

6 January 2025

James Meager
Chair, Justice Committee
Parliament Buildings
Wellington

By email to: TreatyPrinciples@parliament.govt.nz

Tēnā koe James,

The Council of Medical Colleges is the collective voice for eighteen medical colleges in Aotearoa New Zealand. Medical colleges are not-for-profit educational bodies responsible for the training, examination and recertification of medical practitioners. Our member colleges provide support to over 9000 specialist medical practitioners working in a range of disciplines in the Aotearoa New Zealand health system. The Council of Medical Colleges informs and advise key health sector groups, including Ministers, government agencies, and other relevant bodies on health sector issues. The following represents the majority view of the colleges.

Position

The Council of Medical Colleges is strongly opposed to the Principles of the Treaty of Waitangi Bill. The proposed legislation risks undermining the Crown's obligations under Te Tiriti o Waitangi, significantly harming efforts to address persistent health inequities, particularly those experienced by Māori. As a peak body, we are committed to equitable and culturally safe healthcare for all, and we stand firmly as allies of Te Tiriti principles.

As leaders in specialist medical training and professional standards, our member colleges are committed to upholding Te Tiriti principles by embedding cultural safety in training, examination and recertification, advocating for equitable access to specialist care for Māori and underserved populations, and advocating for a future medical workforce which represents the communities it serves. The Principles of the Treaty of Waitangi Bill directly threatens these efforts, impacting critical progress toward health equity in Aotearoa.

The Council of Medical Colleges joins OraTaiao: Aotearoa NZ Climate & Health Council, other health associations and health unions¹, 42 King's Counsel, and the Waitangi Tribunal in opposing this Bill. The Council of Medical Colleges agrees with the Ministry of Justice's advice that the policy to be given effect by the Bill is inconsistent with Te Tiriti o Waitangi.

¹ OraTaiao. 19 November 2024. Press release: Health Sector United in Opposition to the Treaty Principles Bill. Available at: <https://www.scoop.co.nz/stories/GE2411/S00063/health-sector-united-in-opposition-to-the-treaty-principles-bill.htm>

Australasian College for Emergency Medicine (ACEM)	College of Intensive Care Medicine of Australia and New Zealand (CICM)	New Zealand College of Sexual and Reproductive Health (NZCSRH)	Royal Australasian College of Medical Administrators (RACMA)	Royal Australian and New Zealand College of Obstetricians and Gynecologists (RANZCOG)	Royal College of Pathologists of Australasia (RCPA)
Australasian College of Sport and Exercise Physicians (ACSEP)	New Zealand College of Musculoskeletal Medicine (NZCMM)	Royal Australasian College of Physicians (RACP)	Royal Australasian College of Surgeons (RACS)	Royal Australian and New Zealand College of Psychiatrists (RANZCP)	Royal New Zealand College of General Practitioners (RNZCGP)
Australian and New Zealand College of Anesthetists (ANZCA)	New Zealand College of Public Health Medicine (NZCPHM)	Royal Australasian College of Dental Surgeons (RACDS)	Royal Australian and New Zealand College of Ophthalmologists (RANZCO)	Royal Australian and New Zealand College of Radiologists (RANZCR)	Royal New Zealand College of Urgent Care (RNZCUC)

Equity Implications

The Bill attempts to rewrite the meaning of Te Tiriti o Waitangi in law, undermining the rights of Māori to equitable, culturally responsive healthcare. It ignores systemic inequities entrenched over generations and impedes the tailored approaches required to achieve equitable outcomes.

The evidence of inequity in Māori health outcomes is overwhelming. Māori experience disproportionately higher rates of morbidity and mortality, exacerbated by systemic barriers to accessing healthcare. For example:

Māori have shorter life expectancies and are more likely to die prematurely from preventable conditions.²

Māori face higher rates of chronic disease, including diabetes, cardiovascular disease, and stroke. They also experience these conditions at a younger age compared to non-Māori.³

Disparities in access to specialist care persist, further compounding inequities in outcomes.⁴

This Bill's conflation of equity with 'preferential treatment' disregards the reality of systemic barriers and perpetuates inequities. It risks regressing progress made to date in advancing Te Tiriti-informed health policies.

Achieving health equity requires a clear commitment to Te Tiriti o Waitangi principles, which obligate the Crown to actively protect Māori health and address disparities. This is not only a legal imperative under the Pae Ora Act 2022 but a moral responsibility aligned with international commitments such as the United Nations Declaration on the Rights of Indigenous Peoples.

Recommendation

The Council of Medical Colleges strongly urges the select committee to take decisive action by recommending to Parliament that the Bill should not be passed.

We are available to give an oral submission to the committee.

Nāku noa, nā



Dr Samantha Murton

Chair

² Ministry of Health. 2024. Health and Independence Report 2023 - Te Pūrongo mō te Hauora me te Tū Motuhake 2023. Wellington: Ministry of Health.

³ Health Quality and Safety Commission. 2019. A window on the quality of Aotearoa New Zealand's health care 2019 – a view on Māori health equity. Wellington: Health Quality & Safety Commission.

⁴ Ibid.

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