

Achieving equity

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The ultimate measure of a person is not where they stand in times of comfort and convenience, but where they stand at times of challenge and controversy

- Martin Luther King

Equity

What does it LOOK like?

What does it FEEL like?

What does it SOUND like?

Unfortunately



Check in time is 10AM - 4PM

- Not suitable for alcoholism ,
smoking opium , no Maori people ,
no island people . No shoes in house

ENOUGH IS ENOUGH
NO MORE MAORI CLAIMS

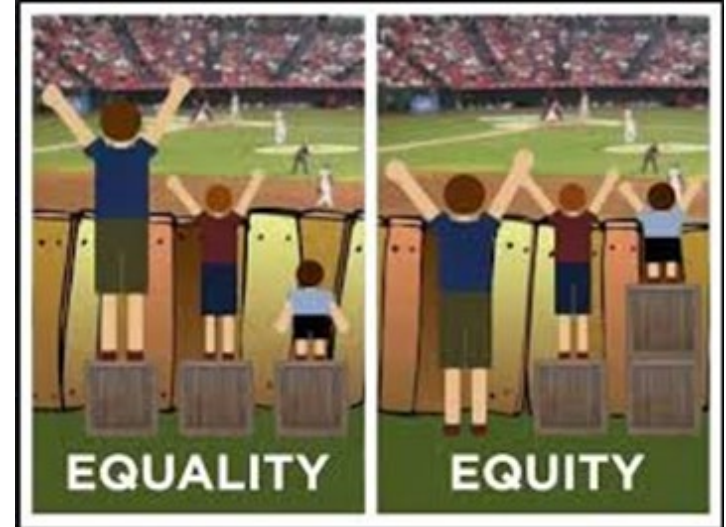
JOIN US NOW & HELP STOP THIS CRAP!

Inequalities in health

Health inequalities are unfair and inequitable

and if prevented provide:

- wider social benefits
- economic benefits



How are health inequalities demonstrated?

- Population groups
- Ethnicity
- Gender
- Age
- Geographical region



Māori population

- The Māori population has grown from a census count of less than 50,000 in the late 1800s to approx to 850,500 June 2020 (or 16.7 percent of national population).
- Māori have higher birthing rates than non Māori but die 8-10 years earlier.
- Half of the Māori population is under 24 years of age
- Only 1 in 17 Maori are aged 65 years and over, while 1 in 6 European are aged 65 years and over
- The Māori population is expected to increase and by 2035 MP is expected to be approx. 1.18 million.
- In 1881 the prominent scientist Alfred Newman pronounced that 'the disappearance of the Māori race is scarcely subject for much regret. They are dying out in a quick, easy way, and are being superseded by a more superior race.
- The task of the pakeha was to 'smooth the pillow of the dying race' . .

Poverty and health

The cultural and social barriers faced by marginalised groups – including indigenous communities – can mean they use health services less, with serious consequences for their health. This maintains their disproportionate levels of poverty and poor health.



What does poverty look like in the NZ context

- There is no official 'poverty line' in New Zealand as there is in other countries (e.g. USA) and no formal agreement about exactly how to measure poverty.
- That the strongest indicator of poverty is the level of income.
- There is also some consensus that an income level set at 60% of median household disposable income after housing costs is a reasonable level of income to protect people from the worst effects of poverty.

Level of income for some NZ families 2018

- So with two adults and two children lies at \$600 per week or \$31,200 annually in NZ.
- For a sole parent with one child it is \$385 per week or \$20,200 annually in 2016 dollars

(MSD Household Incomes report July 20178,).



What can contribute to health inequalities?

- GP consults are on average 2 minutes shorter for Māori patients (12.7mins versus 15.1 mins)
- Doctors report lower levels of rapport with Māori patients
- A higher proportion of Māori consults were deemed to be “urgent” in comparison to Non-Māori consults (43.3% versus 31.2%)
- Follow-up arrangements were made for a lower percentage of Māori than non Māori. Some smaller differences in the rates of referral were also observed.

Cringle S, Lay-Yee R Davis P Pearson J. A comparison of Māori and non-Māori patient visits to doctors. NatMedCaReport 6; 2002



How can we contribute to health equity for our populations?

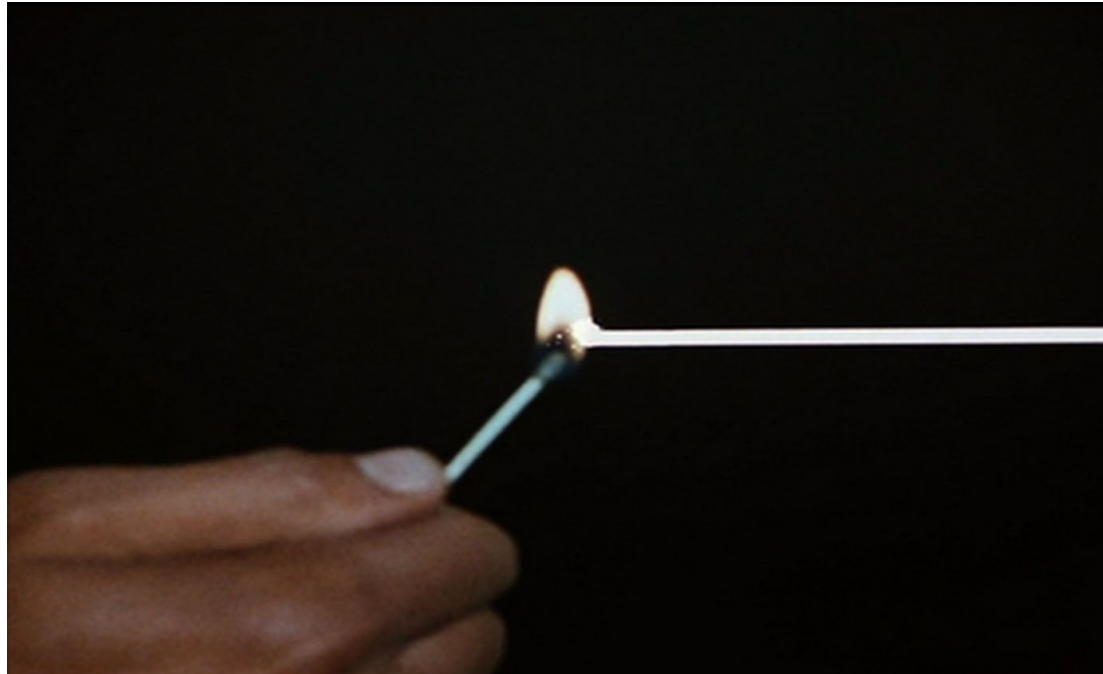
- Address determinants of health for individuals and communities across sectors.
- Hold the healthcare system accountable through public monitoring and evaluation.
- Explicitly design quality of care for high risk populations to achieve equity.
- Ensure organisational policies and procedures reflect good robust equity strategies and initiatives
- Ensure collaboration approaches and programmes include Māori and other high need communities

Equity framework

Midland framework: an equity approach for Midlands Health Network and general practices

	Leadership	Knowledge	Commitment
	<i>Leadership is about setting an expectation that good primary health care provision will contribute to better health equity for all New Zealanders</i>	<i>Quality service delivery requires knowledge to adapt to the specific needs of the Primary Care patients and community</i>	<i>Primary Health Care is committed to reconfiguring services to deliver high-quality services that meet the need of all New Zealanders</i>
Midlands Health Network	<p>Leadership by the Network is expressed through ensuring:</p> <ul style="list-style-type: none"> There is a raised awareness and strategic direction for primary care service provision. There is a raised awareness and set direction for health literacy at Governance and senior leadership levels. Excellent primary care provision is embedded in all levels of the health system, including planning work programmes and reporting. Midland Health Network leadership group is linked to Midland GM Māori Governance group. (Ngā Toka Hauora) Midland Health Network establishes linkages to regional and national Maori primary care workgroups/leads That equity/no gaps is a central focus for all care planning and reviews using a framework incorporating ages/rurality/disability/ethnicity/gender/location and elderly There is sufficient representation of Māori, Pacific and other high risk groups presented on Midland Health Network executive groups. Primary care services provide an effective leadership forum in consultation with patients, to deliver a coordinated service appropriate to needs Primary care system acknowledges the importance of leading an equity health care service, which prioritises services to those most in need and promotes accessible, acceptable, affordable and timely services Services are coordinated in such a way that all those requiring primary care have equal access to appropriate levels of care where and when they need it. 	<p>The Network will:</p> <ul style="list-style-type: none"> Develop ways to effectively deliver and monitor high-quality health care for Māori. Collaborate and share information between services, programmes and initiatives. Develop methods to ensure that services, programmes and initiatives share knowledge and contribute to developing excellent and equitable health care services. Ensure that high quality ethnicity data are available for planning and monitoring services. Ensure that evidenced based methods are used to achieve equity access, and quality of care. Deliver health care information in an integrated fashion with “seamless” transition across care settings so that patients and their families can easily gain access to the care and information they need through any entry point. Allow individuals and families to make informed decisions about their care choices with support from the Network which focuses on the needs of the individual and works in partnership with individuals, families and carers. 	<p>The network will commit to:</p> <ul style="list-style-type: none"> The availability of high quality data/information to measure and ensure high quality equitable access to health care services. Having systems that are organised and improved in a way that makes it easier for individuals and whānau to navigate, understand, and make decisions regarding health care support. Ensuring that equity/no gaps quality targets are developed Ensuring high quality health care is equitable for Māori, Pacific and other disadvantaged groups. Building and maintaining a health workforce responsive to the health care needs and aspirations of Māori, Pacific and other high risk groups. Building a workforce that is skilled in cultural competency and appropriateness supported by specialist tertiary level services, community supports and volunteers. Ensuring the workforce reflects that of the patient population including ethnicity and age Examining and checking that the number of referrals by age, rurality, disability, ethnicity, gender and location reflect equitable access. Identifying and removing barriers experienced by patients and whanau navigating through the health system, especially their understanding of community related health services Ensuring treatment and support options availability reflect the differences for ethnicity, geography, disability, age and gender

Challenging the status quo
Your mission, if you choose to
accept it

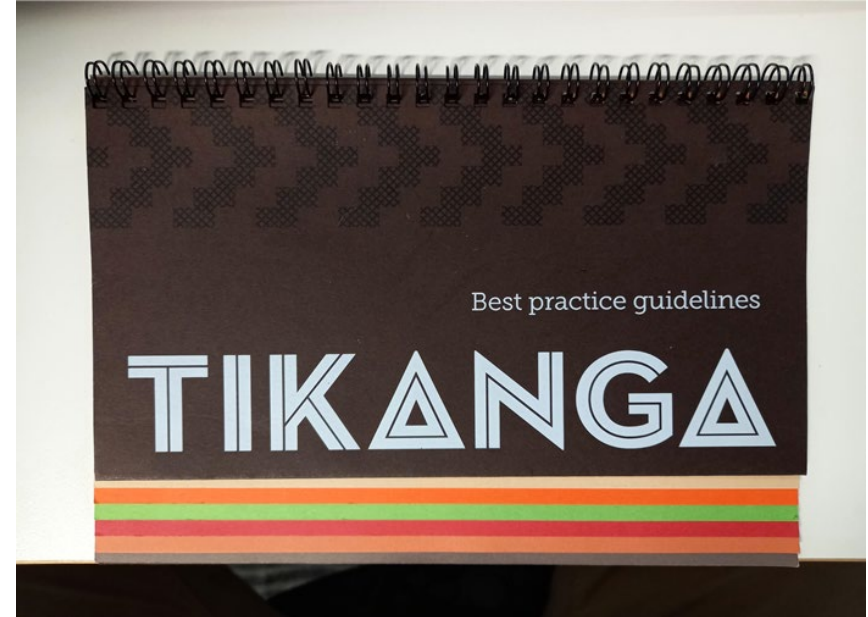
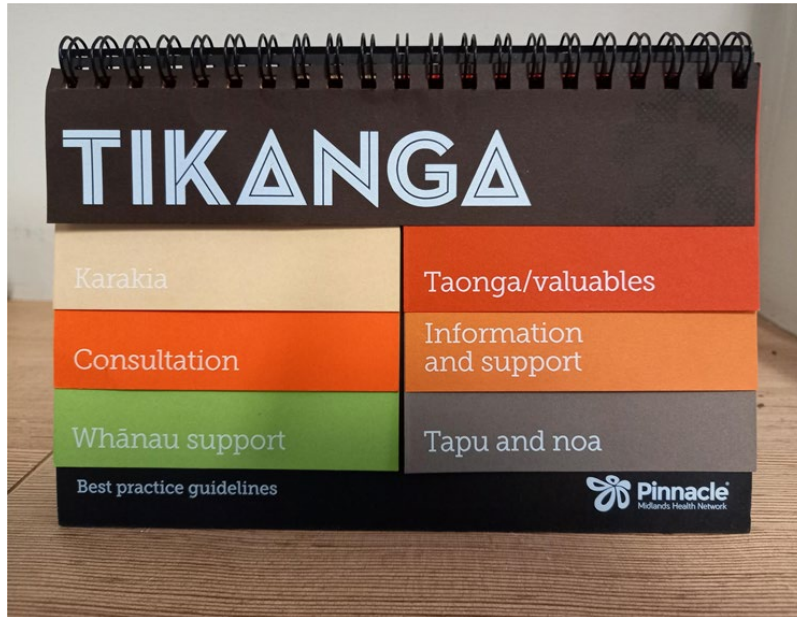


<https://www.youtube.com/watch?v=7IN7OjDkyzs>

Challenges for the health sector

- While New Zealanders overall are living longer, Māori and Pacific peoples still have lower life expectancies than the population as a whole.
- In addition, tailored approaches are needed for some individuals and population groups so they can access the same level of service and enjoy the same health outcomes as others.
- A strong desire for health and social services to work better together
- Health services with a strong focus on primary care and a widely integrated approach that focuses on intervention and prevention of good health.

Tikanga best practice guidelines:



The End.....Questions?