

We can create a **better CITY:**

We can reduce inequalities in health for Maori, Pacific peoples and lower socio-economic groups.

by reducing **HEALTH INEQUALITIES**

The facts about health inequalities

While the overall health status of New Zealanders has improved over the years, good health is not shared equally across all groups.

- People with the lowest income have poorer health than people on higher incomes;
- Life expectancy varies significantly depending on socio-economic status;
- 9 year difference in life expectancy at birth for males in the least deprived and the most deprived areas. For women this difference is 6.5 years;
- Socio-economically disadvantaged groups have a higher rate of disability;
- Maori and Pacific peoples have worse health and die younger;
- Maori men and women have the lowest life expectancy in New Zealand. Their life expectancies at birth is almost 10 years less than non-Maori;
- Much of the relatively poor health status of Maori and Pacific peoples is due to poorer socio-economic status. But even when socio-economic status is taken into account, they have worse health;
- Individual behaviours, such as smoking, only partly explain the relationship between poor health and socioeconomic status;
- More socially disadvantaged groups have greater exposure to health risks and poorer access to health services;
- The primary cause of health inequalities are inequalities in the distribution of material resources – income, education, employment and housing.

‘Poverty is the greatest single killer’ (World Health Organisation)

It doesn't have to be this way. We can reduce health inequalities.



Rebuilding Christchurch

We must tackle the social and economic inequalities that underlie health inequalities, and improve access to health services for all.

To reduce health inequalities we need to...

Tackle the root causes

For example, the social, cultural and economic inequalities themselves.

See our other info sheets on:

- child poverty
- food security
- employment
- social capital

Maintain a strong safety net

We need to ensure adequate income support; disability allowance; accident compensation and support services for people with disabilities, chronic illness and mental health illness and their carers.

Connect primary health care and social services

Having access to a range of high quality health and social services is vital to help people cope with illness and disease. Co-location of these services will improve access for some populations groups.

Reduce smoking

Smoking is associated with socioeconomic disadvantage. Tobacco smoking is the major cause of preventable death in Christchurch. We need to expand initiatives such as smoke-free public places.

Increase access to education for young parents

Christchurch has a comparatively high teenage pregnancy rate. Teenage mothers can become trapped in a poverty cycle, which is a key influence of outcomes for children. A Teenage Pregnancy Unit in south Christchurch is a priority.

Promote oral health

Lower socioeconomic children and adults have significantly poorer oral health. Water fluoridation is the most effective tool for the prevention of tooth decay. Other options include fluoride through milks, toothpaste, gels, mouth rinses, tablets and drops.

Support Iwi/Māori initiatives

Māori health status is demonstrably poorer than other New Zealanders. Actions to improve Māori health need to recognise the Treaty of Waitangi and involve Maori in their planning and delivery.

Methodism places a strong emphasis on equality and inclusiveness. We support efforts to eliminate prejudice and discrimination in our organisations as well as in society.

www.mmsi.org.nz/our-views.html

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