

New Zealand's approach to addressing health inequalities for access to medicines.

Te Whaioranga – PHARMAC Māori Responsiveness Strategy

He aha ai – Why did PHARMAC develop this strategy

The founding constitutional document of New Zealand - The Treaty of Waitangi outlines the special relationship between Māori and the Crown and the obligation to ensure that Māori people are supported to achieve their maximum health and wellbeing

Māori health is a New Zealand health priority area and PHARMAC's Māori Responsiveness Strategy outlines how PHARMAC will contribute to this.

How did we develop the Māori Responsiveness Strategy

1. Identify the problem
2. Understand the wider sector policy frameworks
3. Conduct an analysis of existing internal accountability documents / frameworks and understanding by the Board, Senior Managers and all staff of Māori health issues
4. Draft a consultation document
5. Conduct extensive community based consultation with participation by all PHARMAC staff, Board members and Senior Managers
6. Publish the strategy and review progress annually

What is the extent of the problem?

PHARMAC has been concerned for some time that the benefits of subsidised pharmaceuticals are not reaching Māori at the same rates as other New Zealanders. The following table provides an insight into where the gaps lie in relation to medication use of the Māori population for nationally subsidised medicines. This graph has been adjusted for age and burden of disease (Disability Adjusted Life Years – DALYs) relevant to New Zealand's Pharmaceutical Schedule.

The graph indicates large deficits in use of medication by the Māori population for antibacterials (antibiotics) and cardiovascular medications such as lipid modifying agents. There are small areas where excess use of medicines by the Māori population occurs: Anti-Parkinson agents, Alpha Adrenoceptor Blockers and other musculoskeletal medications.

Figure 3:

Gaps in Māori use of medicines, after adjusting for age and burden of disease (need) relevant to the Pharmaceutical Schedule

deficits (+) or excess (-) in Rx uptake (no. scripts) by Māori, adjusted for age and relative disease burden (DALY loss)



Māori Responsiveness Strategy: A Summary

The 2002 Māori Responsiveness Strategy had six strategic goals:

1. Incorporate Māori strategic priorities.
2. Improve human resources.
3. Improve ethnicity data collection and analysis.
4. Improve our performance in negotiating with suppliers and assessing new drug applications.
5. Improve our performance in informing Māori about available subsidised medicines.
6. Improve Māori representation and participation.

These goals have been updated taking into account the progress PHARMAC has made in relation to Māori Health.

The 2007 – 2012 goals build from the original 2002 goals, they are:

1. Integrate Māori strategic priorities.
2. Enhance internal PHARMAC capability in relation to Māori Health issues.
3. Improve the quality of data analysis in relation to Māori Health.
4. Prioritise Māori health priority areas in Funding & Procurement.
5. Advance Optimal Use of Medicines for Māori.
6. Ensure significant Māori representation and participation within PHARMAC.

PHARMAC Vision, Mission and Values

The PHARMAC vision is Leading Edge Medicines Management, the Te Whaioranga goal in relation to the vision is; Māori have the right to the right medicine, at the right time, for the right price and with the right information to understand how to use medicines.

Access and Optimal Use
Te Whaioranga | The Pathway to Wellbeing

Te Kāwanatanga o Aotearoa

PHARMAC
Pharmaceutical Management Agency

