

29 May 2020

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By email: Beth.Wilson@racp.edu.au

RACP Statement on Indigenous child health in Australia and Aotearoa New Zealand

Dear Beth

Thank you for inviting the New Zealand Medical Association (NZMA) to provide feedback on the above statement. 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. We recognise 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. Our submission has been informed by feedback from our Board and Advisory Councils.

We congratulate the College on the development of this statement. We believe it is an excellent document that provides a compelling overview of the current state of, and reasons for, indigenous child health, and sets out useful key message and priorities for the College and its members to contribute towards the elimination of health inequities in indigenous children. We provide two main suggestions below for the College's consideration that we feel could further improve the document.

We note that the document suggests that paediatricians and paediatric trainees need to be familiar about indigenous issues only in their own country. For example, point two under priorities for paediatricians and trainees on page 7 is to "learn about indigenous culture and language in your country and your area." Point five in this section is to "learn about the colonial history of your country." Our view is that as an Australasian College, the statement should encourage paediatricians and paediatric trainees in Australia and New Zealand to learn about indigenous issues in both countries. While there are probably few Aboriginal and Torres Strait Islander children in Aotearoa, there are a considerable number of Māori children in Australia. Furthermore, many paediatricians in New Zealand and Australia work for at least a short period

across the Tasman in the 'other' country. Accordingly, we believe the statement should make it clear that paediatricians and paediatric trainees should learn about indigenous issues in both Australia and New Zealand, regardless of where they currently live.

While this statement is limited to indigenous child health, Pacific child health is also of concern in both countries, with large inequities. We suggest it would be useful for the statement to at least acknowledge this fact, perhaps in the introduction. We also believe there would be considerable value in a separate statement on Pacific child health and would be interested to know whether the College has any plans for the development of such a statement.

We hope our feedback is helpful and look forward to seeing the final statement.

Yours sincerely

A handwritten signature in blue ink that reads "K. Baddock". The signature is written in a cursive style with a large, sweeping flourish at the end.

Dr Kate Baddock
NZMA Chair