

# Closing the Gap: How nurses can help achieve health access and equity

**“Rather than focusing on the vulnerable, the victims, we should focus much more attention on the structures and processes that maintain power and privilege for some, and marginalisation and deprivation for others.”**

## Purpose

This position statement sets out NZNO’s understanding of the structural causes of health inequities; provides information on health inequities in New Zealand; outlines NZNO’s commitment to practice, policy and political change to ameliorate these inequities; and provides nurses with information and resources that will empower them to tackle the health inequities they deal with in their everyday practice.

NZNO uses the term health inequities as it agrees this term *“most clearly reflects a value orientation of social justice and most explicitly exposes the ‘cause’ of health disparities as rooted in social structures”*.

## Background

NZNO is committed to the representation of members and the promotion of nursing/midwifery. NZNO embraces Te Tiriti O Waitangi and works to improve the health status of all peoples of Aotearoa/New Zealand through participation in health and social policy development.

NZNO’s mission statement provides the platform from which NZNO has developed this position statement. To ensure NZNO’s commitment to improving the health status of all peoples of Aotearoa/New Zealand is real and meaningful, NZNO has developed this position statement, grounded in:

- NZNO’s Code of Ethics
- the World Health Organisation’s Commission on Social Determinants of Health
- 2020 and Beyond: A Vision for Nursing and
- NZNO’s belief that “promoting social justice and health equity fits well with nursing’s historical and philosophical roots”.

## Rationale

There is a large and growing body of evidence that reveals the links between poverty and ill health in New Zealand and worldwide. In essence, in New Zealand, those who are financially poorer will have poorer health; those who have lower levels of education will have poorer health; and those who are of Māori or Pacific ethnicity will also have poorer health.

In New Zealand, lower income groups experience greater risk of dying at every age than higher income groups. Māori still live seven-and-a half fewer years than non-Māori and a person of Pacific descent lives five year fewer.

Auckland University Department of Paediatrics Professor Innes Asher, in the 2010 Porritt Lecture, painted a very grim picture of growing child health inequities in New Zealand and the growing inequities based on ethnicity. In 2009, 25 percent of New Zealand children lived in poverty, almost double the 1980s’ rate.

*“The nurse promotes an environment in which the human rights, values and customs and spiritual beliefs of the individual family and community are respected...”*

New Zealand spends less than the OECD average on young children. An OECD report published in 2009, *Doing Better for Children*, noted that New Zealand had the highest rates of suicide among the 15-19 year age group; child mortality was higher than the OECD average; and immunisation rates were poor. It stated that New Zealand needed to take a stronger policy focus on child poverty and child health.

NZNO believes the links between poverty and ill health are fundamental nursing issues.

NZNO's Code of Ethics underpins this position statement. It states: Nurses demonstrate ethical nursing practice when they advocate individually and collectively for the elimination of social inequities. Nurses address social inequities by: collaborating with other health care professionals and organisations for change in unethical health and social policies, legislation and regulations; advocating for accessible, appropriate and affordable health care services that are available to all; recognising the significance of the socio-economic determinants of health; and supporting environmental preservation and restoration.”

NZNO also supports the International Council of Nurses Code of Ethics for Nursing which states:

“The nurse promotes an environment in which the human rights, values and customs and spiritual beliefs of the individual family and community are respected.

The nurse shares with society the responsibility for initiating and supporting action to meet the health and social need of the public, in particular those of vulnerable populations.

The nurse, acting through the professional organisation, participates in creating and maintaining safe, equitable social and economic working conditions in nursing”.

NZNO supports the WHO's definition of the social determinants of health:

The social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.

NZNO supports the three key interventions proposed by the WHO's Commission on Social Determinants of Health:

- Improving the conditions of daily life – the circumstances in which people are born, grow, live, work and age.
- Tackling the inequitable distribution of power, money and resources.
- Measuring the problem, evaluating action, expanding the knowledge base, developing a workforce that is trained in the social determinants of health, and raising public awareness of these determinants.

**NZNO Policy, Regulation & Legal position statement:**

NZNO believes these three interventions should provide the basis for New Zealand health and social policy now and into the future.

NZNO's *Manifesto Election 2011* details some of the policy changes required to support these three interventions.

## Principles for health equity

- NZNO believes nurses have both a professional and ethical responsibility to address health inequities
- NZNO believes tackling health inequities is clearly within nursing's mandate but that this role is not clearly understood or acted on in nursing practice
- NZNO believes every New Zealander has a right to accessible, affordable, culturally appropriate health care, regardless of ethnicity, income, education or location
- Nurses are committed to providing quality care to all people, regardless of ethnicity, income, education or location
- NZNO believes the principles of Te Tiriti o Waitangi should underpin all health and social policy in New Zealand
- NZNO believes all nurses have a professional and ethical responsibility to practise according to the principles of Te Tiriti o Waitangi
- NZNO believes that closing the gap created by health inequities must be a priority for nursing practice, nursing education and nursing research
- NZNO believes nurses' approach to addressing health inequities should be two-pronged: Nurses must provide "sensitive empowering care at the individual/community level to those experiencing inequities" and "to work to change the environmental and social conditions that are the root cause of these inequities."
- NZNO, as a professional and industrial organisation supports tackling inequities through policy analysis and advocacy. (See NZNO Manifesto Election 2011)
- NZNO supports a whole-of-government approach to addressing health inequities and agrees with the New Zealand Medical Association (NZMA) that policies addressing education, employment, poverty, housing, taxation and social security should be assessed for their health impact
- Nursing education must include analysis of the social determinants of health so nurses gain a more critical understanding of the political and social factors responsible for health inequities
- NZNO supports undergraduate and postgraduate nursing education that assists nurses to "develop a more critical, politicised stance" so they can work towards reducing inequities rather than just alleviating their effects
- NZNO believes that addressing health inequities within New Zealand is an integral part of the profession's contract with society
- NZNO believes that publicly-funded primary health care nursing services as the key entry point to primary health care are essential to addressing health inequities
- NZNO believes the nursing model of health, with its focus on holism and well-being, provides a practice framework that can be used to empower nurses to tackle health inequities
- NZNO believes nurses must include health determinants in their health assessments of individual clients and in community health assessments

NZNO supports the NZMA's belief: "that all health professionals should be supported and encouraged to act, advise and advocate for action on social determinants of health throughout the population, in addition to concentrating on treating individual patients."

### **NZNO Policy, Regulation & Legal position statement:**

## Conclusion

NZNO believes nurses and nursing work are essential to ensuring health access and equity. It believes nurses must be informed on the causes and effects of health inequities and that nurses have a personal, professional, practice and political responsibility to work towards ameliorating these inequities.

### **A toolbox to tackle inequities in practice:**

*Health impact assessment:* A tool to consider the potential effects of a policy or programme from a number of perspectives including health, environmental, social and economic impacts. <http://www.moh.govt.nz/hiasupportunit>

*Social justice gauge:* The Canadian Nurses Association straightforward and easy to use tool for identifying areas that need to be strengthened in terms of social justice and that also identifies existing strengths in the policy, programme or product being assessed. [http://www.cna-aiic.ca/CNA/documents/pdf/publications/Social\\_Justice\\_2010\\_e.pdf](http://www.cna-aiic.ca/CNA/documents/pdf/publications/Social_Justice_2010_e.pdf)

*Assessment questions:* Having a list of key questions that you can ask a person when undertaking an assessment can help identify issues that need to be addressed and allow appropriate and effective interventions and referrals to take place. Questions such as:

- does the person have a warm house to go home to
- do they have food in the cupboard
- do they have appropriate heating available
- do they have someone at home who can assist them if needed
- do they have someone to look after the children so they can attend their next appointment
- are any preschool children in the house enrolled in early childhood education

Using a social justice and health equity lens to consider the wider circumstances affecting the person's health will allow you to identify appropriate questions to the context that you practice in. Be certain that you are in a position to follow up on any required interventions that you identify – this may be as simple as an appropriate referral.

*Advocacy:* You can play a key role in advocating for health equity. Examples of how you can play a role include:

- making sure your local school or nursing teaches nursing students about the determinants of health and health inequities
- always asking student nurses to address the determinants of health when you are teaching them at the bedside or in the community
- working closely with other members of the interdisciplinary team to shape services and develop programmes that promote and protect people's health, prevent ill health and tackle health inequities
- looking at the policies and guidelines in your workplace to see if they identify health inequities as a priority area for intervention
- volunteering to establish or be involved in a working group to determine best practice around addressing the determinants of health in practice.

### **NZNO Policy, Regulation & Legal position statement:**

NZNO's professional nursing advisers, researchers and policy analysts have expert knowledge and skills on addressing health equity issues. Please contact them if you are wanting further information and support on how to confront health inequities in your practice.

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### Mission statement

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### NZNO Policy, Regulation & Legal position statement:

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