

New zealand healthcare organisations



Introduction

Health care in New Zealand is affected by a number of factors that determine the trends and demands in terms of health.

How the health workers plan for, implement and evaluate health interventions greatly depends on some environmental factors, attitudinal factors, international health policy and New Zealand campaigns and policy. In this paper, these determinants and their impact, whether direct or indirect, positive or negative, on the New Zealand healthcare will be thoroughly discussed.

This paper also aims to tackle the role that organisations take part in promoting health care services and each of them playing different roles in determining the supply and demand of health care services.

We will also compare the obstacles that exist in the New Zealand healthcare system to that of the United States of America's. This will be done by assessing these countries in terms of safety issues, geographical, cultural, socioeconomic and organizational barriers.

1. Environmental determinants:

1. 1 Demographic distribution of populations

Presently, New Zealand became a multi diverse and more culturally nation. According to Statistics New Zealand, Population Statistics Units, the number of migrants coming into the country is increasing. The study conducted last 2006 focused on five (5) major ethnicity group with the estimation of total

number of individual/ group living in the country. These were the European people including the New Zealander (67%), Maori (15%), Pacific people (7%), Asian (9%) and Middle Eastern/Latin American/African (1%). (Population Estimates at 30 June 1996, 2001 and 2006, 2014).

New Zealand has an ageing population. This pattern shows a decline in fertility rate (birth control is properly utilised and easily available) and increase in length of life (on-going research and new technologies used in treating diseases). Moreover, there is also a projection in increase number of aged people on the year 2031. People on 65 years and above mostly suffer from a chronic diseases that result decline on the quality of their life. As a result of this, demand for disability and health care services will also rise. (An Ageing Population, 2014).

Maori and Pacific people have a younger age group as compare to European people because they have increase number of birth and death rates. The latter group prefer to have lesser number of children. Asian people also have young structure population because most of them settled in New Zealand with their family at early age. (An Ageing Population, 2014). In China, there is a law known as “ one child policy” to control the increasing population of the country which can result in increased sustainability of every family.

1. 2 Social

Generally, population of New Zealand have been experiencing increase in living standards. Factors contributed on this were increase in employment status, high educational attainment, safe living and working environment

and awareness of the healthcare services available in the community. (Dew & Davis, 2005).

Poor household income is the top reason of being susceptible to poor health. Among all the groups residing in New Zealand, Maori and Pacific communities usually live in a small and crowded housing environment because of lower costs and the culture of extended families. As an outcome, there will be an increase cases of communicable diseases and mental health illnesses. (Dew & Davis, 2005). Moreover, these group of people have the highest number of cases of cardiovascular problems, respiratory diseases and Cancer which is associated with poor eating habit (commercialised food), insufficient physical activities, heavy alcohol intake and smoking practice (roll-your-own cigarette). (The Health of New Zealand Adult 2011/12, 2012).

1. 3 Cultural

New Zealand is mainly a bicultural country which consists of white-skin settlers “*Pakeha*” and native people, the *Maori*. The relationship of these two groups started upon signing of *Treaty of Waitangi* between Queen Victoria and indigenous Maori people. (Shaw & Deed, Health & Environment in Aotearoa/ New Zeland, 2010). This became the foundation of Maori health acknowledging the principles of Partnership, Participation and Protection. (The Treaty of Waitangi , 2005).

In providing healthcare services to Maori people, it is important to involve their whanau in formulating plan of care and refer them specifically to the Maori health team to address the language barrier which proved to be one of the reasons why they are hesitant to consult their health concerns to the a

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non-Maori health practitioner. Maori and Pacific group practise bed sharing room when raising their children because they believe that it is a way of building strong relationship and protecting their child on emergency situation such as SIDS (Sudden Infant Death Syndrome). In contrast, Western people do not agree on this belief and for them independence and autonomy are the best outcome of having an individualised room.

1. 4 Political

In New Zealand, the healthcare delivery system is made up of numbers of policies and legislations that promotes quality care for all its population. Its government provides strategies to have a better health status for Maori and Non-Maori people living in the country. These includes New Zealand Health Strategy (NZHS) and New Zealand Disability Strategy (NZDS). The aims of these organizations are to decrease inequalities among its residents and communities and to improve coordination in both public and private sectors. (Statutory Framework, 2011)

The New Zealand Health and Disability Strategy focuses on the primary health care which covers both promotion and prevention of the occurrence of diseases. For instance, Ministry of Health conducted campaign regarding smoking cessation and the government projected that by the year 2025, there will be no cases of smoking in the country. Preventive measures are also given to the public by means of providing support groups, counselling and reading materials. Furthermore, during the 1990, the government promulgated the Smoke-free Environments Act in New Zealand. (Smoke-free Environments Act, 2005).

1. 5 Religious

Maori view of good health is associated with their spiritual beliefs (wairuataga). When someone is ill, they conduct a ritual performed by tohunga also known as shamans or priests. (Shaw & Deed, Health & Environment in Aotearoa/ New Zeland, 2010). Same with Muslim people, they also believe that “ Allah” is the one who decide on their health condition and the great healer of their sickness.

Catholic group believe that genital mutilation is essential for male individual just like what Jesus Christ did in the past. In United States of America, 6 to 7 out of 10 new born babies are circumcised depending on the spiritual and cultural orientation of the family. According to this group, this procedure can lower the cases of diseases like meatitis (inflammation of the opening of the penis), urinary tract infection and sexually transmitted illness. (Circumcision: Medical Pros and Cons, 2012). On the other hand, European people generally do not engage themselves on circumcision because they believe of it is of no significance, scientifically and spiritually. Jehovah’s Witness people refuse blood transfusion because they believe that receiving blood is prohibited since it was scripted in the bible.

1. 6 Values and Ethics

According to Universal Declaration of Human Rights, Article 25, everyone has the right to a standard of living adequate for the health and well-being of himself and his family including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old-age or other lack of

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livelihood in circumstances beyond his control. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same protection. (Preamble, 2013).

In view of the above, there are numbers of legislations that support the right of each individual in the access of healthcare services available in New Zealand. For example, the New Zealand Public Health and Disability Act 2000 (PHDA) provides a clear framework in improving, promoting and protecting health and well-being of its people. This law is further supported by the New Zealand Bill of Rights Act 1990 and Human Rights Act 1993 that deals with the discrimination of both public and private sectors. (Human Rights Legislation, 2008).

Ethical values of these rights pertain to the individual equality that makes every people of New Zealand satisfied in regards to the healthcare services. There are studies of health that gender may contribute to the understanding of the factors and outcomes of inequalities. For instance, there are special needs for both men and women during treatment and rehabilitation after surgery or disability. (Shaw, White, & Deed, Health, Wellbeing & Environment in Aotearoa New Zealand, 2013).

1. 7 Traditions

Maori people believe on a traditional way of maintaining a good health and preventing illness. This holistic approach is called *Te Whara Tapa Wha* which ensures balance of four (4) important aspects of their health; the Te taha wairau (spiritual), Tet aha hinengaro (mind), Te taha tinana (physical) and Tet aha whanau (family). (Shaw & Deed, Health & Environment in Aotearoa/
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New Zealand, 2010). This native people also practise the traditional way of healing through massage (Mirimiri) and herbal treatment (Rongoa). These group also believe that natural environment like forest has a therapeutic effect on their well-being. In addition, Asian countries like China and Philippines also believe in traditional healers and use medicinal plants in treating sickness.

2. Attitudinal determinants: Public attitudes

2. 1 Concepts of health

Public health refers to systematic measures to prevent disease, promotion of health, and prolonging life among the entire population. The public concept of what illness is the way people perceive their symptom is largely influenced by his or her cultural background which in turn influence how the person reacts.

According to World Health Organisation, health is a state of complete physical, mental and social well- being and not merely the absence of disease or infirmity. (WHO definition of Health , 2003).

As defined by Oxford English Dictionary, it is the state of being free from sickness, injury, disease, bodily conditions; indicating good bodily condition. (Definition and concepts of health, n. d.).

In the view of Rene Dubos, health is the state of health or disease are the expressions of the success or failure experienced by the organism in its efforts to respond adaptively to environmental changes. (Health , 2004).

2. 2 Concepts of illness

The Public Concept of Illness

There are two factors that determine the attitude of public towards illness; socio economic factor and cultural factor, these factors play an integral role in how a certain person reacts to his health condition. According to the World Health Organization socio economic status can greatly affect the quality of life, people living in a low socio economic quality leads to poor health practices of the people and access to quality health services is limited. Cultural beliefs are believed to be vital for people's well-being and dignity and cultural beliefs dictate the vast majority of our effort to maintain our state of total well-being.

According to Susser, illness is a subjective sense of feeling unwell; illness does not define a specific pathology but refers to person's subjective experience of it such as discomfort, tiredness and/or general malaise. (Illness, Sickness and Disease, n. d.).

As described by Kozier, it is a highly personal state in which the person's physical, emotional, intellectual, social, developmental and spiritual functioning is thought to be diminished. (Kozier, Erb, Glenora, Berman, & Snyder, 2004).

2. 3 The importance the public put on health

Most people think that promoting health and wellness is better than curing disease. In achieving the quality of life, most New Zealanders choose to live a healthy lifestyle by eating nutritious food, adequate exercise and a work-
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life balance. Through this, the impact of the media and technology has influenced the importance of maintaining a better life. (Shaw & Deed, Health & Environment in Aotearoa/ New Zealand, 2010).

Presently, people do not encourage artificial way of food consumption such as microwavable, processed and commercialised food because they are now into natural and organic process. Although, organic food is more expensive than ordinary food but the nutritional value is more likely. In addition, people engage themselves on active campaigns such as marathon, walkathon, swimming and cycling that help them to remain fit and healthy.

2. 4 Public attitudes towards health and medical professionals

Generally, medical professionals are treated with respect and regarded highly by the public. They are looked up to and considered lifesavers.

With the Ministry of Health's goal to extend and improve the New Zealander's quality of life, awareness on health and health care delivery system is increased, causing the people (Maori and Pakeha alike) to demand more of the health care services. However, there are still disparities in the attitudes of the Maori and Non-Maori, as well as in their health. This represent the fact that Maori health rights are not being protected as guaranteed under the treaty and that the social, cultural, economic and political factors indicate a widening gap between Maori and non-Maori (Ellison-Loschmann, 2006).

Maori still have apprehensions in getting medical consultation or health care services because of their culture and traditions and health illiteracy. They

still view health problems in the spiritual realm as punishments for their sins. Some of them don't understand that these are consequences of bad health habits. They are also adamant to get health care services from Maori health workers. However, as the importance of health is promoted by the government, the gap between the attitudes of the Maori and non-Maori may be closed soon.

3. The influence of International health policy on healthcare of New Zealand

Globally the demand for attention in certain areas in health care necessitates the formulation of international health policy; the creation of Millennium Development Goals (MDG) primarily aims for logical global health policy. Global decision makers can greatly influence and shape how New Zealand prioritizes the needs of reform or how to address particular health problem of the community. (UNDP, 2013).

Millennium Development Goals has been created to create has eight key areas 1. Eradication of extreme poverty and hunger, 2. Achieve universal primary education, 3. Promote gender equality and empower women, 4. Reduce child mortality, 5. Improve maternal health, 6. Combat HIV/AIDS, Malaria and other diseases, 7. Ensure environmental sustainability, 8. Develop a global partnership for development. The influence of international health policy to New Zealand health sector is evident through its policy prescriptions on the above mentioned eight (8) key areas. Goal number 8 sets objectives to the developed countries like New Zealand to extend relief to underdeveloped countries. (Parliament, 2011).

According to New Zealand Parliament over half of New Zealand's official development assistance (ODA) goes to the pacific region, approximately 71% of the 2011/2012 country programme expenditure is allocated to eight countries: Solomon Islands, Papua New Guinea, Indonesia, Vanuatu, Tonga, Cook Islands, Tokelau and Samoa.

The participation of New Zealand in achieving MDG number 8 by extending aide to the Pacific region illustrate that New Zealand has contributed in achieving best possible health to its neighbouring countries.