HAUORA | Health Policy

We look at issues in a holistic way, acknowledging that all aspects of life – housing, jobs, health and education are inter-related and connected. We want what whānau want – to achieve total wellbeing.

The Māori Party will:

Community services

 ✓ **Introduce free** GP visits and dental care (including after hours and weekends) for those under 18 years of age.

 ✓ **Remove** the $5 prescription charge for low income whānau and fully subsidise all prescriptions for over 65 year olds and under 18 years of age.

 ✓ **Introduce free** prescription glasses and hearing aids for low income whānau in need

 ✓ **Introduce free** annual medical and dental visit for over 55.

 ✓ **Increase** in the number of mobile health clinics in rural communities.
Resurrect the Drinking Water Supply Fund, and delegate Te Puni Kōkiri to support 63 rural, isolated Māori communities to gain access to a drinkable water supply.

Increase in kaupapa Māori services:
- Drug and alcohol residential treatment centres and community-based programmes.
- Mental health residential centres and community-based programmes.
- Community-led based birthing centres, antenatal, maternity and postnatal care services and programmes.
- Hospice facilities, homecare services and programmes to support terminally ill patients and their whānau.

Explore the rollout of IMOKO nationwide.

Screen for gout and uric acid tests when assessing for other conditions such as diabetes and heart disease amongst Māori and Pacific communities.

Secure the status of rongoā and other natural health products.

Government investment

Establish a new Māori and Pacific social investment fund managed by the Māori Pasifika Health Commissioning Unit, funded through a mix of Government direct investment, reprioritisation of poor existing expenditure within Ministry of Health. And the potential establishment of a Social Investment Bank (as established in the UK) as well as the social impact Investor market and philanthropy funds.

Expand investment in Whānau Ora Commissioning Agencies and working alongside the newly established Social Investment Agency to identify and invest in the development of new industry intermediary entities (potentially
established iwi groups, scaled Māori NGO/Private sector entities) that evidence their ability to work with target cohorts of population, coordinate service/intervention design, procure services and measure outcomes.

- **Direct** Pharmac to explicitly seek to address the disparity in health outcomes for Māori and Pasifika when funding decisions are made.

- **Ensure** Māori and Pasifika are actively positioned to take advantage of industry advances in health and social sector technologies, through the Equity Accord not just as end users - but as developers also. This includes all emergent technologies that directly impact on positive outcomes for Māori and Pacific communities – new treatment modalities, information/digital health technologies, new licensing arrangements for new pharmaceuticals and treatments including medical marijuana, smoking cessation technologies, biotechnology advances including genetics and technologies specific to DNA and other emergent social technologies.

**Sexual violence**

- **Provide** more funding for specialist services, treatment and support for those affected by sexual violence and abuse.

- **Provide** more funding to frontline services such as Women's Refuge to address the increasing demand for family violence services

**Rheumatic fever**

- **Initiate** a door-knocking campaign to educate aiga Pacific on the causes of rheumatic fever and other skin diseases.
✓ Increase the investment in the prevention of rheumatic fever such as insulating low income homes, ensuring Housing New Zealand homes have a bach or extra rooms to address over-crowding.

✓ Subsidise power bills by 50% for households whose members have rheumatic fever.

Suicide

✓ Resource whānau to be equipped to work together and develop their own solutions to suicide in both prevention, post-vention and health promotion approaches (Waka Hourua Māori and Pasifika suicide prevention).

✓ Resource and implement the Turamarama Declaration.

✓ Expand Oranga Rangatahi – the Rangatahi Suicide Prevention Strategy

✓ Lower the threshold to access appropriate support for individuals experiencing distress.

P and other harmful substances

✓ Review the effectiveness of support services, education strategies, rehabilitation and communication strategies related to methamphetamine.

✓ Develop a national strategy that is whānau-centred and community-led to get beneath the drivers of P and address the wider determinants of health disparities.

✓ Increase the resources appropriated for P prevention, rehabilitation and education.
✓ **Obliterate** all synthetic cannabis and other psychoactive substances from our communities.

✓ **Increase** the numbers of respite care beds for P addicts in kaupapa-led A and D facilities.

✓ **Invest** in whānau-focused alcohol and drug addiction, recovery and restoration programmes and services including in prisons.

✓ **Establish a moratorium** on new liquor outlets and gaming machines in the community.

**Healthy kai**

✓ **Remove** GST off fresh fruit, fresh vegetables and milk.

✓ **Introduce** labels on drinks and processed foods that have the number of teaspoons of sugar they contain, clearly marked in large print.

**Tobacco**

✓ **Introduce** legislation prohibiting smoking in cars while children are passengers by the end of 2019.

✓ **Reduce** the supply and import of tobacco products commensurate with the decrease in demand for those tobacco products.

✓ **Limit** a number of licenced vendors who sell tobacco products and limit supply to them of low tar only tobacco products by 2020.

✓ **Create** a new licencing programme for vendors who sell tobacco products, based on the current liquor licencing rules.
✓ **Heavily** subsidise e-cigarettes and other vaping products.

✓ **Increase** the minimum purchase age from 18 to 21 over the next five years

**Disability**

✓ **Enable** *Good Lives* so whānau have more choice, greater control and flexibility over support and funding in their everyday lives.