

Aide-Mémoire

Meeting with Rural Women New Zealand

Date due to MO:	5 August	Action required by:	N/A
Security level:	IN CONFIDENCE	Health Report number:	H2024044555
To:	Hon Casey Costello, Associate Minister of Health		
Consulted:	Health New Zealand: <input checked="" type="checkbox"/>		

Contact for telephone discussion

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Aide-Mémoire

Title

Date due: 5 August 2024

To: Hon Costello, Associate Minister of Health

Security level: IN CONFIDENCE **Health Report number:** H2024044555

Details of meeting: 7 August 2024
Time: 3.10pm – 3.40pm, Location: 2.054 PH

Purpose of meeting: The meeting with Rural Women New Zealand is to discuss women's health, maternity and seniors in relation to rural health.

Attendees Marie Fitzpatrick, Chief Executive, Rural Women New Zealand
Gill Naylor, National President, Rural Women New Zealand
Sandra Matthews, Board Chair, Rural Women New Zealand
Sharron Davie-Martin, Board member, Rural Women New Zealand
Kelly Conway, Policy advisor, Rural Women New Zealand
Appendix 2 has background information on these attendees.

Comment: **Rural communities**

- One in five New Zealanders live in rural communities. Māori and older people are more likely to live in rural communities than the general population. One in four Māori and one in four people over 65 years live in rural communities.
- Women are around half the overall population in rural communities. Women are more likely to exit rural communities for study and work when young adults. Among the rural population aged 15–29 years, the share of women is 47% of the age group.
- Rural women are often seen as the 'glue' in supporting community needs and caring for children, older people or disabled people that need support.
- Overall, rural communities have poorer health outcomes, including overall mortality, suicide and children's immunisation rates.

Rural Women New Zealand organisation

- Rural Women New Zealand (RWNZ) are a membership-based community organisation that advocates for rural communities, including women and their families, for equity in service access,

and that the different needs of rural communities are considered in decisions.

Priorities

- RWNZ provided their Briefing to Incoming Ministers in December 2023. This was sent to the Minister of Health and forwarded to you as the associate Minister of Health (Attached as Appendix 3).
- RWNZ set out five areas for government action in health, to invest in and maintain access to equitable health care for rural communities. These five are outlined below.
 1. Increased availability of mobile and local health services, and rural health practitioners particularly midwives, nurses and care workers.
 2. Improved accessibility to localised treatment options including initial screening and diagnostics in rural New Zealand.
 3. Establish and maintain network connectivity in rural areas to provide stable and affordable digital access to health and wellbeing services.
 4. Provide increased resources to improve access by rural New Zealanders to education, treatment and support for mental health; disability support workers; drug and alcohol abuse, aged-care and wellbeing services.
 5. Ensure allocation of resources to provide safe, timely and effective maternity care to all mothers regardless of their location.
- In the talking points within Appendix 1, we outline some key areas of work under these five areas.

Women Health Strategy and Rural Health Strategy

- The five areas for health action raised by RWNZ align with the priorities in the Rural Health Strategy, such as improving access from services closer to home, and Women's Health Strategy, such as improving access to pregnancy care and joined up maternity and early years services.
- RWNZ were a key stakeholder in the engagement in the development of the strategies.
- In RWNZ's written submission for the Women's Health Strategy, they identified the following priorities: equity of access to services for rural women compared to urban women, intergenerational health – issues across lifespan and areas that are needs across the different generations such as mental health, workforce capacity and capability, and research funding with focus on women's health conditions and illnesses.

- Feedback on the rural health strategy from RWNZ focussed on equity of access for rural communities and having services closer to home, better supports for mental health wellbeing in rural communities and digital health options.

North Island Weather Events

- In 2023, RWNZ was funded by the Ministry for Primary Industries (MPI) to run community events to rebuild wellbeing and provide pastoral care to some families affected by the events.
- RWNZ published a report of their activities and recommendations for responding to future events. They recommended: learning and sharing what has worked in responses, including previous events, listening to communities around their priorities for recovering, lack of accountability from contractors involved, key need to support trauma and mental health, and community hubs to support a local-led response and build resilience.

Current Government actions

Government Policy Statement on Health

- The *Government Policy Statement on Health 2024–2027* (GPS) has five priority areas of improvement for health care: access, timeliness, quality, workforce and infrastructure. These priorities are key to improving health system performance, including for women's health.
- There are three GPS expectations that specifically relate to women's health.
 - Expand the choice of whānau-centred and holistic maternity and early years' services.
 - Extend breast cancer screening age to 74-year-olds.
 - Increase HPV screening rates with a focus on population groups with lower screening rates.
- There are a number of GPS expectations that can improve rural health outcomes. Some of these are outlined below.
 - Work in partnership with local communities to ensure primary and community care services are increasingly tailored to better respond to people's needs, including family and community-based services.
 - Implement initiatives that support an increased understanding and uptake of online care and telehealth, particularly in primary and community health care settings, and to equip people, families and whānau to better meet their own mental wellbeing needs.

- Improve the transport and accommodation assistance support, particularly for disabled people and people living in rural communities.
- Improve access to domestic training pathways to deliver a culturally competent and home-grown workforce that better reflects the population of New Zealand as a whole.
- Health New Zealand (Health NZ) is currently developing the NZ Health Plan. That will have actions that give effect to these expectations.

Key women's health issues

- The Women's Health Strategy sets out a vision, priorities and direction for women's health to guide the health system over the next 10 years. The Strategy has the following four priority areas.
 - **Priority area 1: A health system that works for women** – this is an overarching priority which sets out ambitions for change across all areas of the health system to achieve healthy futures for women.
 - **Priority area 2: Improving health care for issues specific to women** – this includes a focus on sexual and reproductive health, pelvic and menstrual health, and gynaecological cancers.
 - **Priority area 3: Better outcomes for mothers, whānau and future generations** – this focuses on equitable, early access to pregnancy care and joined up maternity and early years services. This priority is being progressed through the Kahu Taurima (maternity and early years) programme.
 - **Priority area 4: Living well and ageing well** – this is a focus on prevention and early intervention to better manage conditions and life stages, like menopause, as well as how the health system can better respond to the determinants of women's health.
- The top five causes of disease burden for females of all ages (based on Disability Adjusted Life Years) are ischaemic heart disease, low back pain, chronic obstructive pulmonary disease, stroke, and falls¹. However, these vary for different groups of women, such as those older, Māori or Pacific peoples.
- Some health conditions are unique to women, such as endometriosis, cervical and ovarian cancer, and menopause.

¹ Institute for Health Metrics and Evaluation. 2020. Global Burden of Disease Study 2019 (GBD 2019 Life Tables 1950-2019).

Women also experience some health conditions differently to men, such as osteoporosis and certain cancers.

Maternity

- Rural women are disproportionately affected by maternity workforce shortages and the viability of services. Sometimes this sees rural women temporarily relocate to urban areas to give birth with more secure maternity health care.
- A briefing on sustainable rural maternity services was provided to you on 26 July 2024 by Health NZ [HNZ00055018]. This outlined risks for continuity of some current services, including Ngāti Porou Oranga's maternity service at Te Puia Hospital in the Gisborne region.
- The Kahu Taurima programme will strengthen maternity and early years' service delivery by the redesign and integration of care from pre-conception through to a child's first 2,000 days.
- Within the maternity space there are two key workstreams underway:
 - defining the essential components of maternity care (what every pregnant person in New Zealand should be reasonably entitled to, regardless of where they live)
 - defining regional needs and opportunities as they relate to maternity care.
- Once this work is completed, regional service specifications will be designed and modelling will be undertaken to understand workforce and funding requirements.
- This work will also lead to the development of a sustainable universal funding and implementation model for the community maternity workforce and integrated Kahu Taurima service contracts.

Supporting Women to age well

- In the next 20 years, the population of women aged 65 and over are projected to more than double for Māori, Pacific and Asian ethnicities. New Zealand's ageing and diverse population of women will have implications for the health system and the aged care sector.
- While women on average have a longer life expectancy than men, they also on average live a longer part of their lives with a health condition (16.7 years for women and 14.3 years for men).
- Aspects of ageing affect women differently or disproportionately than men.
 - The number of women in New Zealand living with dementia is 20–30% higher than the number of men.

- Osteoporosis is experienced by over half of postmenopausal women over 60 years old, compared to just one in three men over 60 years.
- Women over 65 also experience higher levels of social isolation than men.
- A priority for the health system is to help people stay as healthy as possible, as they get older, while living in their communities.
- For rural communities, having good primary and community health care is vital to support ageing in place, as well as broader services that enable care in the community, including aged residential care.

Aged care

- Older people, usually with higher health needs, will face more barriers to health care when living in rural communities, including with transport to access services or support for taking up digital options, and lack of aged care services or home help supports.
- There is work to look at aged care services, which could include adequacy of service provision in rural areas. These are the:
 - Health Select Committee review into aged care (coalition commitment)
 - Aged Care Service and Funding Model Review.

Key rural health issues

- The Rural Health Strategy sets the direction for improving the health and wellbeing of rural communities over the next 10 years.
- The five priorities for improving rural health outcomes are set out in the Rural Health Strategy. These priorities are:
 - considering rural communities as a priority group
 - prevention: paving the path to a healthier future
 - services are available closer to home for rural communities
 - rural communities are supported to access services at a distance
 - a valued and flexible rural health workforce.

Access to health care in communities

- Access to primary care and urgent care are concerns for many rural communities. Both are impacted by workforce shortages and by funding and settings that do not sustain and support the different service models needed for rural communities.
- The Ministry of Health is leading a policy work programme, working with Health NZ and other agencies, to drive the changes needed to ensure New Zealanders can access comprehensive primary and community health care, when, how and where they need it.

- This policy work will include consideration of the needs of different communities, including rural communities for broader health care services within their community. This will include how broader system settings and funding can support the health needs of rural communities and services to be sustainable.
- In collaboration with the Accident Compensation Corporation (ACC), Health NZ has initiated a re-design process of rural unplanned, urgent care. The aim of the work is to develop options that are more responsive to rural communities' needs and results in equity of both access and outcomes.
- The inaugural Rural Urgent Unplanned Care hui in July 2024 was well attended by primary care, hospital and clinicians; sector partners; Māori leaders and other delivery agencies including Hato Hone St Johns.
- Health NZ intend to have identified future design options for rural urgent and unplanned care by October 2024.

Rural Clinical Telehealth Service: Ka Ora Telecare

- The rural clinical telehealth service is to support rural community health needs, by providing additional services for people alongside their general practice. This can help support after hours health needs in rural communities, capacity in peak periods, or when staff shortages. Having this option can reduce the burdens on the rural-based workforce.
- The rural clinical telehealth service has been operational since November 2023. The service is subsidised by Health NZ, with a patient co-payment for consultations with a doctor.
- As of April 2024:
 - 41.5% (107 practices) of eligible general practices had enrolled to use the service
 - 35.5% of eligible general practices had been contacted and were progressing through onboarding to use the service
 - 8.2% (21 practices) of practices declined the service
 - 14.8% of practices were yet to be engaged.
- As of April 2024, 79.8% of calls resulted in treatment being provided, 10.6% were referred to urgent care, 6.2% were referred to a GP, 2.4% of call weren't resolved, 0.6% were referred to allied health and 0.4% weren't seen.

Mental health

- Suicide rates in rural communities are higher than urban areas. This is especially the case for rural men, but also applies to rural women.

- In recent years rural communities have been reporting increasing mental health concerns and have also endured a number of events in recent years that have affected their livelihood and mental wellbeing (for example, *M. bovis*, Cyclone Gabrielle, flooding and droughts in parts of the country).
- The ability to access mental health and addiction services is a concern for rural communities. This is especially the case for acute mental health and addiction specialist services that are mainly based in urban centres and have long-wait times.
- Rural communities have been prioritised as part of Health NZ's roll out of Integrated Primary Mental Health and Addiction Services (within the Access and Choice programme).
- In July 2024, the Minister for Mental Health announced mental health targets, including:
 - 80% of people accessing primary mental health and addiction services through the Access and Choice programme are seen within one week
 - 80% of people accessing specialist mental health and addiction services are seen within three weeks.
- Rural Support Trusts are a community network and organisation, linked to primary industries, that for rural communities provide mental wellbeing supports including through building community links and support networks through social activities (community meals or sports).
- The first round of the Government's \$10 million Mental Health and Addiction Community Sector Innovation Fund is underway to grow community-based mental health supports.
- The fund will support new and innovative initiatives that are focussed on increasing access to better mental health support, which can also be taken up to target mental health needs in rural communities.

Workforce

- Growing and supporting the rural health workforce, especially GPs and allied health workforce, is a key focus.
- The Government is looking to improve and grow the training pathways for rural GPs, including through the proposed University of Waikato medical school.
- We need to grow and retain the rural health workforce, but also support different approaches to meeting rural communities' care needs through models of care and more flexible use of the workforce.
- A range of initiatives is in place to retain and support the community-based midwifery workforce. They include the New

Graduate Midwife Business Contribution Payments and regular locum relief for rural midwives.

- All registered midwives have been invited to provide direct feedback on future ways of working through the Midwifery Insights Survey. This is taking into consideration the nature of the profession and the specific challenges that rural midwives experience.
- RWNZ have been contracted by Health NZ to run and administer a small amount of financial support (\$2,500 to \$5,000) for rural people training towards a health career. This financial support can help reduce the barriers for rural students joining the health workforce.
- Applications closed on 1 July 2024 with 171 Applications received and distribution will take place in August 2024. This has been a successful partnership, with RWNZ noting the number of applicants exceeds any grants process they have previously delivered.

Digital inclusion

- Some people in rural areas are still unable to access the internet, or have limited or intermittent connectivity, especially in sparsely populated geographic areas such as Northland and the West Coast.
- Addressing the technical and financial challenges of getting reliable internet to rural areas could lessen the digital divide in future, such as affordable satellite-based solutions. Currently, satellite services have financial barriers for many in rural communities that do not have adequate fibre options.
- A lack of digital connectivity limits rural communities' access to online health and social services, but also isolates rural communities from a range of online activities, such as connecting with family and video streaming services. The lack of reliable internet in some areas can put people off living there, including the health workforce.
- The Ministry of Health are working with the Ministry of Social Development (MSD), Ministry of Business, Innovation and Employment (MBIE) and Ministry for Primary Industries (MPI) on current community hubs with digital access in rural communities, such as maraes, MSD's heartland service sites, and other community-based options (such as libraries), to see where there are gaps in community-based digital options.

Caleb Johnstone

Group Manager, Strategy

Strategy Policy and Legislation

Appendix 1: Talking points for meeting

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Appendix 2: Information on meeting attendees from Rural Women New Zealand

Marie Fitzpatrick, Chief Executive

She grew up in rural central Otago. She has mainly worked in Wellington with public service roles included leadership in fisheries within the Ministry for Primary Industries. She co-founded Good Bitches Baking Charitable Trust in 2014 with Nicole Murray. This delivers home baking to those in tough situations through a now national level fundraising, co-ordination and delivery operation, with 30 regional groups. In 2019, Marie was awarded a member of the New Zealand Order of Merit for community services. In 2020, Good Bitches Baking was awarded NZ Community of the Year, as part of the New Zealander of the Year awards.

Gill Naylor, National President

She farmed with her husband in central Otago for 38 years. While no longer farming, she retains a strong interest in the industry and rural issues. She is also a trustee of the Life Education Trust Heartland Otago Southland.

Sandra Matthews, National Board Chair

She lives in Tairāwhiti on a sheep and beef hill country station. She is active in supporting agri-business through community networks and consulting work. She is also the Chair of Rural Communities Trust, and a Trustee of Endometriosis New Zealand.

Sharron Davie-Martin, National Board member

She currently farms with her husband in North Canterbury, but previously farmed in Northland. Supports new immigrants to settle into the local community and work life.

Kelly Conway, Policy Advisor

She grew up on a family farm in South Auckland. Kelly draws on previous experiences in government agencies to coordinate and support their policy advocacy and internal policy groups.