments would be expected for each first specialist assessment.^[1]

For people living with neurological conditions and their whānau, this means delayed diagnosis, missed opportunities for earlier treatment, greater reliance on emergency departments, more pressure on general practice, avoidable deterioration, lost independence and higher long-term costs. Earlier access to specialist care helps people get the right diagnosis, treatment and follow-up sooner.

I ask you to make a clear public commitment before the election to support **Train five. Keep five.** Please confirm in writing whether you and your party will commit to funding two additional public hospital neurology positions each year and supporting a national neurological workforce strategy.

Ngā mihi nui,

[Your name]

[Your suburb/electorate]

^[1] Ranta A, Mottershead J, Buchanan SM, et al. *Aotearoa New Zealand's neurologist workforce: a 2024 analysis of demand, supply and projections*. BMJ Neurology Open. 2026;8:e001397.