



Cultural Competence, Partnership and Health Equity

Symposium

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Protecting the public, promoting good medical practice
Te taiki i te iwi whānui me te whakatairanga pai i te mahi e pā ana ki te taha rongoā

Cultural competence, partnership and health equity strategic direction

Medical regulators, colleges and employers have a responsibility to support doctors in the further development of a culturally competent workforce contributing to cultural safety

Cultural understanding is essential for optimising health outcomes



A partnership: Council and Te Ohu Rata o Aotearoa (Te ORA)

Improving cultural competence and creating culturally safe environments for both patients and doctors

Key outcome: To reduce health inequity and improve the health outcomes for Māori, through Council's role as the medical regulator responsible for professional standards and ensuring the competence of doctors



AMC Standards

- Newly revised Standards for College Accreditation
- Five specific to Cultural competence

Standard	Requirement refers to:
Standard 1	Leadership & Effective partnerships with indigenous health organizations
Standard 2	Purpose of the College addresses indigenous health needs
Standard 3	Curriculum develops understanding of history & culture and interface with health needs
Standard 7	Support for indigenous trainees
Standard 8	Training sites



History: Why culture matters

- There is little formal record of pre-contact health
- Illness & wellness were governed by spirituality – important concepts that continue today



Buckley, H et al (2009). The People of Wairau Bar: a Re-examination. Journal Of Pacific Archaeology, 1(1), 1-20.



Causes of Ethnic Health Disparities in NZ

- Land loss & resource loss
- Environmental degradation
- Economic disparity
- Institutional Racism
- Health system design / barriers
- Biological / genetic vulnerabilities

Kearns et al. 2009, Harris et al. 2011, Jatrana 2011, Hollis-Moffatt, 2009.

Programme Goals

- Strengthen cultural competence, including understanding the role and responsibility of the profession in identifying the causes of, and possible solutions to, health inequity
- Increase understanding of cultural influences on health, in order to improve health outcomes
- Improve cultural safety for patients
- Improve the support and cultural safety for those members of the profession who identify as Māori



Key programme outcomes

To reduce the health inequities that exist between Māori and Pākehā populations, to improve the health outcomes of Māori. Outcomes contributing to this are improved:

- Understanding that cultural identity influences health and Improved understanding of the causes of health inequities
- Cultural safety for patients and practitioners
- Number of Māori doctors enter and complete vocational training
- Māori representation & effective participation, in governance and decision making
- Recognition and support for Māori doctors who experience additional demands as a result of their cultural identity
- Clarity on the required standards of cultural competence
- Coordination with the universities.



Key Deliverables

- Cultural competence framework for use in:
 - Recertification
 - Accreditation
 - Induction & supervision of IMGs
- Framework for supporting Māori doctors throughout their career
- Strengthened partnerships with Māori communities and organisations through support for doctors and health organisations



Summary

- Regulation, Inequity and Cultural Competence are inter-twined
- It is not Political Correctness run amuck
- Understanding is the foundation of evidence-based practice
 - Where an indigenous population exists, it is imperative we succeed
- Inequity is something we should work to eliminate
- Regulators and Colleges cannot solve all the causes, nor raise all the statistics, but we have a responsibility to do those things over which we have some control or influence
- Partnership is essential
- What we should achieve will help other cultures and other countries

