

Deteriorating health care in New Zealand

A correspondent
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One in every four New Zealanders is going without medical care because of financial reasons, according to an international survey released last week.

The survey was carried out by Harvard University for the Commonwealth Fund, a New York-based organisation that researches health and other social issues. It is one of two reports that have compared recent developments in the health systems of five countries--New Zealand, Australia, Canada, Britain and the United States.

The survey establishes that the restructuring program carried out under New Zealand governments, both Labour and National Party, since 1984 has led to a significant deterioration in health standards among working and middle class people. For years these reforms have been held up internationally as a 'model' of public sector restructuring.

The Commonwealth Fund's findings reveal that:

- * New Zealanders have the highest levels of anxiety about health services of any of the countries surveyed. Forty-two percent of the population fear they will not be able to afford medical care in the event of illness, 38 percent believe they will not be able to get advanced care if they become seriously ill, 50 percent worry they will not be able to pay for long-term care for a spouse or relative, and 38 percent are concerned they will be forced to wait too long for non-emergency care.

- * Health spending in New Zealand for each person is less than a third of that in the United States, where health charges are five times the median for OECD countries.

- * The country's expenditure per head on health was \$1,352 in 1997, 23 per cent less than the OECD average.

- * The country's declining health statistics highlight the effects of government cuts to health funding. New Zealand has the second-highest infant mortality rate (7.4 deaths per 1,000 live births), more than twice that of Japan. It has the shortest average hospital stay at 6.5 days--reflecting a deliberate policy of accelerating patient turn-around as a cost-saving measure. It also has the lowest per capita spending on pharmaceuticals.

New Zealand Health Minister Bill English dismissed the concerns highlighted in the surveys, saying that New Zealanders' perceptions of their health system were 'not

matched by reality'. While admitting that the national health service is 'relatively cheap,' he claimed that confidence would not be restored by 'vague promises of more money,' but by making sure the system was managed 'efficiently'.

The fact is that successive funding cuts to public health since 1984 have led to a national crisis. According to Alister Scott of the Coalition for Public Health, access to healthcare in New Zealand is among the worst in the developed countries. A two-tier health system has emerged, with an expensive and increasingly exclusive private system catering for the wealthy who can afford their own medical insurance, alongside an underfunded and inadequate public system for the mass of the population.

New Zealand is now in the forefront of international discussions about the rationing of health expenditure. Last month two spokesmen representing the health authorities gave a keynote lecture to a London conference about the case of a patient who, 12 months ago, was given a death sentence because of financial constraints in the health system.

The case, well known in New Zealand, concerned a middle-aged Maori worker, Rau Williams, who was refused dialysis treatment by health administrators in Northland, one of the most economically depressed areas of the country, after kidney failure. At the time, the authorities claimed that the decision to deny life-saving treatment was based on clinical reasons to do with Mr. Williams' medical complications, including diabetes and mild dementia.

However, the family refused to accept these excuses and took the Whangarei Hospital to court. A number of health experts supported the family's position, saying that the complications should have made no difference to the matter of the dialysis. The family claimed that Whangarei Hospital had simply decided that the medical complications made him too expensive to keep alive.

As the issue was fought out in the court, people throughout the country witnessed Rau Williams' health slowly deteriorating over a two-week period. In the end, the court refused to intervene in the hospital's decision, the dialysis was refused, and Rau Williams died.

The case has been one of many over the recent period that

have led working people to the conclusion that the public health system cannot be relied upon to serve their needs. Waiting lists for surgery have grown and the closure of rural hospitals, against a wave of popular opposition, has put many services beyond the reach of those living in smaller centres.

A number of regional health administrations are in the red and cutting back on staff and services. Currently, the authority which administers public health in the Wairarapa region, north of the capital Wellington, is planning to cut nursing and clinical staff by 50 percent. Meanwhile, Capital Coast Health, responsible for health in the Wellington region, is considering a proposal to close down its run-down major hospital near the central city and relocating, with reduced services, to a smaller secondary hospital in the outer suburbs.

The response of the current National Party government to the impact of the international economic crisis has had a major impact on the health sector. One of the first decisions after the breakup of the National- NZ First coalition earlier this year was to rescind a previous promise to do away with asset testing for those people requiring long-term care.

Elderly people, and sometimes their partners as well, are quickly stripped of all their life savings should they need institutional care. In another well-known case, the Northland Health authorities pursued a claim for a 'debt' of \$58,000 against an elderly pensioner to recover the costs of care for his wife, who had Alzheimer's Disease. Legal proceedings continued even after her subsequent death. Public outrage against this case was so great that demonstrations were held in the region against the local health authority.

Full pharmaceutical expenses are now increasingly being passed over to patients. The government is presently considering discontinuing the funding subsidies for drugs used to deal with 'lifestyle' problems. While initially aimed at the recent appearance on the market of Viagra and the weight loss drug Xenical, the discussion has extended to medication for hypertension. Tens of thousands of people are faced with the possibility of being forced to pay for the total costs of their expensive daily drugs required to control high blood pressure.

Those worst affected by the deterioration of the public health system and rising health costs have been the working class. A new report has identified a widespread problem with infants and pre-school children being sent to hospitals in increasing numbers with severely rotting teeth. Dental specialists have said that while such decay is preventable, many children have mouths so diseased as to require extensive surgery under general anesthetic to have teeth repaired or removed.

The number of such patients referred to Starship Children's

Hospital in Auckland for general anesthetic operations has doubled in the past six years, from 400 in 1991 to 800 last year. Specialists involved in preparing the report have called this an 'appalling countrywide problem,' mainly affecting Maori and Pacific Island children from poor areas.

Over the past five years, the school dental service has been severely depleted. At one time, children were enrolled with the service at two-and-a-half years of age, at which point parents would receive advice from a national dental nurse service about how to help their children care for their teeth.

Such dental health education no longer receives any funding. In addition, the number of dental therapists working in primary schools has almost halved in the past eight years, resulting in increasing numbers of primary and secondary school students also requiring large amounts of dental work.

However, worse is to come. Another report leaked in the past week has revealed that the National Party government is considering removing subsidies on dental care for secondary school students as well. Free dental care for these students, which has been in place since 1947, is now likely to disappear precisely when levels of oral hygiene among teenagers is worsening.

All of the major political parties are responsible for the deterioration of public health services in New Zealand. Their contempt for the impact on working people was expressed most graphically by the right-wing Association of Consumers and Taxpayers (ACT) party, which is a defacto coalition partner with the National Party. ACT spokeswoman Muriel Newman dismissed the worsening dental statistics out of hand by blaming parents for buying fizzy drinks for their children instead of toothpaste.

See Also:

TB outbreak in New Zealand school
[9 September 1998]



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