19 September 2019

John Whaanga
Deputy Director-General
Māori Health Directorate
Ministry of Health
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By email: maorihealth@health.govt.nz

Māori Health Action Plan to implement He Korowai Oranga 2020–2025

Dear John

The New Zealand Medical Association (NZMA) wishes to provide feedback on the above consultation. The NZMA is New Zealand’s largest medical organisation, with more than 5,000 members from all areas of medicine. The NZMA aims to provide leadership of the medical profession, and to promote professional unity and values, and the health of all New Zealanders.

The NZMA recognises the principles of te Tiriti o Waitangi and the special obligations to Māori, particularly to ensure equity and active protection. Current disparities in health outcomes between Māori and non-Māori are unacceptable. The NZMA is committed to advocating for policies in health and the social and wider determinants of health that urgently address these disparities and contribute to equity of health outcomes.

We welcome the development of the draft Māori Health Action Plan. We note that the purpose is to enable the health and disability system to respond to te Tiriti obligations, affirm Māori aspirations, and achieve equitable health outcomes, wellness and wellbeing for iwi, hapū and Māori communities. We are strongly supportive of these objectives and believe the Action Plan is a good step in the right direction. Furthermore, we consider the wording in the document to be appropriate and not too confrontational as to cause resentment or perpetuation of bias. It is our view that the draft Action Plan also appropriately reinforces obligations for government and Crown entities under te Tiriti o Waitangi while acknowledging their failures to meet these obligations to date.

We suggest that the draft document would be enhanced by addressing a means for Māori whānau and Māori staff to easily and confidentially lodge complaints against racist behaviour and practices they may encounter in the health system. This would support the development of a
culturally safe health sector and protect the Māori health workforce. This measure could be part of wider efforts at addressing institutional and individual racism.

To address the underrepresentation of Māori on Boards or in senior management positions, we suggest that it would be useful for the Action Plan to specifically address how to target, recruit, encourage and support the Māori health workforce into these roles.

Finally, we are disappointed that the original timeframe for such an important consultation was so short (2 weeks). In order to develop an organisational response that allows us to consult with our members, Advisory Councils and obtain Board approval on a response, we require a minimum of 4 weeks. It is also disappointing that we were not given sufficient notice in order to participate in the engagement wānanga. While we are grateful for the extension, we ask that in future, the Ministry provide a minimum of 4 weeks (and ideally 6 weeks) as a consultation period.

We hope our feedback is helpful and look forward to the finalised Action Plan.

Yours sincerely

[Signature]

Dr Kate Baddock
NZMA Chair