Our health and disability system Hauora Māori

Our health and disability system has underperformed for Māori for too long – life expectancy is seven years less than for Pākehā and twice as many Māori deaths as Pākehā are potentially avoidable.

These reforms are designed to give Māori rangatiratanga over hauora Māori and greater influence throughout the system. This is not only because it is central to Te Tiriti o Waitangi, but also to ensure everyone has the same access to good health outcomes.

What's changing?

The Ministry of Health and each of our 20 District Health Boards (DHBs) currently share responsibility for ensuring equity for Māori. In the future, it will remain the responsibility of all organisations to improve Māori health outcomes, with significant changes to ensure that this is embedded and driven through the system:

- a new, autonomous Māori Health Authority will be responsible for ensuring the health system is performing for Māori through:
 - partnering with the Ministry to advise Ministers on hauora Māori
 - directly funding innovative health services targeted at Māori (including kaupapa Māori services)
 - working with Health New Zealand to plan and monitor the delivery of all health services
- Iwi-Māori Partnership Boards, which currently work with DHBs, will have an explicit, formal role – including agreeing local priorities with Health NZ
- Health NZ will be responsible for improving Māori health outcomes and equity through all of its operational functions at national, regional and local levels
- the Ministry of Health will continue to monitor how the system is delivering for Māori overall, partnering with the Māori Health Authority.

Why?

Reforms to date have been unable to address inequitable health outcomes for Māori. These reforms will empower Māori to design systems and health interventions which work for Māori.

There have been some excellent initiatives emerging out of the current system – such as the 2020 Māori adult influenza vaccination campaign, and strong iwi partnerships in some parts of the country – but they are not the result of a coherent, New Zealand-wide approach to system performance for Māori.

What will it look like in future?

The Māori Health Authority will work with Iwi-Māori Partnership Boards, Māori health providers, iwi, hapū and Māori communities to understand Māori health needs across New Zealand. This will help strengthen kaupapa Māori services, build a stronger Māori workforce and provider network, as well as foster innovation in services and models that deliver better outcomes for Māori.

In each locality, partnerships between lwi-Māori Partnership Boards, Health NZ commissioners and the wider community will ensure Māori voices are heard, and that health equity for Māori is non-negotiable.

The partnership between the Māori Health Authority and Health NZ will invest in services grounded in te ao Māori and ensure the wider health system is responsive to Māori need, alongside that of the wider population.

When new services are commissioned or existing services are reviewed, the Māori Health Authority will work with Health NZ to make sure service design and priorities reflect diverse needs. When services are not performing for Māori, the Māori Health Authority will intervene to build provider capability and make services more inclusive.

Alongside the Ministry of Health, the Māori Health Authority will work to build a strategy and direction for the health system, ensuring that Te Tiriti o Waitangi continues to steer approaches to hauora.

What's next?

For the Māori Health Authority to drive rangatiratanga for Māori in our health system, Māori will need to be deeply involved in its design.

Over coming months, the government will work with Māori on the design of the Māori Health Authority alongside a range of other features of our future health system, such as how lwi-Māori Partnership Boards are established, operate, and define their rohe.

An interim Māori Health Authority will be set up as a departmental agency within the Ministry of Health by the end of 2021. At the same time, the government will accelerate developing the locality model of primary and community care in certain areas, some of which will take an approach centred on kaupapa Māori care.

Want to know more?

Further information about the work and progress of the health reforms is available on the DPMC website under the work of the Transition Unit:

www.dpmc.govt.nz/our-business-units/transition-unit.