



9 December, 2021

Pae Ora Submission

Tēnā te rongo,
He rongo i te pō, he rongo i te ao
He rongo ā whare, he rongo ā marae,
Tau mai, whakatau mai te hau nō ukiuki, nō te haro ki te rangi,
Tuia, tuia, tuia ngā pūmanwa o te wāhi ngaro ki ngā tūmanako o te Ao tūroa,
Hui e, Tāiki e

Hei Āhuru Mōwai Māori Cancer Leadership Aotearoa is a national network of Māori cancer professionals, clinicians, researchers, service providers and whānau who are committed to eliminating cancer inequities between Māori and non-Māori and supporting Māori led approaches to cancer control.

Cancer is the leading cause of death in Aotearoa and compared to non-Māori, Māori incidence rates are 20% higher and mortality is twice as high. Prior to the global pandemic cancer incidence was forecasted to increase by 50% over the next 15 years¹

The forecasted increase and the COVID pandemic will more likely increase the current cancer inequities between Māori and non-Māori. A health system that builds towards pae ora, is equitable and agile will be essential going forward.

¹ Ferlay J, Colombet M, Soerjomataram I, et al. Global and Regional Estimates of the Incidence and Mortality for 38 Cancers: GLOBOCAN 2018. In. Lyon: International Agency for Research on Cancer/World Health Organization; 2018.

Rangatiratanga

To give better effect to Te Tiriti o Waitangi we recommend the following changes to the current draft Pae ora bill:

1. The bill intends to give effect to the 'principles' of te Tiriti o Waitangi. This wording limits the interpretation and application of te Tiriti o Waitangi - Section 6
 - 1.1. Recommendation: Remove the word 'principles' so that the bill 'gives effect to te Tiriti o Waitangi'
2. Te Tiriti o Waitangi is currently a clause
 - 2.1. Recommendation: That 'giving effect to te Tiriti o Waitangi' is part of the purpose of the act (Section 3) rather than just a clause.
3. Te Tiriti o Waitangi and The Treaty of Waitangi are both used even though it is well documented that Te Tiriti o Waitangi and the Māori version is the authoritative text not the English version.
 - 3.1. Recommendation: That the bill uses te Tiriti o Waitangi exclusively and removes all reference to The Treaty of Waitangi.
4. The bill requires the health system to provide opportunities for Māori to exercise decision making authority – Section 7(c)
 - 4.1. Recommendation: Replace the word 'provide' with guarantee
5. The bill currently gives limited rangatiratanga to the Māori Health Authority in relation to the other health entities
 - 5.1. Recommendation: The bill should guarantee the Māori Health Authority and the iwi partnership boards the constitutional right to veto all health system decisions including those of Health NZ, Ministry of Health, Pharmac, Health Quality and Safety Commission and the NZ Blood and Organ Service decisions– Section 7(c), Section 28, Section 14 (f)
6. The bill requires the Māori Health Authority to report back to Māori and develop ongoing engagement mechanisms. Section 6(h), 6 (i)
 - 6.1. Recommendation: This bill should require the Ministry of Health, Health New Zealand and all other crown health entities to do the same
 - 6.2. Recommendation: This bill should explicitly require the health system to resource Māori to engage in this clause
7. The bill legislates that the Minister of Health can amend the Government Policy Statement on Health. This locates and reinforces power with the crown and silences Māori rangatiratanga.
 - 7.1. Recommendation: The bill should provide a mechanism for Māori to develop and approve the charter including having enduring authority over any future changes
8. The iwi Māori partnership boards have limited details about resourcing
 - 8.1. Recommendation: That establishment and ongoing resourcing for iwi Māori partnership is equitable

9. Pharmac has been intentionally excluded from numerous clauses including those that guarantee Māori decision-making authority. – Section 7(4). These exemptions are a breach of te Tiriti o Waitangi

9.1. Recommendation: That the bill provides for inclusion of Pharmac and all other health entities.

Āhuru wairua

- The bill should ensure that the expectations of the new structures, including the Māori Health Authority, Health New Zealand and the iwi partnership boards are cognisant of the current pandemic and the risk of health system failures. Overextending the obligations of these new structures in their establishment years risks continuity of quality care and will more likely increase Māori inequities.

Thank you for the opportunity to submit on this very important piece of legislation. We are happy to provide any further advice on Māori cancer control issues and how the Pae Ora bill could maximise Māori health gains and eliminate cancer inequities.

Ngā manaakitanga



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