

15 October 2024

**Hon. Dr. Shane Reti
Minister of Health**

Needs-based Service Provision

Tēnā koē e te Minita

Te Whare Piki Ora o Māhutonga – the Royal Australasian College of Surgeons (RACS) is the accredited training provider for nine surgical specialties. Surgeons in these specialties are also required by both RACS and Te Kaunihera Rata o Aotearoa - Medical Council of Aotearoa (MCNZ) to continue with surgical education and review of their practice throughout their surgical careers.

Our mission ***‘to improve access, equity, quality and delivery of surgical care that meets the needs of our diverse communities’***. We are committed achieving a fair, safe and sustainable health system that delivers equitable access, equitable healthcare services, and equitable outcomes for Māori, consistent with the Pae Ora (Healthy Futures) Act 2022.

With this mission in mind, we note with considerable alarm the tenor of *Cabinet Office Circular CO (24) 5 Needs-based Service Provision*, and the implication is that using ethnicity to prioritise healthcare is the same as prioritisation based on race.

The Circular emphasizes the need for a robust analytical case for targeted services based on empirical evidence, including disparities in healthcare outcomes.

We urge you to acknowledge that there is already substantial evidence supporting ethnicity as a determinant of health for Māori and other population groups, leading to inequity of access, service deliver and outcomes in healthcare.

There is an opportunity cost of ignoring the impact of ethnicity and it should be considered when developing service design and prioritisation of service delivery.

We highlight recent commentary, particularly:

- Loring B, Reid P, Curtis E, Mclead M, Harris R and Jones R. Ethnicity is an evidence-based marker of need (and targeting services is good medical practice), *Te Ara Tika o te hauora hapori - New Zealand Medical Journal* 2024; 137:1603A.
- *‘We challenge, Hon Dr Reti, to do what is right and include ethnicity, as a variable, in equitable healthcare’*, Press release from Te Kahui Hauora Māori - National Hauora Coalition, 3 October 2024.

The key points to note from these articles and our own professional viewpoint are:

- Ethnic health inequities in Aotearoa New Zealand are unjust and avoidable and it is our job as health professionals to use all tools at our disposal to intervene.
- Ethnic health inequities cause more sickness, higher healthcare costs, and premature deaths, driving both direct and opportunity costs to taxpayers.
- Ethnicity is a strong, evidence-based marker of health need in Aotearoa New Zealand, and is superior to many other markers of need.



- Using population patterns to assess risk is a core aspect of evidence-based medical practice.
- The status quo is not a neutral starting point for resource allocation and fails to address discrimination that already exists in our health system which has a bias toward our dominant ethnicity.
- Targeting by ethnicity is evidenced-based and leads to better allocation of healthcare resources.
- Analyses based on good-quality ethnicity data should be routinely used to identify need, design health interventions and monitor the effectiveness of the health system.
- Ethnicity data quality and analysis must be strengthened.

RACS is the leading advocate for surgical standards, professionalism and surgical education in Aotearoa New Zealand and Australia. RACS is a not-for-profit organisation representing more than 7000 surgeons and 1300 surgical trainees and International Medical Graduates (IMGs) across Aotearoa New Zealand and Australia. RACS also supports healthcare and surgical education in the Asia-Pacific region and is a substantial funder of surgical research

This is not the time to draw back to basics in considering resource allocation to Māori and other population groups for whom healthcare is under-resourced. The evidence is already available.

The need for equity of access, service delivery and outcomes for Māori, Pacific people and other vulnerable population groups is now. Mauri ora.

Nāku noa, nā

Ros Pochin
Chair
Aotearoa New Zealand National Committee

John Mutu-Grigg
Chair, Te Rōpū Hāuora Māori
Māori Health Advisory Group