

18 August 2025

Committee Secretary
Justice Select Committee
Parliament Building
Wellington

Cancer Society of New Zealand submission on the Healthy Futures (Pae Ora) Amendment Bill 2025

About the Cancer Society of New Zealand

The Cancer Society of New Zealand is the country's leading organisation dedicated to reducing the incidence and impact of cancer in Aotearoa. We are committed to working with communities and decision makers by providing leadership and advocacy in cancer control, with core services in information and support, research and cancer prevention. CSNZ is committed to reducing cancer inequities through our <u>equity charter</u> to achieve our vision of a future free from cancer.

This submission has been prepared by Rachael Neumann, Head of Advocacy and Public Affairs and Pania Coote, Mana Whakahaere. It has been approved by Nicola Coom, Chief Executive.

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The Cancer Society of New Zealand (Cancer Society) envisions a future free from cancer. Realising this vision requires sustained investment in prevention, screening, early detection, and the elimination of health inequities. The proposed Healthy Futures (Pae Ora) Amendment Bill 2025 does not adequately support these critical components. In its current form, the Bill risks undermining efforts to achieve equitable health outcomes for individuals and communities affected by cancer, particularly those already experiencing systemic disadvantage. For these reasons, the Cancer Society does not support the Bill.

Equity

The Cancer Society does not support the removal of the equity principles from the Pae Ora (Healthy Futures) Act 2022. This change would significantly weaken Health New Zealand's legal obligation to address health inequities and risks entrenching a uniform approach to service delivery—an approach that has consistently failed to meet the needs of many population groups, as evidenced by persistent disparities in cancer outcomes. It would also reverse progress made by the current Pae Ora (Health Futures) Act 2022¹, which responds to the Wai 2575 Health Services and Outcomes Inquiry².

The Bill repeals the health sector principles, including the requirement that services be equitable and proportionate to health needs³. These changes undermine the intent of the original legislation, which was to uphold Te Tiriti o Waitangi and ensure that Māori and other underserved communities receive equitable access to care.

While the Bill introduces a new purpose of ensuring timely access to quality health services, this must apply to all people in Aotearoa New Zealand. To achieve this, Health New Zealand must retain a clear, legislated responsibility to address health inequities. The removal of these obligations contradicts the Government's own 2024–2027 Policy Statement on Health, which identifies equitable access as a system-wide priority⁴.

To improve cancer outcomes and uphold the Crown's commitments under Te Tiriti o Waitangi, the government must ensure that equity remains a foundational principle in health legislation. This includes maintaining legal mechanisms that require Health New Zealand to actively identify and address disparities affecting Māori, Pacific peoples, disabled communities, women, and others who experience systemic barriers to care.

Te Tiriti o Waitangi

The Cancer Society does not support the proposed amendment which removes the requirement for Health New Zealand to maintain systems and processes necessary to understand and uphold Te Tiriti o Waitangi. This change also eliminates key obligations relating

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¹ New Zealand Government. *Pae Ora (Healthy Futures) Act 2022* [Internet]. Wellington: New Zealand Government; 2022 [cited 2025 Aug 18]. Available from: https://www.legislation.govt.nz/act/public/2022/0030/latest/versions.aspx

² Ministry of Health. *Wai 2575 Health Services and Outcomes Inquiry* [Internet]. Wellington: Ministry of Health; [cited 2025 Aug 18]. Available from: https://www.health.govt.nz/maori-health/wai-2575-health-services-and-outcomes-inquiry

³ New Zealand Parliament. *Healthy Futures (Pae Ora) Amendment Bill*. Wellington: New Zealand Government. Available from: https://www.parliament.nz/en/pb/sc/make-a-submission/document/54SCHEA_SCF_4F909A7B-8E87-4FEF-8401-08DDB9140FC1/healthy-futures-pae-ora-amendment-bill

⁴ Minister of Health. Government Policy Statement on Health 2024–2027 [Internet]. Wellington: Ministry of Health; 2024 Jun 30 [cited 2025 Aug 18]. Available from: https://www.health.govt.nz/publications/government-policy-statement-on-health-2024-2027

to kaupapa Māori services, cultural safety, mātauranga Māori, and responsiveness to Māori perspectives in service design and delivery of health services.

These systems and processes are essential for addressing the persistent health inequities experienced by Māori and other population groups impacted by cancer. Their removal undermines the Crown's commitment to Te Tiriti o Waitangi and risks further marginalising communities that already face significant barriers to accessing equitable cancer care.

Iwi-Māori Partnership Boards

The Cancer Society does not support the amendment to remove the requirement for Health New Zealand to engage with Iwi-Māori Partnership Boards when determining priorities for kaupapa Māori investment. This change significantly diminishes the role of Māori leadership in shaping health services that meet the needs of their communities.

Iwi-Māori Partnership Boards play a vital role in ensuring that health services are culturally responsive, locally informed, and aligned with Te Tiriti obligations. Reducing their influence risks further entrenching inequities in cancer outcomes for Māori.

Prevention and health targets

The Cancer Society is concerned that the current focus on narrowly defined health targets risks reducing the scope of the health system to deliver effective prevention strategiesparticularly those that extend beyond immunisation and screening programmes, like reducing smoking, alcohol use and unhealthy eating. While timely access to treatment is important, a health system that prioritises only acute and specialist care overlooks the critical role of prevention in reducing the burden of disease, including cancer.

Skin cancer is a clear example of this missed opportunity. New Zealand has one of the highest incidence and mortality rates of skin cancer in the world, with approximately 90,000 nonmelanoma skin cancers and 2,800 invasive melanomas diagnosed annually. Skin cancer accounts for around 80% of all cancer diagnoses in Aotearoa New Zealand, and costs the health system \$500 million per year, this is projected to reach nearly \$700 million by 2050.

Yet, up to 90% of skin cancers are preventable through appropriate sun protection. Investment in prevention is not only cost-effective but essential. The Skin Cancer Prevention and Early Detection Strategy 2024–2028 estimates that an investment of \$5.5 million in prevention could avert over 418,000 skin cancers, save up to \$700 million in cumulative treatment costs over the next 25 years and deliver a return of up to \$11.90 for every dollar invested⁵.

The Cancer Society urges the government to ensure that health targets do not inadvertently deprioritise prevention. A balanced approach is needed—one that includes measurable targets for reducing modifiable risk factors and investing in long-term strategies that improve population health and reduce future treatment costs.

Repeal of Te Mauri o Rongo - The New Zealand Health Charter

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⁵ Melanoma Network of New Zealand Incorporated. Skin cancer prevention and early detection strategy 2024-2028. New Zealand. [cited 2025 Aug 18]. Available from https://strategy.melnet.org.nz/

The Cancer Society strongly opposes the repeal of Te Mauri o Rongo – The New Zealand Health Charter. The Charter, developed in partnership with health workers and unions, is a statutory requirement under the Pae Ora (Healthy Futures) Act 2022⁶. It sets out shared values and principles to guide how health workers should be treated in the workplace—physically, mentally, and culturally⁷.

The repeal of this Charter would remove a critical framework that supports the wellbeing, safety, and dignity of the health workforce. It would undermine efforts to create culturally safe, respectful, and supportive environments across the health system. This is particularly concerning given the ongoing pressures on the health workforce, including high rates of burnout, exposure to workplace violence, and increasing demands on services. A safe and supported workforce is essential to delivering high-quality, person- and whānau-centred care

Selection of Health New Zealand Board and Public Health Expert Advisory Committee

The Cancer Society does not support the proposed removal of specifications for the Health New Zealand Board and the Public Health Expert Advisory Committee. These specifications are essential to ensuring that governance structures reflect the diversity of our communities and uphold obligations under Te Tiriti o Waitangi.

Removing these provisions risks weakening the health system's ability to address persistent health inequities and respond to critical public health challenges. The absence of clear criteria for board appointments reduces transparency and accountability and may result in governance that does not adequately represent the voices of those most impacted by cancer, including Māori, Pacific peoples, disabled communities, and others experiencing systemic disadvantage.

The Cancer Society urges the Government to retain statutory requirements for diverse and expert representation on both the Health New Zealand Board and the Public Health Expert Advisory Committee to ensure that decision-making is informed, inclusive, and responsive to the needs of all New Zealanders.

Support for strengthening health infrastructure planning

The Cancer Society supports commitment to planning for sustainable health infrastructure. This is a positive step toward ensuring that the health system is equipped to meet future demands and deliver equitable care.

To strengthen this commitment, the Cancer Society recommends that any infrastructure planning processes include formal mechanisms for engagement with system users—particularly patients, whānau, and the organisations that represent them. Meaningful engagement will ensure that infrastructure investments are informed by lived experience and community needs, and that they contribute to a health system that is person- and whānau-centred.

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⁶ New Zealand Government. *Pae Ora (Healthy Futures) Act 2022* [Internet]. Wellington: New Zealand Government; 2022 [cited 2025 Aug 18]. Available from: https://www.legislation.govt.nz/act/public/2022/0030/latest/versions.aspx

⁷ Health New Zealand. Te Mauri o Rongo. The New Zealand Health Charter. Wellington. New Zealand. [cited 18 August 2025]. Available from: https://www.tewhatuora.govt.nz/assets/For-the-health-sector/Te-Mauri-o-Rongo-NZ-Health-Charter-/Te-Mauri-o-Rongo-NZ-Health-Charter_final-22-Aug.pdf