

Health



"Health is a state of complete mental, physical and social well-being, and not merely the absence of disease or infirmity"

World Health Organisation



As a primary principle the Party believes that everyone is entitled to the best possible health service, that the only criterion should be need, that people who need care should be entitled to it as of right, but that the total service has to be within the limits of the resources of the country. The Party further contends that because resources are finite the care and services available must be spread as equitably as possible.

Many people today find it difficult to get the medical attention they need. An estimated 10 per cent does not have access to a general practitioner. There is an overall shortage of doctors which is made worse by an unequal distribution of general practitioners through the country. Affluent suburbia is comparatively well doctored. Medical centres and group practices continue to appear while the poorer working class suburbs and rural areas struggle on with too few practitioners.

Hospitals are often large impersonal places. Waiting lists for operations and chronic sick beds continue to grow. In the last 25 years the standard of New Zealand's health services has fallen from second or third to fifteenth out of sixteen western countries. Prospects for a better future are obscured by a Government White Paper which projects a solution based on bureaucratic centralism and health service, remote control.

New Zealand must train more doctors, and improve conditions for them so that fewer emigrate. What New Zealand must not do is import doctors from countries poorer than ourselves who need them more than we do.

How can we encourage doctors to work in the unpopular areas?

Many people assume that extra money will solve the problem, but already general practitioners in Porirua are some of the most highly paid in the country. Yet Porirua still has a shortage of doctors. Practitioners tend to shy away from the under-doctored areas because they inevitably mean overwork. They are also less attractive places in which to live, and doctors may be isolated from their colleagues and from post-graduate education.

Different solutions may be needed in different places. Extra para-medical services, improved equipment, better organised working hours would all help.

Under a decentralised health service, individual communities could design a service to suit themselves.

Wealthy people get easier access to private hospitals, bypassing the public waiting lists. (Private medical insurance schemes expect to sign up about half the population within the next few years.) Private hospitals deflect the energies of consultants away from their public duties, and they also remove the pressure from the rich and influential people to work for improvement of the public system.

The Values Party would

- Institute a socially responsible community health service and phase in a system where medical and para-medical practitioners are employed by each health authority. Each community could decide how it would pay its doctors.
- Increase the number of doctors trained, by establishing pre-clinical schools at Wellington and Christchurch.
- Improve conditions of service in areas of greatest need, to encourage doctors to practise there.
- Aim to improve the public hospital system and phase out the need for private hospitals.
- Improve general work conditions for doctors, for example, hospital doctors to work a basic forty hour week.
- Guarantee all general practitioners at least one month's holiday a year and one month's postgraduate training.
- Encourage the development of group practices and health centres with subsidised ancillary staff.
- Support community-based health services, especially the following:
 - low rise community or district hospitals to cater for the majority of surgical and medical cases from the area. These would be community facilities and would provide special supportive services for relatives of patients;
 - community care centres [such as sheltered housing] for dependent persons [such as psychiatric out-patients and the frail elderly];
 - a focus for services such as family planning, ante and post natal care, perhaps based at health centres.

Prevention is better than cure

New Zealand must have a health service and not just a disease service. To a large extent infectious diseases have now been conquered, and the diseases we face today are the diseases of civilisation such as heart disease, diabetes, and environmentally induced diseases. A stable society would be healthier in all these respects. The slower pace of life, the control of pollution, and the regeneration of community would all tend to reduce the incidence of the diseases of stress.

Prevention is also cheaper than cure. A dollar spent on health education can save hundreds of dollars in hospitals.

The Values Party would

- Institute an immediate and massive health education programme.
- Introduce a programme to ensure adequate standards of industrial safety and health.
- Improve the quality of water resources by encouraging further reticulation, monitoring and tightly controlling pollution, and giving subsidies to local authorities to expand and upgrade sewage treatment facilities.
- Establish a network of community health centres. These would include child health clinics for infant and pre-school children. [In such clinics advice on infant care would be given to the mother on infants' growth and general development checked and recorded. Parents would also receive advice on family planning and contraceptive techniques. The Values Party would make contraceptive aids free of charge to the patient, and the contraceptive pill could be provided by nurses without a doctor's prescription. This would make it easier for a woman to get contraceptives and save doctors unnecessary work.
- Establish health clinics in schools along the lines of the present school dental clinics. These would be staffed by school medical officers, and community nurses. Each child would be seen at regular intervals, for periodic health screening - including visual and hearing tests; the detection, investigation and supervision of handicapped children; health education [including contraception and venereal disease]; the control of infectious diseases; and special inquiries in health, development and nutrition.

We recognise there are limits to the amount that can be spent on health.

A health service is very expensive. Demands for money for health are increasing rapidly as more elaborate technologies are developed. In addition, much of society's sickness produces symptoms in individuals who then request medical assistance. Not all these expectations can be met. There are limits to the proportion of society's wealth which should be spent upon health. The problem is how to apply these limits. In a finite world, where the demands are infinite, how should we decide our priorities?

As a general principle, the Values Party believes that decisions are best made at the lowest possible level. Decisions made by large centralised bureaucratic bodies cannot take into account every individual case. We therefore believe that priorities should be worked out by members of the health professions together with the public at a regional level.

The Values Party believes

- Members of the health professions and members of the public should debate what the objectives of a health service should be, and how to measure them.
- Money should be channeled to the regional health authorities in proportion to the population of the region and in accordance with the special needs of the region.
- A department of health economics would advise each region on how best to meet its stated objectives with the limited funds available.