



# Arotahi ki te Pae Oranga

**Hauora Māori Infographics**

December 2023

**Te Aka Whai Ora**  
Māori Health Authority

## Background

The purpose of Arotahi ki te Pae Oranga is to provide an easy to understand, visual representation of some key indicators highlighting the inequitable (and avoidable) experiences and performance that our health system delivers for whānau Māori.

It is not intended to be an exhaustive list of measures. Their primary purpose is to foster awareness, elicit conversation and provide a basis to highlight gaps and changes over time.

Te Pae Tata outlines a commitment from the sector to work towards a health system that embeds Te Tiriti o Waitangi as its foundation, to help improve health outcomes and achieve Pae Ora for whānau Māori and communities. These goals inherently prioritise an intentional, system-wide focus on equity which is defined as differences in health that are avoidable, unfair, and unjust<sup>4</sup>.

## Focus areas

These infographics focus on the key health gain areas that Te Pae Tata<sup>1</sup> and the Māori Health Priorities Report<sup>2</sup> identified as significant opportunities to transform hauora Māori outcomes. Collectively these health gain areas account for a significant proportion of all avoidable mortality and health loss experienced by Māori<sup>3</sup>.

A context section highlights the long-term outcomes such as avoidable loss of life (mortality) and loss of health with separate infographics for each of the four health gain areas that most significantly contribute to avoidable life and health loss :

- Mate Pukupuku | Cancer
- Kahu Taurima | First 2000 Days
- Māuiutanga Taumaha | Long Term Conditions
- Oranga Hinengaro | Mental Health

In addition to health loss, mortality and prevalence the indicators chosen draw attention to factors that contribute to poor hauora Māori outcomes such as differential service access, workforce challenges and social determinants.

## Using the data

Arotahi ki te Pae Oranga alongside a suite of other outputs is intended to support:

- Iwi Māori Partnership Boards, localities, regions and specific communities with their targeted responses to needs and wants
- Future commissioning discussions
- Providers with co-design
- Peer reviews and clinical discussions
- Health promotion (and education)
- Deep-dive reviews across Te Whatu Ora
- Public and staff awareness
- Future academic work.

## Data sources

Data sources and disclaimers are provided for each metric. Unless otherwise specified, the most recent publicly available data was used. This is to ensure readers can access the reference material.

In some instances, data is several years old and highlights the importance of updating and making data available for public consumption to enable observation of performance and outcomes.

<sup>1</sup> Te Whatu Ora, Te Aka Whai Ora. (2022). *Te Pae Tata Interim New Zealand Health Plan*. Te Whatu Ora.

<sup>2</sup> Curtis, E., Loring, B., Harris, R., McLeod, M., Mills, C., Scott, N., & Reid, P. (2022). *Māori Health Priorities*. Te Aka Whai Ora.

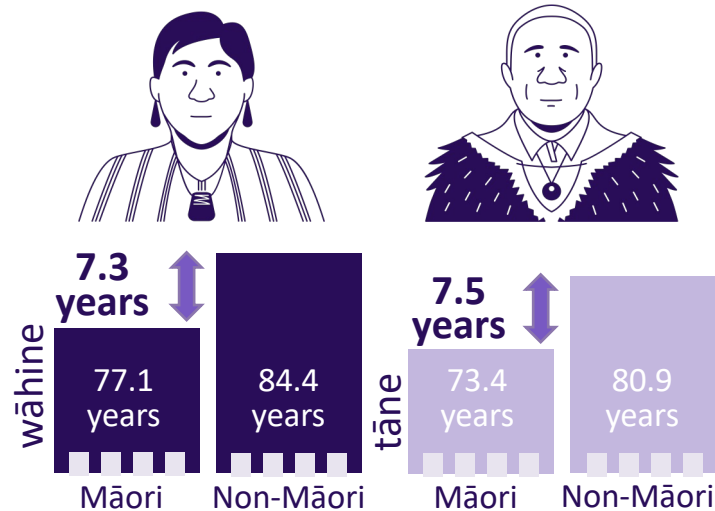
<sup>3</sup> Walsh, M., & Grey, C. (2019). *The contribution of avoidable mortality to the life expectancy gap in Māori and Pacific populations in New Zealand—a decomposition analysis*. *New Zealand Medical Journal*, 132(1492), 46-60.

<sup>4</sup> Ministry of Health (2019). *Achieving Equity in Health Outcomes: Summary of a discovery process*. Wellington: Ministry of Health.



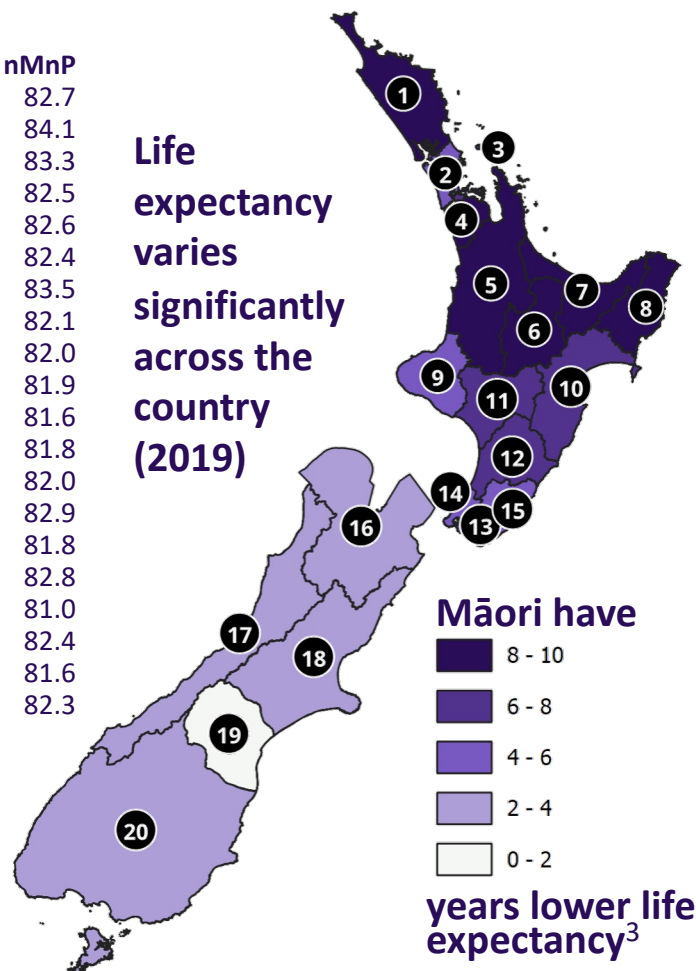
## Life Expectancy

Māori live 7.4 years less on average



Life expectancy varies significantly across the country (2019)

#	Māori	nMnP
1	73.9	82.7
2	79.3	84.1
3	76.6	83.3
4	73.5	82.5
5	74.4	82.6
6	73.5	82.4
7	75.2	83.5
8	73.2	82.1
9	76.1	82.0
10	74.4	81.9
11	74.9	81.6
12	75.7	81.8
13	75.9	82.0
14	78.6	82.9
15	76.8	81.8
16	80.1	82.8
17	78.8	81.0
18	78.8	82.4
19	79.8	81.6
20	80.1	82.3

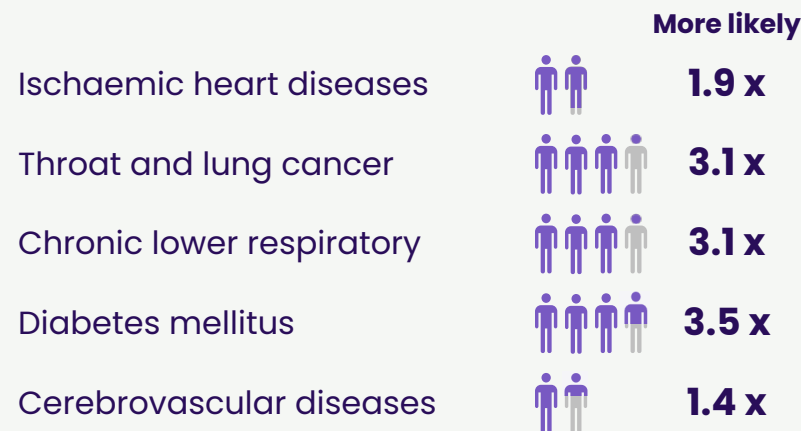


## Health Loss & Mortality

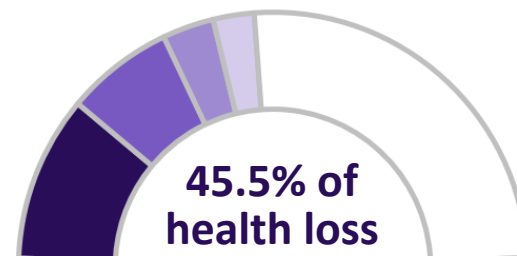
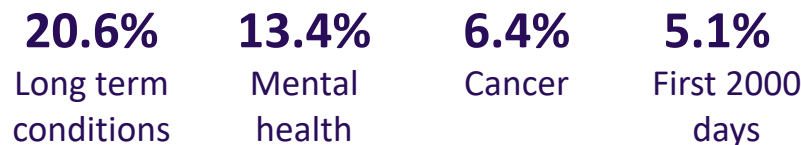
Māori are 2x more likely to die from avoidable causes<sup>3</sup>

53% of Māori deaths are potentially avoidable

Māori are more likely to die<sup>2</sup> from these five leading conditions...



Four areas make up half of Māori health loss



## System Challenges

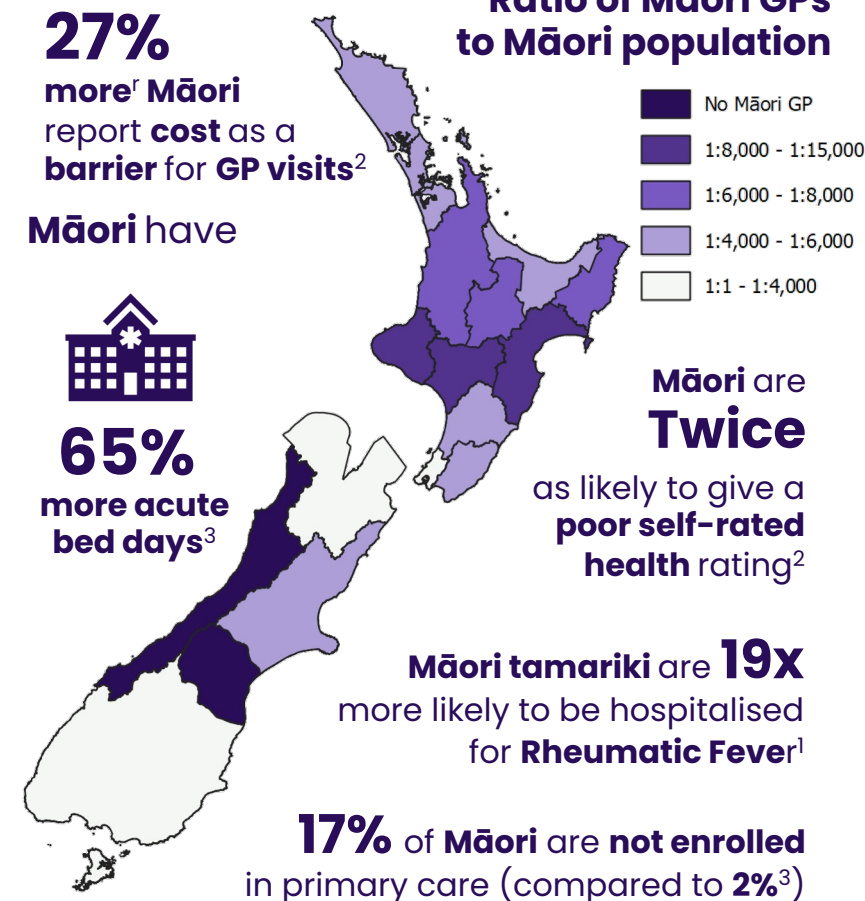
27% more<sup>†</sup> Māori report cost as a barrier for GP visits<sup>2</sup>

Māori have



65% more acute bed days<sup>3</sup>

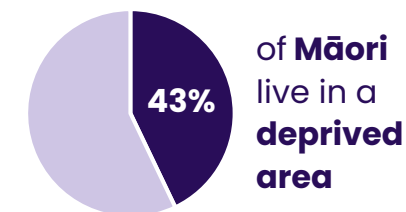
Ratio of Māori GPs to Māori population



Only 5% of GPs are Māori



17.4% of Aotearoa are Māori

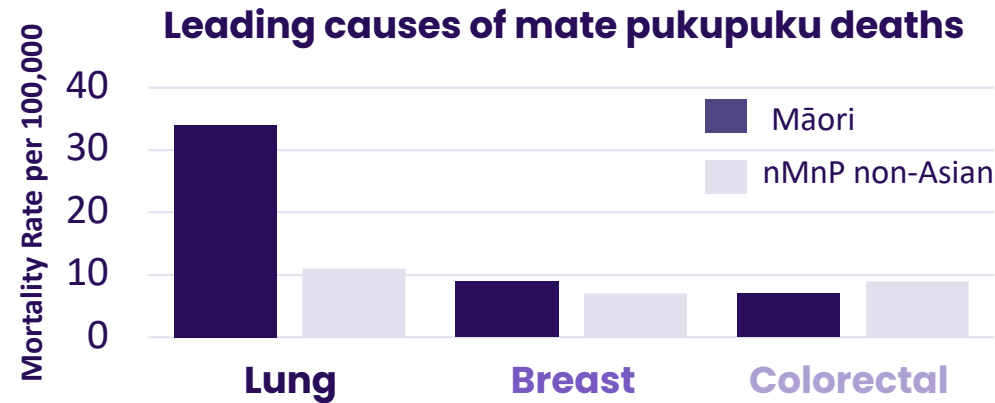


2.6 times more Māori live in a deprived area<sup>2</sup> (Decile 9 and 10)

# Mate Pukupuku | Cancer

Māori are more likely to get mate pukupuku and are less likely to survive it

Māori are **30%** more likely to be **diagnosed**<sup>2</sup> and Māori are **60%** more likely to **die**<sup>2</sup>



**2 in 5** Māori live in the most **deprived areas**, **2.6 times more** than non-Māori (Decile 9 and 10)

## Mate pukupuku pūkahukahu Lung Cancer

Māori are... **3.1x** more likely to be **diagnosed**<sup>2</sup> and **3.15x** more likely to **die**<sup>2</sup>

## Mate pukupuku ki te ū Breast Cancer

Māori are... **38%** more likely to be **diagnosed**<sup>2</sup> and **41%** more likely to **die**<sup>2</sup>

## Mate pukupuku ki te whēkau Bowel (colorectal) Cancer

Māori are... **11%** less<sup>r</sup> likely to be **diagnosed**<sup>2</sup> and **7%** less<sup>r</sup> likely to **die**<sup>2</sup>

### Contributing Risk Factor

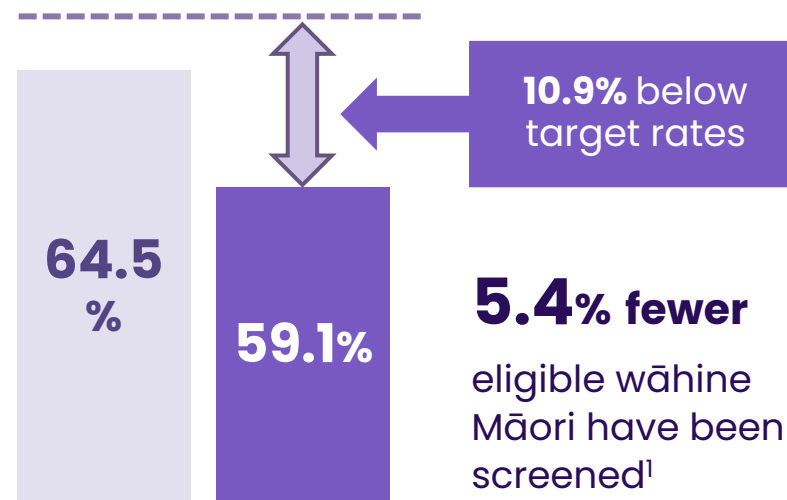


People living in high deprivation are **3.4 times** more likely to smoke<sup>4</sup>

Māori are **2.9x** more likely to be **current smokers**<sup>2</sup>

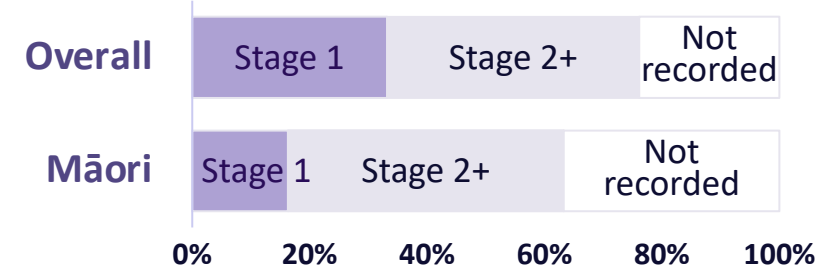
### Differential Access to Healthcare

70% coverage target for breast screening



### Differential Access to Healthcare

**16.9% fewer Māori diagnosed at stage 1<sup>1</sup>**



### Differential Access to Healthcare

**11.3% fewer** screening kits completed<sup>3</sup> and **3.5% fewer** Māori with a **positive screening result** are seen on time (60 days)<sup>1</sup>

Longstanding inequity, institutionalised racism in the health system and ability to access healthcare is widely acknowledged as the key drivers of poor health outcomes for Māori

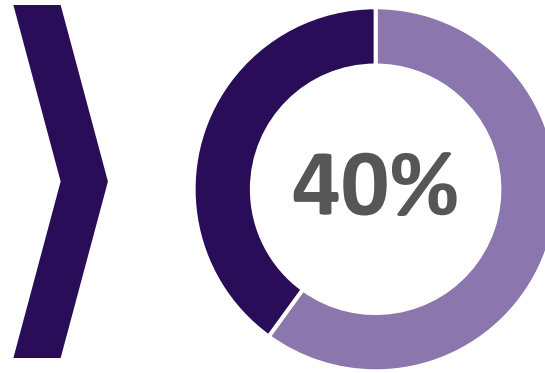
<sup>a</sup> absolute difference <sup>r</sup> relative difference <sup>1</sup> compared to overall Screening Programme rates <sup>2</sup> compared to non-Māori <sup>3</sup> compared to non-Māori non-Pacific (nMnP) <sup>4</sup> compared to people living in low deprivation

# Kahu Taurima | First 2000 Days

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**5.1%**  
of **health loss** for **Māori** occurs in the first 2000 days of life



of all **health loss** for children under 5 is attributable to **maternal, neonatal, nutritional deficiency and infectious conditions (MNNI)**

**1 in 5**  
**Māori children** live in **material hardship**, **double** the rate of all children



## Maternal and Neonatal

## Infant Health

## Early Childhood

## Service Provision

**27%** of **health loss** for all children are from **birth defects and neonatal disorders**

Māori have ...

**3.4x** higher **maternal suicide rate**<sup>1</sup>

**2x** more **pregnancy related deaths**<sup>1</sup>

**25%** fewer <sup>a</sup> Māori mothers are **registered with an LMC in 1st trimester**<sup>1</sup>

Māori have ...

**4.7x** higher **sudden unexpected death in infancy (SUDI) rate**<sup>2</sup>

**3.2x** higher **rate of acute bronchiolitis hospitalisations** for young children and infants<sup>1</sup>

**20%** more <sup>r</sup> likely to have **low birth weight births**<sup>2</sup>

Māori have ...

**2.3x** more **decayed, missing, filled teeth at 5 years old**<sup>3</sup>

**10%** Fewer <sup>a</sup> **4 years old Māori at a healthy weight**<sup>2</sup>

**8%** Fewer <sup>a</sup> **before school checks**<sup>2</sup>

**28%** fewer <sup>a</sup> **pēpi fully immunised at 18 months**<sup>1</sup>

Māori have ...

**14%** Fewer <sup>a</sup> **Māmā attending first core contact service** by Well Child Tamariki Ora before their pēpi is 50-days old<sup>2</sup>

## Midwifery

**11%** of **midwives identified as Māori in 2021**

**2x** more than in 2005 (**6.5%**)

**30%** of newborns are **Māori**



Longstanding inequity, institutionalised racism in the health system and ability to access healthcare is widely acknowledged as the key drivers of poor health outcomes for Māori

<sup>a</sup> absolute difference

<sup>r</sup> relative difference

<sup>1</sup> compared to NZ European including other ethnicity

<sup>2</sup> compared to non-Māori

<sup>3</sup> compared to non-Māori non-Pacific (nMnP)

# Māuiuitanga Taumaha | Long Term Conditions

Four long term conditions contribute towards the largest causes of death and disability for Māori: cardiovascular diseases, stroke, chronic obstructive pulmonary disease (COPD), and diabetes

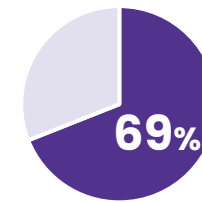
Māori are...

**2.3x** more likely to **die** from these four conditions

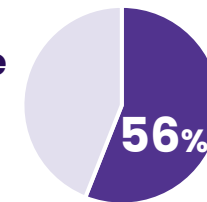
**19%** of **health loss** for Māori are contributed by the four conditions below



**Cardiovascular diseases** are the leading cause of death. They account for:



of **amenable deaths** for Māori tāne



of **amenable deaths** for Māori wāhine

## Diabetes

Māori are ...

**3.5x more** likely to **die** from diabetes<sup>2</sup>

**10 Years** earlier onset of diabetes<sup>1</sup>

**2.3x more** likely to **have** diabetes<sup>2</sup>

## Cardiovascular Diseases

Māori are ...

**1.9x more** likely to **die** from ischemic heart disease<sup>2</sup>

**1.8x more** likely to be hospitalised for cardiovascular disease (age 35+)<sup>3</sup>

**1.8x more** likely to **have** ischemic heart disease<sup>2</sup>

## Stroke

Māori are ...

**1.4x more** likely to **die** from stroke<sup>2</sup>

**1.8x more** likely to be hospitalised for stroke (age 35+)<sup>3</sup>

**1.3x more** likely to **have** a stroke<sup>2</sup>

## Chronic Obstructive Pulmonary Disease

Māori are ...

**2.2x more** likely to **die** from COPD<sup>4</sup>

**3.7x more** likely to be hospitalised for COPD<sup>4</sup>

**3x more** likely to have COPD<sup>4</sup>

Other contributing indicators

## Gout

**2x more** likely to **have** gout<sup>3</sup>

**3x more** likely to be hospitalised for gout<sup>3</sup>

These long term conditions are preventable, but Māori experience higher rates of exposure to the risk factors and conditions

### Care Experience

**83.9%** of Māori feel involved in their long term care plan<sup>1</sup> (vs 84.1%)

**71.7%** of Māori reviewed their long-term care plan in last 12 months<sup>1</sup> (vs 75.1%)

### Contributing Risk Factor

**2.6x more** Māori live in a deprived area<sup>2</sup>

People living in high deprivation are **3x more** likely to smoke<sup>5</sup>

Longstanding inequity, institutionalised racism in the health system and ability to access healthcare is widely acknowledged as the key drivers of poor health outcomes for Māori

<sup>1</sup> compared to NZ European

<sup>2</sup> compared to Non-Māori

<sup>3</sup> compared to Non-Māori non-Pacific

<sup>4</sup> compared to Non-Māori non-Pacific non-Asian

<sup>5</sup> compared to people living in low deprivation

Note: Cardiovascular diseases are heart and blood vessel related diseases

Note: Amenable deaths are potentially preventable with effective and timely health care



## Health Loss & Mortality

Mental health accounts for **more than ...** **13.4%** of health loss



Five leading causes of health loss for Māori (mental health)

- 5.0%** Anxiety & depression
- 3.8%** Alcohol use
- 2.2%** Schizophrenia
- 1.4%** Drug use
- 1.0%** Bipolar disorder

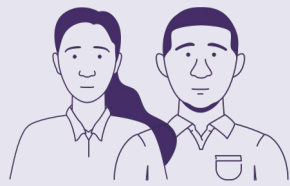
**1 in 3000**

15-24 years old Māori **die** by **suicide**



This is **double** the rate of non-Māori

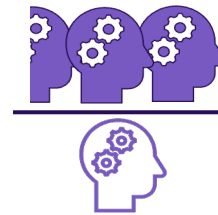
Māori are **3.3x** more likely to be **subject to community and inpatient treatment orders**<sup>3</sup>



## Prevalence

**1 in 5** Māori adults have an **anxiety disorder**  
**40%** more likely to experience an **anxiety disorder**<sup>2</sup>

Māori adults are **2.5x** more likely to have **bipolar disorder**<sup>2</sup>  
**3.5x** amongst Māori tāne



**20%** more likely to experience **depression**<sup>2</sup>

Māori are **4.6x** more likely to be **secluded**<sup>3</sup>

Māori have **twice** the incidence of hazardous alcohol and substance use<sup>2</sup>

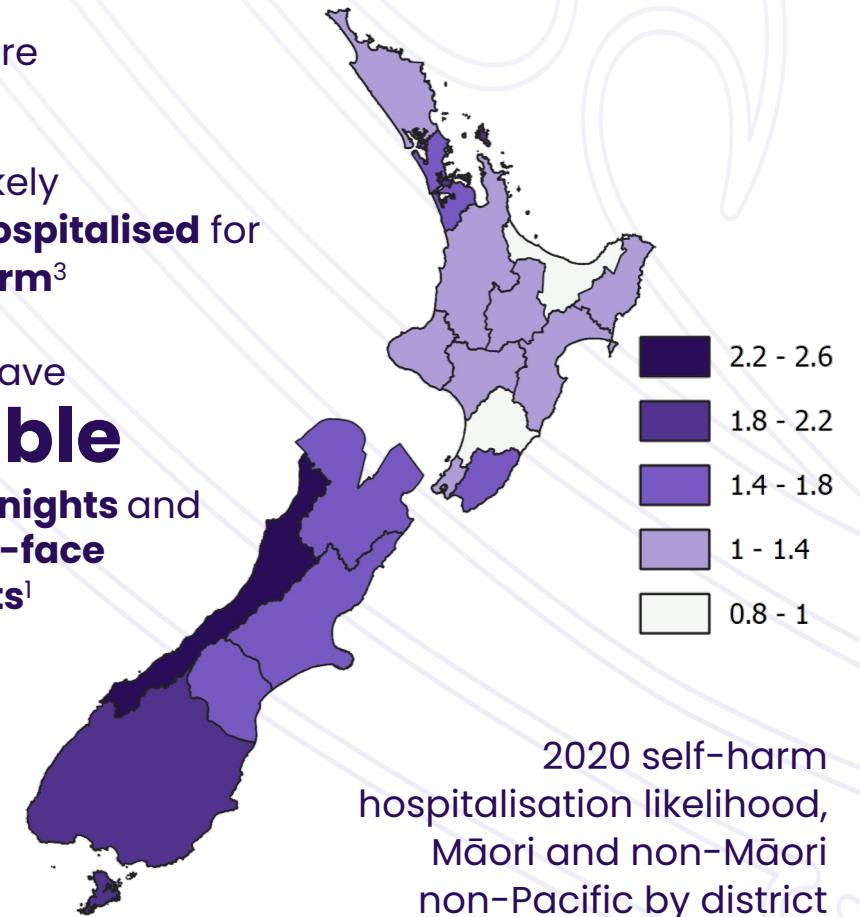
**30% more**<sup>†</sup> Māori tāne rated **lower whānau wellbeing**<sup>2</sup>



## System Challenges

Māori are **1.3x** more likely to be **hospitalised for self-harm**<sup>3</sup>

Māori have **double** the **bednights** and **face-to-face contacts**<sup>1</sup>



Māori are **1.3x** more likely to have **unmet need** for mental health and addiction services

**BUT...**

**Non-Māori** are **1.8x** more likely than Māori to **receive professional care**



**Only 1 out of 10** psychologists in Aotearoa are **Māori**



Longstanding inequity, institutionalised racism in the health system and ability to access healthcare is widely acknowledged as the key drivers of poor health outcomes for Māori

<sup>†</sup> relative difference

<sup>1</sup> compared to NZ European

<sup>2</sup> compared to non-Māori

<sup>3</sup> compared to non-Māori non-Pacific

Note: Secluded is when a service user is "placed alone in a room or area, at any time and for any duration, from which they cannot freely exit."

# References



<p>C1</p>	<p><b>Life Expectancy - Stats NZ, 2017-2019 data</b> Stats NZ. (2021). <i>National and Subnational Period Life Tables: 2017–2019</i>. Stats NZ. <a href="https://www.stats.govt.nz/information-releases/national-and-subnational-period-life-tables-2017-2019">https://www.stats.govt.nz/information-releases/national-and-subnational-period-life-tables-2017-2019</a></p>	<p>C8</p>	<p><b>Acute bed days per 1000 population - HQSC Quality Dashboard, 2022 data</b> Health Quality &amp; Safety Commission. (2020). <i>Dashboard of Health System Quality</i>. Health Quality &amp; Safety Commission. <a href="https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/">https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/</a></p>
<p>C2</p>	<p><b>Life expectancy at birth by district - HQSC, 2019 data</b> Map computed using R software Health Quality &amp; Safety Commission. (2020). <i>Dashboard of Health System Quality</i>. Health Quality &amp; Safety Commission. <a href="https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/">https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/</a></p>	<p>C9</p> <p><b>Māori are twice as likely to give a poor self-rated health rating<sup>2</sup></b></p>	<p><b>Percentage of people self reporting their health status as poor, NZHS, 2021/2022 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>C3</p>	<p><b>Proportion of avoidable death, Walsh &amp; Gray (2019), 2013-2015 data</b> Walsh, M., &amp; Grey, C. (2019). <i>The contribution of avoidable mortality to the life expectancy gap in Māori and Pacific populations in New Zealand - a decomposition analysis</i>. <i>The New Zealand medical journal</i>, 132(1492), 46–60.</p>	<p>C10</p> <p><b>17% of Māori are not enrolled in primary care (compared to 2%<sup>3</sup>)</b></p>	<p><b>No/% of Māori enrolment to a PHO - Te Whatu Ora, 2023 data</b> Te Whatu Ora. (2023). <i>Enrolment with a general practice and Primary Health Organisation</i>. Te Whatu Ora. <a href="https://www.tewhātuora.govt.nz/our-health-system/primary-care-sector/primary-health-organisations/enrolment-with-a-general-practice-and-primary-health-organisation/">https://www.tewhātuora.govt.nz/our-health-system/primary-care-sector/primary-health-organisations/enrolment-with-a-general-practice-and-primary-health-organisation/</a></p>
<p>C4</p>	<p><b>Mortality rates per 100,000 – Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Mortality web tool</i>. Mortality web tool. <a href="https://www.tewhātuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/">https://www.tewhātuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/</a></p>	<p>C11</p>	<p><b>Proportion of GP workforce that is Māori - RNZCGP, 2022 data</b> 72% response rate RNZCGP. (2022). <i>Data and statistics</i>. The Royal New Zealand College of General Practitioners. <a href="https://www.rnzcgp.org.nz/our-voice/data-and-statistics/">https://www.rnzcgp.org.nz/our-voice/data-and-statistics/</a></p>
<p>C5</p>	<p><b>Overall health loss (DALYs) - Health Loss in NZ; MoH (2013), 2006 data</b> Ministry of Health. (2016). <i>Health Loss in New Zealand 1990–2013: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study</i>. Wellington: Ministry of Health. <a href="https://www.health.govt.nz/system/files/documents/publications/health-loss-in-new-zealand-1990-2013-aug16.pdf">https://www.health.govt.nz/system/files/documents/publications/health-loss-in-new-zealand-1990-2013-aug16.pdf</a></p>	<p>C12</p>	<p><b>No/% of people who identify as Māori in Aotearoa - Stats NZ, 2022</b> Stats NZ. (2022). <i>Māori population estimates: At 30 June 2022</i>. Stats NZ. <a href="https://www.stats.govt.nz/information-releases/maori-population-estimates-at-30-june-2022/">https://www.stats.govt.nz/information-releases/maori-population-estimates-at-30-june-2022/</a></p>
<p>C6</p>	<p><b>Percentage of people who report unmet need for a GP visit due to cost - NZHS, 2021/2022 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>	<p>C13</p>	<p><b>Proportion of Māori living in more deprived areas (decile 9 and 10), NZDep2018 analysis of census 2018 variables - University of Otago, 2018 data</b> Atkinson, J., Crampton, P., &amp; Salmond, C. (2021). <i>NZDep2018 Analysis of Census 2018 Variables - Overall (New Zealand)</i>. <a href="https://ourarchive.otago.ac.nz/handle/10523/12052">https://ourarchive.otago.ac.nz/handle/10523/12052</a></p>
<p>C7</p>	<p><b>Health workforce directorate data - Te Whatu Ora, 2023</b> Permission from Te Whatu Ora- not publicly accessible</p>	<p>C14</p>	<p><b>Acute rheumatic fever initial hospitalizations and adjusted rate ratios for patients &lt;30 years of age, 2000-2018</b> Bennett J, Zhang J, Leung W, Jack S, Oliver J, Webb R, Wilson N, Sika-Paotonu D, Harwood M, Baker MG. <i>Rising ethnic inequalities in acute rheumatic fever and rheumatic heart disease, New Zealand, 2000–2018</i>. <i>Emerg Infect Dis</i>. 2021;27(1)</p>

<p>M1</p> 	<p><b>Registration, Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>	<p>M10</p> <p><b>38% more likely to be diagnosed²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>
<p>M2</p> 	<p><b>Mortality, Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>	<p>M11</p> <p><b>41% more likely to die²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>
<p>M3</p> 	<p><b>Leading Causes of Cancer, Te Aho o Te Kahu, 2007-2017 data</b> Te Aho o Te Kahu. (2021). <i>He Pūrongo Mate Pukupuku o Aotearoa 2020, The State of Cancer in New Zealand 2020</i>. Wellington: Te Aho o Te Kahu, Cancer Control Agency</p>	<p>M12</p> <p><b>70% coverage target for breast screening</b></p>	<p><b>Breast Screening, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2021). <i>BreastScreen Aotearoa Coverage Report</i>. <a href="https://tewhatauora.shinyapps.io/nsu-bsa-coverage/">https://tewhatauora.shinyapps.io/nsu-bsa-coverage/</a></p>
<p>M4</p> 	<p><b>Proportion of Māori living in Declie 9 and 10, Atkinson, J., 2018 data</b> Atkinson, J., Crampton, P., &amp; Salmond, C. (2021). <i>NZDep2018 Analysis of Census 2018 Variables - Overall (New Zealand)</i>. <a href="https://ourarchive.otago.ac.nz/handle/10523/12052">https://ourarchive.otago.ac.nz/handle/10523/12052</a></p>	<p>M13</p> 	<p><b>Breast Screening Eligibility, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2021). <i>BreastScreen Aotearoa Coverage Report</i>. <a href="https://tewhatauora.shinyapps.io/nsu-bsa-coverage/">https://tewhatauora.shinyapps.io/nsu-bsa-coverage/</a></p>
<p>M5</p> <p><b>3.1x more likely to be diagnosed²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>	<p>M14</p> <p><b>11% less likely to be diagnosed²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>
<p>M6</p> <p><b>3.1x more likely to be diagnosed²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>	<p>M15</p> <p><b>7% less likely to die²</b></p>	<p><b>Registration, Te Whatu Ora, 2016-2020 data</b> Te Whatu Ora. (2022). <i>Cancer Web Tool</i>. Cancer web tool . <a href="https://tewhatauora.shinyapps.io/cancer-web-tool/">https://tewhatauora.shinyapps.io/cancer-web-tool/</a></p>
<p>M7</p> 	<p><b>Lung Cancer, CDC, US data</b> Centers for Disease Control and Prevention. (2023, July 31). <i>What are the risk factors for lung cancer?</i>. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm">https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm</a></p>	<p>M16</p> 	<p><b>Bowel Screening, Te Whatu Ora, 2022</b> Te Whatu Ora. (2021). <i>National Bowel Screening Programme</i>. <a href="https://tewhatauora.shinyapps.io/nsu-bsp-index/">https://tewhatauora.shinyapps.io/nsu-bsp-index/</a></p>
<p>M8</p> 	<p><b>Deprivation, Ponniah, S., 2006 data</b> Ponniah, S., &amp; Bloomfield, A. (2008) <i>Sociodemographic characteristics of New Zealand adult smokers, ex-smokers and non-smokers: results from the 2006 Census</i>. N Z Med J;121(1284): 34-42.</p>	<p>M17</p> <p><b>11.3% fewer screening kits completed³</b></p>	<p><b>National Bowel Screening, Te Whatu Ora, 2023</b> National Bowel Screening Programme (NBSP) Volumes Report – no public access. Permission required from Te Whatu Ora</p>
<p>M9</p> 	<p><b>Smoking, Smokefree NZ, 2021-2022 data</b> Smokefree NZ. (2023). <i>Facts &amp; figures</i>. Smokefree NZ. <a href="https://www.smokefree.org.nz/smoking-its-effects/facts-figures">https://www.smokefree.org.nz/smoking-its-effects/facts-figures</a></p>	<p>M18</p> <p><b>3.5% fewer Māori with a positive screening result are seen on time (60 days)¹</b></p>	<p><b>National Bowel Screening, Te Whatu Ora, 2023</b> Te Whatu Ora. (2021). <i>National Bowel Screening Programme</i>. <a href="https://tewhatauora.shinyapps.io/nsu-bsp-index/">https://tewhatauora.shinyapps.io/nsu-bsp-index/</a></p>

# Kahu Taurima | First 2000 Days

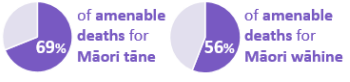
## References

K1	<p><b>5.1%</b> of health loss for Māori occurs in the first 2000 days of life</p>	<p><b>Health loss, MOH, 2006 data</b> Ministry of Health. (2013). <i>Health Loss in New Zealand: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study, 2006–2016</i>. Wellington: MOH. <a href="https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf">https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf</a></p>	K10	<p><b>20% more</b> likely to have low birth weight births<sup>2</sup></p>	<p><b>Low birth weight, MOH, 2010-12 data</b> Ministry of Health. (2018). <i>Infant health</i>. Ministry of Health NZ. <a href="https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/infant-health">https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/infant-health</a></p>
K2	 <p>40% of all health loss for children under 5 is attributable to maternal, neonatal, nutritional deficiency and infectious conditions (MNNI)</p>	<p><b>Health loss, MOH, 2013 data</b> Ministry of Health. (2013). <i>Health Loss in New Zealand: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study, 2006–2016</i>. Wellington: Ministry of Health. <a href="https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf">https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf</a></p>	K11	<p><b>2.3x more</b> decayed, missing, filled teeth at 5 years old<sup>3</sup></p>	<p><b>Oral health, MOH, 2022 data</b> Ministry of Health. (2023). <i>Age 5 and Year 8 oral health data from the Community Oral Health Service</i>. <a href="https://www.health.govt.nz/nz-health-statistics/health-statistics-and-data-sets/oral-health-data-and-stats/age-5-and-year-8-oral-health-data-community-oral-health-service">https://www.health.govt.nz/nz-health-statistics/health-statistics-and-data-sets/oral-health-data-and-stats/age-5-and-year-8-oral-health-data-community-oral-health-service</a></p>
K3	 <p><b>1 in 5</b> Māori children live in material hardship, double the rate of all children</p>	<p><b>Child poverty, 2021/2022 data</b> Child Poverty Action Group. (2023, June 13). <i>Latest child poverty figures 2021/22</i>. Child Poverty Action Group. <a href="https://www.cpag.org.nz/statistics/latest-child-poverty-figures">https://www.cpag.org.nz/statistics/latest-child-poverty-figures</a></p>	K10	<p><b>10% Fewer</b><sup>a</sup> 4 years old Māori at a healthy weight<sup>2</sup></p>	<p><b>Healthy weight, Te Whatu Ora, 2022 data</b> Te Whatu Ora. (2023). <i>Well Child Tamariki Programme Publications</i>. Te Whatu Ora. <a href="https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/">https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/</a></p>
K4	<p><b>27%</b> of health loss for all children are from birth defects and neonatal disorders</p>	<p><b>Birth defects and neonatal disorders, MOH</b> Ministry of Health. (2013). <i>Health Loss in New Zealand: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study, 2006–2016</i>. Wellington: Ministry of Health. <a href="https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf">https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf</a></p>	K11	<p><b>8% Fewer</b><sup>a</sup> before school checks<sup>2</sup></p>	<p><b>B4SC, Te Whatu Ora, 2022 data</b> Te Whatu Ora. (2023). <i>Well Child Tamariki Programme Publications</i>. Te Whatu Ora. <a href="https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/">https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/</a></p>
K5	<p><b>3.4x higher</b> maternal suicide rate<sup>1</sup></p>	<p><b>Maternal suicide, HQSC, 2006-2019 data</b> Perinatal and Maternal Mortality Review Committee. (2022). <i>Te Purongo ā-Tau Tekau mā Rima o te Komiti Arotake Mate Pēpi, Mata Whaea Hoki: Reporting Mortality and Borbidity 2020</i>. Wellington: HQSC. <a href="https://www.hqsc.govt.nz/assets/Our-work/Mortality-review-committee/PMMRC/Publications-resources/15thPMMRC-report-final.pdf">https://www.hqsc.govt.nz/assets/Our-work/Mortality-review-committee/PMMRC/Publications-resources/15thPMMRC-report-final.pdf</a></p>	K12	<p><b>28% fewer</b><sup>a</sup> pēpi fully immunised at 18 months<sup>1</sup></p>	<p><b>Immunisation, Te Whatu Ora, April 2022- March 2023 data</b> Te Whatu Ora. (2023). <i>Immunisation Coverage</i>. Te Whatu Ora. <a href="https://www.tewhatauora.govt.nz/for-the-health-sector/vaccine-information/immunisation-coverage/">https://www.tewhatauora.govt.nz/for-the-health-sector/vaccine-information/immunisation-coverage/</a></p>
K6	<p><b>2x more</b> pregnancy related deaths<sup>1</sup></p>	<p><b>Pregnancy related deaths, HQSC, 2006-2019 data</b> Perinatal and Maternal Mortality Review Committee. (2022). <i>Te Purongo ā-Tau Tekau mā Rima o te Komiti Arotake Mate Pēpi, Mata Whaea Hoki: Reporting Mortality and Borbidity 2020</i>. Wellington: HQSC. <a href="https://www.hqsc.govt.nz/assets/Our-work/Mortality-review-committee/PMMRC/Publications-resources/15thPMMRC-report-final.pdf">https://www.hqsc.govt.nz/assets/Our-work/Mortality-review-committee/PMMRC/Publications-resources/15thPMMRC-report-final.pdf</a></p>	K13	<p>Māori have ... <b>14% fewer</b> Māmā attending first core contact service by Well Child Tamariki Ora before their pēpē is 50-days old<sup>2</sup></p>	<p><b>First core contact, Te Whatu Ora, September 2022 data</b> Te Whatu Ora. (2023). <i>Well Child Tamariki Programme Publications</i>. Te Whatu Ora. <a href="https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/">https://www.tewhatauora.govt.nz/for-the-health-sector/specific-life-stage-health-information/child-health/well-child-tamariki-programme/programme-publications/</a></p>
K7	<p><b>25% fewer</b><sup>a</sup> Māori mothers are registered with an LMC in 1st trimester<sup>1</sup></p>	<p><b>LMC Registration, Te Whatu Ora, 2021 data</b> Te Whatu Ora. (2023). <i>Report on Maternity Web Tool</i>. Maternity web tool. <a href="https://tewhatauora.shinyapps.io/report-on-maternity-web-tool/">https://tewhatauora.shinyapps.io/report-on-maternity-web-tool/</a></p>	K14	<p><b>11%</b> of midwives are Māori</p>	<p><b>Midwives, MOH, 2021 data</b> Ministry of Health. (2023, June 21). <i>Whakamaua Quantitative Dashboard: Year three</i>. Ministry of Health NZ. <a href="https://www.health.govt.nz/publication/whakamaua-quantitative-dashboard-year-three">https://www.health.govt.nz/publication/whakamaua-quantitative-dashboard-year-three</a></p>
K8	<p><b>4.7x higher</b> sudden unexpected death in infancy (SUDI) rate<sup>2</sup></p>	<p><b>SUDI, Te Whatu Ora, 2014-2018 data</b> Te Whatu Ora. (2023). <i>Fetal and Infant Deaths Web Tool</i>. <a href="https://tewhatauora.shinyapps.io/fetal-and-infant-deaths-web-tool/">https://tewhatauora.shinyapps.io/fetal-and-infant-deaths-web-tool/</a></p>	K17	<p><b>2X</b> as many midwives identify as Māori (2005 vs 2021)</p>	<p><b>Midwives, MOH, 2005-2021 data</b> Ministry of Health. (2023, June 21). <i>Whakamaua Quantitative Dashboard: Year three</i>. Ministry of Health NZ. <a href="https://www.health.govt.nz/publication/whakamaua-quantitative-dashboard-year-three">https://www.health.govt.nz/publication/whakamaua-quantitative-dashboard-year-three</a></p>
K9	<p><b>3.2x higher</b> rate of acute bronchiolitis hospitalisations for young children and infants<sup>1</sup></p>	<p><b>Acute bronchiolitis, Cure Kids, 2017-2021 data</b> Cure Kids. (2023). <i>State of Child Health in Aotearoa New Zealand</i>. <a href="https://www.curekids.org.nz/our-research/state-of-child-health">https://www.curekids.org.nz/our-research/state-of-child-health</a></p>	K18	<p><b>30%</b> of newborns are Māori</p>	<p><b>% of Māori newborns, Te Whatu Ora, 2021</b> Te Whatu Ora. (2023). <i>Report on Maternity Web Tool</i>. Maternity web tool. <a href="https://tewhatauora.shinyapps.io/report-on-maternity-web-tool/">https://tewhatauora.shinyapps.io/report-on-maternity-web-tool/</a></p>



# Māuiuitanga Taumaha | Long Term Conditions

## References

L1	Māori are <b>2.3x</b> more likely to die from these four conditions	<b>Mortality, Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Mortality web tool</i> . Mortality web tool . <a href="https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/">https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/</a>	L12	<b>3x more</b> likely to have COPD <sup>4</sup>	<b>COPD prevalence, 2019 data</b> Barnard, L. T., Zhang, J. (2021). <i>The impact of respiratory disease in New Zealand: 2021 update</i> . Asthma Foundation. <a href="https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf">https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf</a>
L2	<b>19%</b> of health loss for Māori are contributed by the four conditions below	<b>Health loss, 2006 data</b> Curtis, E., Loring, B., Harris, R., McLeod, M., Mills, C., Scott, N., & Reid, P. (2022). <i>Māori Health Priorities</i> . Te Aka Whai Ora. <a href="https://www.teakawhaiora.nz/assets/Uploads/MHA-specific/230830-Maori-Health-Priorities-Report-Te-Aka-Whai-Ora.pdf">https://www.teakawhaiora.nz/assets/Uploads/MHA-specific/230830-Maori-Health-Priorities-Report-Te-Aka-Whai-Ora.pdf</a>	L13	<b>3.5x more</b> likely to die from diabetes <sup>2</sup>	<b>Diabetes mortality, MOH, 2020 data</b> Ministry of Health. 2023. <i>Health and Independence Report 2022</i> . Wellington: Ministry of Health. <a href="https://www.health.govt.nz/system/files/documents/publications/health_and_independence_report_2022_online_version.pdf">https://www.health.govt.nz/system/files/documents/publications/health_and_independence_report_2022_online_version.pdf</a>
L3	Cardiovascular diseases are the leading cause of death. They account for: 	<b>Cardiovascular disease, 2006 data</b> Curtis, E., Loring, B., Harris, R., McLeod, M., Mills, C., Scott, N., & Reid, P. (2022). <i>Māori Health Priorities</i> . Te Aka Whai Ora. <a href="https://www.teakawhaiora.nz/assets/Uploads/MHA-specific/230830-Maori-Health-Priorities-Report-Te-Aka-Whai-Ora.pdf">https://www.teakawhaiora.nz/assets/Uploads/MHA-specific/230830-Maori-Health-Priorities-Report-Te-Aka-Whai-Ora.pdf</a>	L14	<b>10 Years</b> earlier onset of diabetes <sup>1</sup>	<b>Diabetes, 2008 data</b> Kenealy, T. W., Sheridan, N. F., & Orr-Walker, B. J. (2017). <i>Six new studies about diabetes: what can we learn that might benefit Māori and Pacific people?</i> New Zealand Medical Journal, 130(1450), 8-11. doi:10.4066/nzma.2017.10785
L4	<b>1.9x more</b> likely to die from ischemic heart disease <sup>2</sup>	<b>Ischemic heart disease, Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Mortality web tool</i> . Mortality web tool . <a href="https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/">https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/</a>	L15	<b>2.3x more</b> likely to have diabetes <sup>2</sup>	<b>Diabetes prevalence, Te Whatu Ora, 2021 data</b> Te Whatu Ora. (2023). <i>Virtual Diabetes Register and web tool</i> . <a href="https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/virtual-diabetes-tool/">https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/virtual-diabetes-tool/</a>
L5	<b>1.8x more</b> likely to be hospitalised for cardiovascular disease (age 35+) <sup>3</sup>	<b>Cardiovascular disease, HQSC, 2022</b> Health Quality & Safety Commission. (2020). <i>Dashboard of Health System Quality</i> . Health Quality & Safety Commission. <a href="https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/">https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/</a>	L16	<b>83.9%</b> of Māori feel involved in their long term care plan <sup>1</sup> (vs 84.1%)	<b>Involvement in LTCP, HQSC, 2023 data</b> Health Quality & Safety Commission. (2022). <i>Adult primary care patient experience explorer</i> . <a href="https://www.hqsc.govt.nz/our-data/patient-experience/adult-primary-care-patient-experience/">https://www.hqsc.govt.nz/our-data/patient-experience/adult-primary-care-patient-experience/</a>
L6	<b>1.8x more</b> likely to have ischemic heart disease <sup>2</sup>	<b>Ischemic heart disease, National Health Committee, 2011/2012 data</b> National Health Committee. (2013). <i>Strategic Overview Cardiovascular Disease in New Zealand</i> . Social Wellbeing Agency <a href="https://thehub.swa.govt.nz/resources/cardiovascular-disease-in-new-zealand-strategic-overview/">https://thehub.swa.govt.nz/resources/cardiovascular-disease-in-new-zealand-strategic-overview/</a>	L17	<b>71.7%</b> of Māori reviewed their long-term care plan in last 12 months <sup>1</sup> (vs 75.1%)	<b>Review LTCP, HQSC, 2023 data</b> Health Quality & Safety Commission. (2022). <i>Adult primary care patient experience explorer</i> . <a href="https://www.hqsc.govt.nz/our-data/patient-experience/adult-primary-care-patient-experience/">https://www.hqsc.govt.nz/our-data/patient-experience/adult-primary-care-patient-experience/</a>
L7	<b>1.4x more</b> likely to die from stroke <sup>2</sup>	<b>Stroke mortality, Te Whatu Ora, 2020 data</b> Te Whatu Ora. (2022). <i>Mortality web tool</i> . Mortality web tool . <a href="https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/">https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mortality-web-tool/</a>	L18	<b>2.6x more</b> Māori live in a deprived area <sup>2</sup>	<b>Deprivation, 2018 data</b> Atkinson, J., Crampton, P., & Salmond, C. (2021). <i>NZDep2018 Analysis of Census 2018 Variables - Overall (New Zealand)</i> . <a href="https://ourarchive.otago.ac.nz/handle/10523/12052">https://ourarchive.otago.ac.nz/handle/10523/12052</a>
L8	<b>1.8x more</b> likely to be hospitalised for stroke (age 35+) <sup>3</sup>	<b>Stroke hospitalisation, National Health Committee, 2011/2012 data</b> Health Quality & Safety Commission. (2020). <i>Dashboard of Health System Quality</i> . Health Quality & Safety Commission. <a href="https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/">https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/</a>	L18	People living in high deprivation are <b>3x more</b> likely to smoke <sup>5</sup>	<b>Deprivation &amp; Smoking, 2006 data</b> Ponniah, S., & Bloomfield, A. (2008) <i>Sociodemographic characteristics of New Zealand adult smokers, ex-smokers and non-smokers: results from the 2006 Census</i> . N Z Med J;121(1284): 34-42.
L9	<b>1.3x more</b> likely to have a stroke <sup>2</sup>	<b>Stroke prevalence, National Health Committee, 2011/2012 data</b> National Health Committee. (2013). <i>Strategic Overview Cardiovascular Disease in New Zealand</i> . Social Wellbeing Agency <a href="https://thehub.swa.govt.nz/resources/cardiovascular-disease-in-new-zealand-strategic-overview/">https://thehub.swa.govt.nz/resources/cardiovascular-disease-in-new-zealand-strategic-overview/</a>	L19	<b>2x more</b> likely to have gout <sup>3</sup>	<b>Gout prevalence, HQSC</b> Health Quality & Safety Commission. (2022). <i>Prevalence of identified gout, percent</i> <a href="https://public.tableau.com/app/profile/hqi2803/viz/Goutsinglemap/AtlasofHealthcareVariationGout/">https://public.tableau.com/app/profile/hqi2803/viz/Goutsinglemap/AtlasofHealthcareVariationGout/</a>
L10	<b>2.2x more</b> likely to die from COPD <sup>4</sup>	<b>COPD Mortality, 2017 data</b> Barnard, L. T., Zhang, J. (2021). <i>The impact of respiratory disease in New Zealand: 2021 update</i> . Asthma Foundation. <a href="https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf">https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf</a>	L21	<b>3x more</b> likely to be hospitalised for gout <sup>3</sup>	<b>Gout prevalence, HQSC</b> Health Quality & Safety Commission. (2022). <i>Prevalence of identified gout, percent</i> <a href="https://public.tableau.com/app/profile/hqi2803/viz/Goutsinglemap/AtlasofHealthcareVariationGout/">https://public.tableau.com/app/profile/hqi2803/viz/Goutsinglemap/AtlasofHealthcareVariationGout/</a>
L11	<b>3.7x more</b> likely to be hospitalised for COPD <sup>4</sup>	<b>COPD hospitalisation, 2019 data</b> Barnard, L. T., Zhang, J. (2021). <i>The impact of respiratory disease in New Zealand: 2021 update</i> . Asthma Foundation. <a href="https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf">https://www.asthmafoundation.org.nz/assets/documents/Respiratory-Impact-report-final-2021Aug11.pdf</a>			

<p>O1</p> <p>Mental health accounts for <b>more than ...</b></p> <p><b>13.4%</b> of health loss</p>	<p><b>Health loss, MOH, 2006 data</b> Ministry of Health. (2013). <i>Health Loss in New Zealand: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study, 2006–2016</i>. <a href="https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf">https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf</a></p>	<p>O9</p> <p> Māori have <b>twice</b> the incidence of hazardous alcohol and substance use<sup>2</sup></p>	<p><b>Hazardous alcohol and substance use, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>O2</p> <ul style="list-style-type: none"> <li>5.0% Anxiety &amp; depression</li> <li>3.8% Alcohol use</li> <li>2.2% Schizophrenia</li> <li>1.4% Drug use</li> <li>1.0% Bipolar disorder</li> </ul>	<p><b>Health loss, MOH, 2006 data</b> Ministry of Health. (2013). <i>Health Loss in New Zealand: A report from the New Zealand Burden of Diseases, Injuries and Risk Factors Study, 2006–2016</i>. <a href="https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf">https://www.moh.govt.nz/notebook/nbbooks.nsf/0/F85C39E4495B9684CC257BD3006F6299/\$file/health-loss-in-new-zealand-final.pdf</a></p>	<p>O10</p> <p><b>30% more</b> Māori tāne rated lower whānau wellbeing<sup>2</sup></p> 	<p><b>Whānau wellbeing, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>O3</p> <p><b>1 in 3000</b> 15-24 years old Māori die by suicide</p> 	<p><b>Suicide Mortality, Te Whatu Ora, 2021 data</b> Te Whatu Ora. (2022). <i>Suicide web tool</i>. <a href="https://tewhatuora.shinyapps.io/suicide-web-tool/">https://tewhatuora.shinyapps.io/suicide-web-tool/</a></p>	<p>O11</p> <p>Māori are <b>1.3x</b> more likely to be hospitalised for self-harm<sup>3</sup></p>	<p><b>Self-harm hospitalisation, MOH, 2020 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>O4</p> <p>Māori are <b>3.3x</b> more likely to be subject to community and inpatient treatment orders<sup>3</sup></p> 	<p><b>Treatment orders, MOH, September 2022 data</b> Ministry of Health. 2022. <i>Office of the Director of Mental Health and Addiction Services: Regulatory Report 1 July 2020 to 30 June 2021</i>. <a href="https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.govt.nz%2Fsystem%2Ffiles%2Fdocuments%2Fpublications%2Fodmhas-regulatory-report-sep22.docx&amp;wdOrigin">https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.govt.nz%2Fsystem%2Ffiles%2Fdocuments%2Fpublications%2Fodmhas-regulatory-report-sep22.docx&amp;wdOrigin</a></p>	<p>O12</p> <p>Māori have <b>double</b> the bednights and face-to face contacts<sup>1</sup></p>	<p><b>Bednights, Te Whau Ora, 2021/2022 data</b> Te Whatu Ora. (2023). <i>Mental Health and Addiction: Service Use web tool</i>. <a href="https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mental-health-and-addiction-service-use-web-tool/">https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/mental-health-and-addiction-service-use-web-tool/</a></p>
<p>O5</p> <p><b>1 in 5</b> Māori adults have an anxiety disorder</p> <p><b>40%</b> more likely to experience an anxiety disorder<sup>2</sup></p>	<p><b>Anxiety disorder, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>	<p>O13</p> <p>Māori are <b>1.3x</b> more likely to have unmet need for mental health and addiction services</p>	<p><b>Unmet need, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>O6</p> <p>Māori adults are <b>2.5x</b> more likely to have bipolar disorder<sup>2</sup></p> <p><b>3.5x</b> amongst Māori tāne</p> 	<p><b>Bipolar disorder, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>	<p>O14</p> <p>Non-Māori are <b>1.8x</b> more likely than Māori to receive professional care</p>	<p><b>Professional care, MOH, 2021 data</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>
<p>O7</p> <p>Māori are <b>20%</b> more likely to experience depression<sup>2</sup></p> 	<p><b>Depression, MOH, 2022</b> Ministry of Health. (2022) <i>Annual Data Explorer 2021/22: New Zealand Health Survey</i>. <a href="https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/">https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/</a></p>	<p>O15</p> <p>Only <b>1 out of 10</b> psychologists in Aotearoa are Māori</p> 	<p><b>Psychologists, MOH, 2018 data</b> Ministry of Health. (2019). <i>Wai 2575 Māori Health Trends Report</i>. Wellington: Ministry of Health <a href="https://www.health.govt.nz/system/files/documents/publications/wai-2575-maori-health-trends-report-04mar2020.pdf">https://www.health.govt.nz/system/files/documents/publications/wai-2575-maori-health-trends-report-04mar2020.pdf</a></p>
<p>O8</p> <p>Māori are <b>4.6x</b> more likely to be secluded<sup>3</sup></p>	<p><b>Seclusion, MOH, 2020-2021</b> Ministry of Health. 2022. <i>Office of the Director of Mental Health and Addiction Services: Regulatory Report 1 July 2020 to 30 June 2021</i>. Wellington: Ministry of Health. <a href="https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.govt.nz%2Fsystem%2Ffiles%2Fdocuments%2Fpublications%2Fodmhas-regulatory-report-sep22.docx&amp;wdOrigin">https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.govt.nz%2Fsystem%2Ffiles%2Fdocuments%2Fpublications%2Fodmhas-regulatory-report-sep22.docx&amp;wdOrigin</a></p>		