

RACP 2019

Tikanga matatika, te Tiriti me te
kaupapa hauora

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#Wai2575 #WaitangiHealthClaim

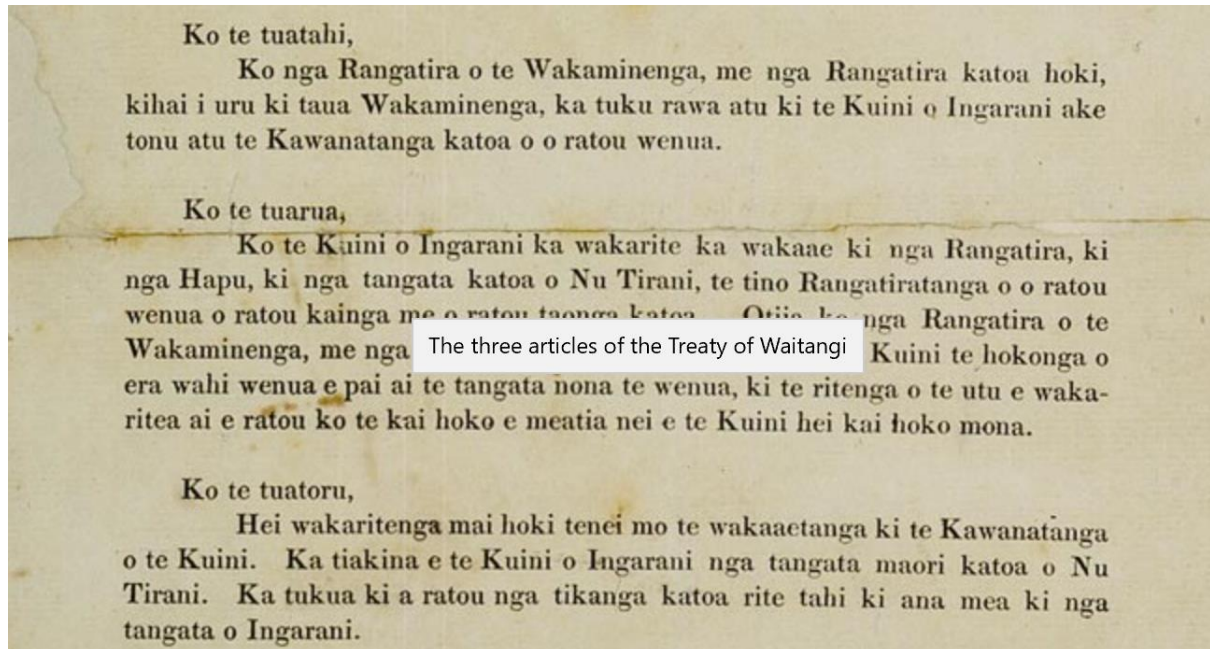
Maori doctors

demographic proportionality of indigenous medical students



Te Tiriti o Waitangi

- ▶ Most Māori chiefs signed the Māori-language version of the treaty at Waitangi on 6 February 1840 or later in the north and at Auckland. A recent translation of the articles of the Māori version follows.



Treaty of Waitangi

- ▶ **The First**
The chiefs of the Confederation and all the chiefs who have not joined that Confederation give absolutely to the Queen of England for ever the complete government over their land.
- ▶ **The Second**
The Queen of England agrees to protect the chiefs, the subtribes and all the people of New Zealand in the unqualified exercise of their chieftainship over their lands, villages and all their treasures. But on the other hand the chiefs of the Confederation and all the chiefs will sell land to the Queen at a price agreed to by the person owning it and by the person buying it (the latter being) appointed by the Queen as her purchase agent.
- ▶ **The Third**
For this agreed arrangement therefore concerning the government of the Queen, the Queen of England will protect all the ordinary people of New Zealand and will give them the same rights and duties of citizenship as the people of England.

Treaty of Waitangi

- ▶ Article the first
The Chiefs of the Confederation of the United Tribes of NZ and the separate and independent Chiefs who have not become members of the Confederation cede to her Majesty the Q of E absolutely and without reservation all the rights and powers of Sovereignty which the said Confederation or Individual Chiefs respectively exercise or possess, or may be supposed to exercise or to possess over their respective Territories as the sole sovereigns thereof.
- ▶ Article the second
Her Majesty the Q of E confirms and guarantees to the Chiefs and Tribes of NZ and to the respective families and individuals thereof the full exclusive and undisturbed possession of their Lands and Estates Forests Fisheries and other properties which they may collectively or individually possess so long as it is their wish and desire to retain the same in their possession; but the Chiefs of the United Tribes and the individual Chiefs yield to Her Majesty the exclusive right of Preemption over such lands as the proprietors thereof may be disposed to alienate at such prices as may be agreed upon between the respective Proprietors and persons appointed by Her Majesty to treat with them in that behalf.
- ▶ Article the third
In consideration thereof Her Majesty the Q of E extends to the Natives of NZ Her royal protection and imparts to them all the Rights and Privileges of British Subjects.

Waitangi Tribunal

- ▶ Tribunal's main roles are to inquire into claims by Māori of Crown breaches of the Treaty of Waitangi and make recommendations for settling them. The tribunal has no close parallels anywhere in the world.
- ▶ Treaty of Waitangi Act 1975 set up the Waitangi Tribunal with the power to investigate claimed breaches of the treaty from 10 October 1975 and the authority to determine the meaning and effect of the Treaty of Waitangi, taking into account both its English and Māori versions.
- ▶ 1984 Labour government extended authority, given retrospective power to investigate claims from the date of signing of Treaty of Waitangi in 1840
- ▶ Kaupapa (thematic) inquiries are not specific to any district. They deal with nationally significant issues affecting Māori as a whole.

Wai2499 - claim summary

- ▶ Persisting, cumulative adverse consequences for the health of all Māori.
 - ▶ **Loss of land:** Including the impacts of punitive confiscation of Māori land by the Crown, decisions of the Native Land Court, Public Works legislation and local authority levies.
 - ▶ **Loss of language:** Including the impacts of active education policies of successive Crown agencies, and the Crown's delay in the establishment of remedial institutions.
 - ▶ **Loss of culture:** Including the impacts of the Suppression of Tohunga Act 1908, in conjunction with the actions detailed above under loss of land and loss of language.
 - ▶ **Loss of family/whānau:** Including the impacts of the implementation of social security legislation that overrode traditional Māori practices for care of young people within their whānau.
 - ▶ **Loss of employment:** Including the impacts of Government-mediated economic restructurings at various times.



Crown actions and inaction: *Failure to exercise good governance*

- ▶ The Treaty of Waitangi allowed the Crown to exercise kāwanatanga, whilst protecting the right of Māori to exercise tino rangatiratanga. The Crown has failed in its exercise of kāwanatanga, including failing to exercise good governance, to include Māori and to provide equitable quality of care. The Crown has actively obstructed Māori participation in the health system.



Crown actions and inaction: *Failure to remedy*

Crown insufficient and inadequate determination to remedy inequitable Māori health outcomes including:

- ▶ successive Crown education and health policies - linked to the Crown's failure to achieve workforce parity of Māori health workers and the Māori population;
- ▶ successive Crown health policies - linked to Crown failure to establish therapeutic environments that are or were culturally safe for Māori;
- ▶ successive Crown health structures and policies that have ignored persistent and pervasive health inequities for Māori;
- ▶ successive Crown housing policies - linked to the Crown failure to address substandard housing, leads to respiratory and communicable diseases, and rheumatic fever;
- ▶ Crown failure to exert controls on harmful substances/activities (tobacco, alcohol, and gambling);
- ▶ Crown failure to actively protect the ownership, protection, access and possession of Māori data sovereignty in relation to health services.



Crown actions and inaction: *Legacy of colonisation*

- ▶ Processes of colonisation have left a negative legacy for Māori
- ▶ Processes of colonisation continues today and
- ▶ Processes of colonisation will be repeated unless there is purposeful intervention.

- ▶ The underpinning values and legacy of colonisation, including racism, lie at the heart of these issues and are central to this claim both in terms of Crown breaches and potential remedies.



Crown actions and inaction: *Insufficient and Inadequate Remediation*

- ▶ Crown failure to recognise that the longstanding existence of persistent and pervasive health inequities for Māori is a breach of the Treaty of Waitangi.
- ▶ Crown failure to recognise and give effect to the Treaty of Waitangi and its obligations to Māori in the New Zealand health system, including through the NZPHD Act and other relevant legislation.
- ▶ Crown failure to reduce or remove inequities in health outcomes for Māori, despite settings with stated aims to reduce or remove inequities in the NZPHD Act since 2000.
- ▶ Crown failure to address the causes of inequities in health outcomes for Māori, including:
 - ▶ differential access to the social determinants of health leading to differences in disease incidence (including the impact of colonisation, education, employment, income, housing and other factors);
 - ▶ differences in access to and through the health system (including longer and slower pathways through health care for Māori, hospitalisation rates and other access to care); and
 - ▶ differences in quality of care received (including in screening, diagnosis and as a result of racism, bias and discrimination).
- ▶ Crown failure to ensure that Crown or Crown-controlled agencies involved in health services and outcomes in New Zealand give effect to the Treaty of Waitangi and the Crown's obligations to Māori.



Crown actions and inaction:

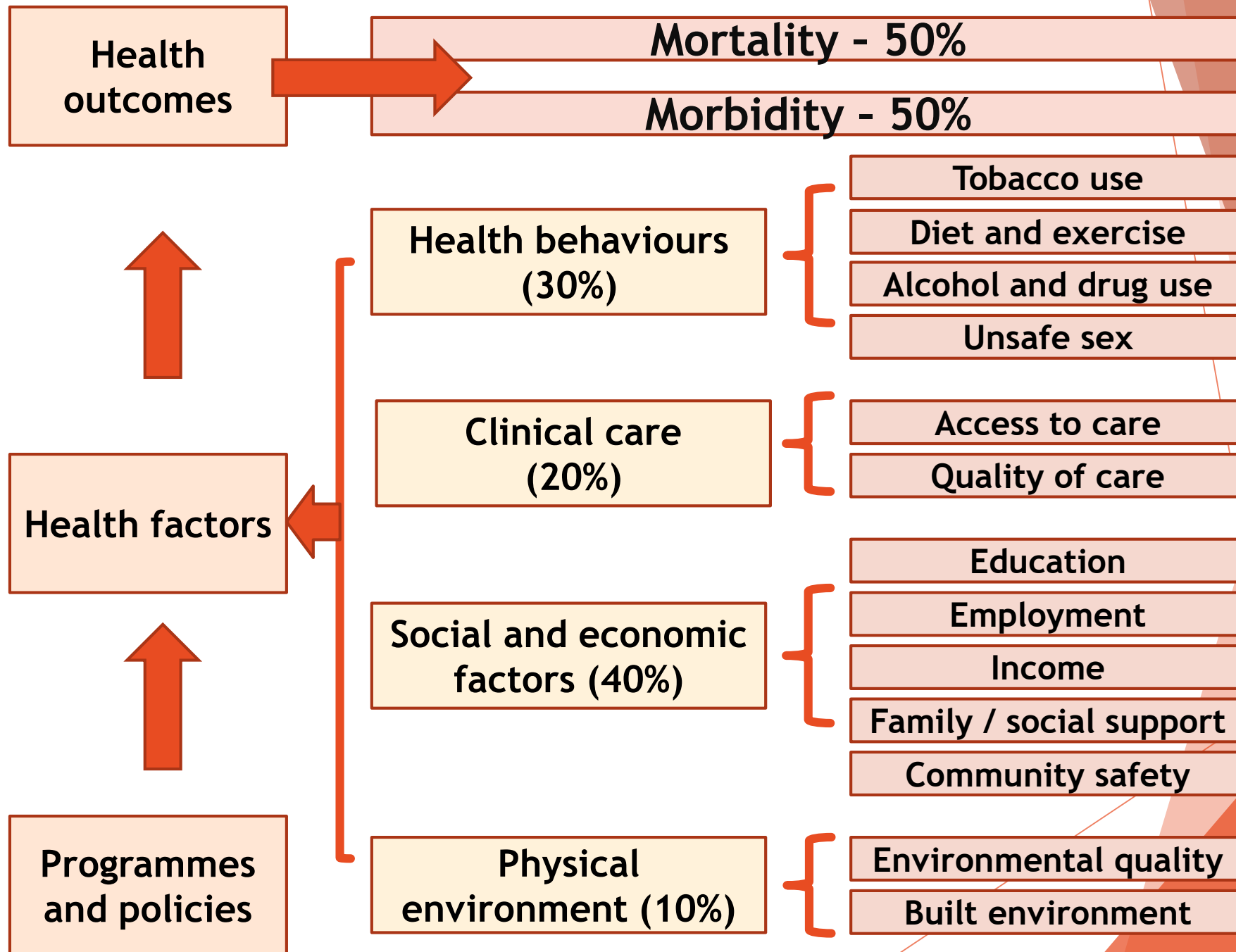
failure to monitor, report and structure

- ▶ Crown failure to monitor compliance of Crown or Crown-controlled agencies with fundamental aspects of the NZPHD Act and other relevant legislation, including basic matters such as monitoring Māori membership of DHBs.
- ▶ Crown failure to monitor the performance of DHBs with respect to eliminating health disparities for Māori, despite this having been a statutory requirement since 2000.
- ▶ Crown removal of the requirement of DHBs to create stand-alone Maori Health Plans as part of their annual planning processes.
- ▶ Crown normalisation of a power state with respect to inequitable Māori health outcomes
- ▶ Crown failure to collect appropriate reporting and data to enable the health of Māori to be adequately reported on and thereby improved.
- ▶ Crown failure to structure the health system on Māori terms (including Māori world views, life course patterns and data, whanau ora)

Crown actions and inaction: *Prejudice*

Crown failures have determined the current and historical inequitable health status of Māori.

- ▶ Crown's catastrophic failures in health system structuring, design and delivery have resulted in:
 - ▶ the extant system which produces consistently worse, but preventable, health outcomes for Māori.
 - ▶ the extant system which has normalised, accepted and tolerates worse, but preventable, health outcomes for Māori.
 - ▶ avoidable illness, disability and health for generations of Māori.
 - ▶ the undervaluing of Māori health and Maori lives in Aotearoa.



Wai2499 seek relief, and finding that:

- ▶ Crown's actions, policies and omissions have resulted in a failure of the health, education and welfare systems to protect the health of Māori in all of its forms
- ▶ Crown acted with insufficient/inadequate determination to remedy inequitable Māori health outcomes
- ▶ Crown's actions, policies and omissions are contrary to Articles II and III of the Treaty of Waitangi; and inconsistent with the Crown's obligations under the Treaty of Waitangi.
- ▶ Recommendation that Crown takes immediate steps, in conjunction with the Claimants, to remedy inequitable Māori health outcomes within the scope of NZ health system;
- ▶ Crown's failure to actively protect Māori Data Sovereignty in relation to health services is inconsistent with the Crown's obligations under the Treaty of Waitangi;
- ▶ Recommendation that the Crown takes immediate steps, in conjunction with the Claimants, to actively protect Māori Data Sovereignty in relation to the health system;
- ▶ and such further or other relief as the Tribunal considers just.

Moral and ethical

- ▶ *The term inequity has a moral and ethical dimension. It refers to differences which are unnecessary and avoidable but, in addition, are also considered unfair and unjust. So, in order to describe a certain situation as inequitable, the cause has to be examined and judged to be unfair in the context of what is going on in the rest of society.*

WHO 1990, Whitehead p5

Compounding disadvantage

- ▶ *Inequities in health systematically put groups of people who are already socially disadvantaged (for example, by virtue of being poor, female, and/or members of a disenfranchised racial, ethnic, or religious group) at further disadvantage with respect to their health; health is essential to wellbeing and to overcoming other effects of social disadvantage.*

Braveman and Gruskin (2003) p 254

Maori health

- ▶ Life expectancy (gap 9.1yrs in 1997, 8.2yrs in 2007, 7.3yrs in 2012)
 - ▶ IHD, CVD, stroke (2x risk of dying, but only 19% increased invasive CV procedures)
 - ▶ Lung cancer
 - ▶ Suicide, Mental health
 - ▶ COPD
 - ▶ RhF, RHD
 - ▶ CKD
 - ▶ Diabetes, renal failure, amputations
 - ▶ Infectious disease
 - ▶ Oral health

Wider Determinants of Health

- ▶ Unemployment
- ▶ Lower total personal incomes
- ▶ More likely to receive a means-tested benefit
- ▶ More likely to live in a household without telephone or motor vehicle
- ▶ Less likely to own their home
- ▶ 3 times more likely to experience household crowding

- ▶ More likely to be arrested, more likely to be charged with a serious offence, more likely to be found guilty, more likely to be incarcerated

Underlying causes

- ▶ Racism
 - ▶ Implicit bias, unconscious bias
 - ▶ Casual racism, personal racism, institutional racism
- ▶ Colonisation
 - ▶ Land, livelihood, employment
 - ▶ Language, culture, connection

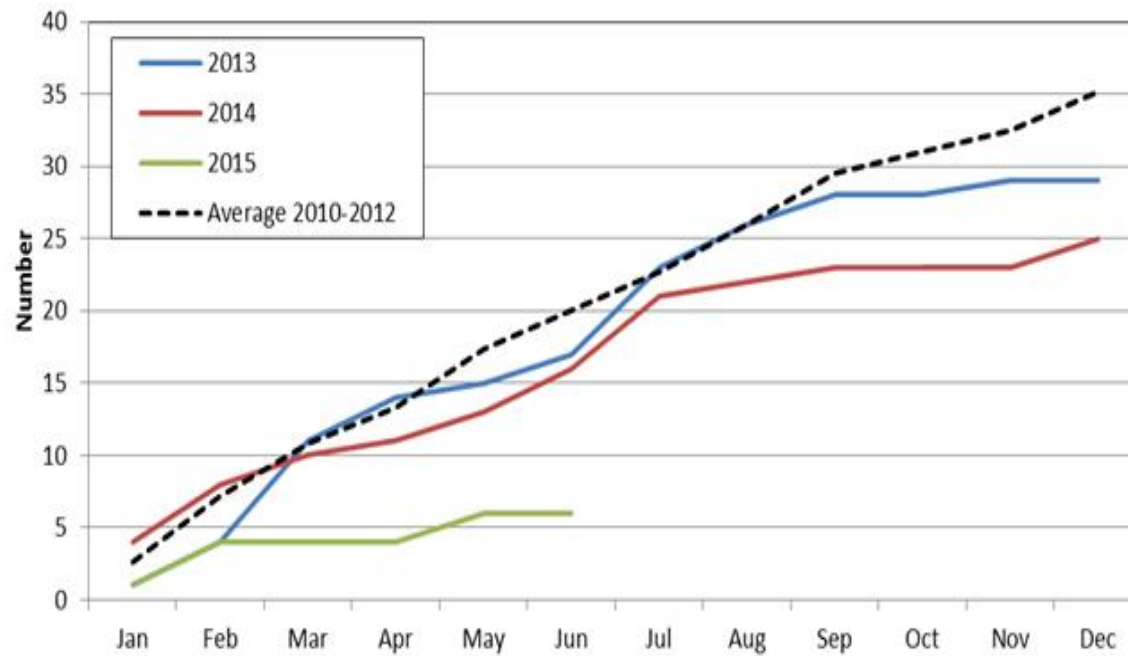
Provocations

- ▶ RACMA
 - ▶ If you can help get busy right now
 - ▶ If you can't then get out of the way

Provocations

- ▶ MCNZ, Colleges
 - ▶ Cultural Competence
 - ▶ Best Health Outcomes for Maori - Practice
- ▶ PSAAP, PHARMAC, ACC, DHBs
 - ▶ Set a date for equity
- ▶ Nursing Governance Group
 - ▶ Equity in nursing workforce by 2028

ARF admissions in Counties Manukau



Cumulative initial attack notifications in 5-12 year olds by admission year and month, Counties Manukau Health 2010-2015 .

Note: 2015 data is year to 30.06.2015

#Equity2040

- ▶ 2040 - bicentennial
 - ▶ 200 years since signing ToW
 - ▶ Celebrating (rather than PROTESTING)
- ▶ Consider cohorts:
 - ▶ Turn 21 years old in 2040
 - ▶ Retire in 2040
 - ▶ First time parent in 2040

#EqGen - generation equity

- ▶ 18,600 Maori babies born this year
- ▶ First trimester enrolment with LMC
- ▶ Antenatal vaccinations - pertussis, flu
- ▶ Antenatal education
- ▶ Safe sleep, wahakura or pepipod
- ▶ Smoking cessation
- ▶ Safe with alcohol & other drugs
- ▶ Parenting skills and support
- ▶ Kaimanaaki whanau - “walking alongside” for complex social issues

RACP

- ▶ Equity
 - ▶ If you can help, STEP UP
 - ▶ If you can't, STEP ASIDE
- ▶ LEADERSHIP
 - ▶ Clinical influence, advocacy
- ▶ ETHICS
 - ▶ Critical analysis and systems thinking
- ▶ PROFESSIONALISM
 - ▶ Audit, peer review, practice review, learning research