

NEW ZEALAND

1. DEMOGRAPHICS, GENDER AND POVERTY

The resident population of New Zealand on 30 June 2005 was estimated at 4 098 900, representing an increase of 37 500 or 0.9% over the previous year. There were an estimated 2 017 000 male and 2 081 800 female residents – around 103 women for every 100 men. Women have outnumbered men since the late 1960s.

New Zealand continues to give priority to ensuring that Official Development Assistance (ODA) activities foster the role of women in development. The ODA programme recognizes that the roles that women play, their economic contribution and the constraints on their time and activity, are essential factors in sustainable development. The review of the Women in Development (WID) Plan of Action concluded that significant progress had been made both in terms of increasing support for WID-specific activities and in integrating gender considerations into all projects and programmes.

Population	[Total]	4 098 900 (resident)	Life expectancy at birth (years)	[Both]	...
	[0-14 years]	880 070 (21.47%)		[Male]	68.05 est (2001)
	[65+ years]	497 610 (12.14%)		[Female]	72.03 est (2001)
Crude birth rate (per 1000 resident population)		14.30 est (2004)	Total fertility rate		1.95 (2003)
Crude death rate (per 1000 resident population)		7.00 est (2004)	% of population served with safe water	[Total]	90.00* (2002)
				[Urban]	97.00 (2002)
				[Rural]	81.00 (2002)
Infant mortality rate (per 1000 live births)		5.58 est (2004)	% of population with adequate sanitary facilities	[Total]	100.00 (2002)
				[Urban]	100.00 (2002)
				[Rural]	100.00 (2002)
Maternal mortality ratio (per 100 000 live births)		5.30 (2001)			

est – Estimate

* - Revised data

2. POLITICAL AND SOCIOECONOMIC SITUATION

2.1 Political situation

Elections were last held in September 2005. A minority coalition Government was formed between two parties of the centre-left, the New Zealand Labour Party and the Progressive Party. Elections are held every three years under a mixed-member proportional representation system. There are 120 seats in Parliament and there is no upper house. The next election is due in late 2008.

2.2 Economic situation

Economic activity has been very strong over the past four years. Most recently, buoyancy due to immigration has outweighed the negative impulse from an appreciating exchange rate. This has left productive resources stretched. Rising housing prices are providing further impetus to domestic demand. However, the pace of activity has slowed in recent months.

The moderate headline inflation rate reflects the net outcome of falling import prices and high domestically generated inflation. On current monetary policy settings, these factors are likely to continue balancing out and inflation should remain under control.

The New Zealand economy has averaged 4.0% annual growth in the past six years. Over the period 2003-2005, the domestic economy, employment and income growth and high international commodity prices have been the main drivers of growth. Annual growth for the 2002/03 and 2003/04 years was 4.2% and 4.7% respectively, growing to 4.8% in 2004/05. Annual average growth was 2.7% for the year ended September 2005.

3. HEALTH SITUATION

3.1 Health trends

New Zealand has been successful in raising the average life expectancy of its population over the past century. A newborn girl can expect to live 72.03 years and a newborn boy 68.05 years. A temperate climate, low population density, lack of heavy industry and good nutrition gave New Zealand an early advantage over other nations in terms of health conditions. The infant mortality rate has fallen steadily in association with a major reduction in infectious diseases (and respiratory diseases), which were previously the main causes of death in the country.

AIDS was first diagnosed in New Zealand in 1983 and was made a notifiable disease in 1984. As of 31 December 2004, 843 cumulative cases had been notified and 2261 people had been reported to have tested HIV-positive.

Malignant neoplasms, ischaemic heart disease and cerebrovascular disease were the leading causes of death in New Zealand from 1997 to 2002. In 2002, they collectively accounted for almost 60% of deaths (cancer 28%, ischaemic heart disease 22%, and cerebrovascular disease 10%).

In terms of health risk factors influenced by individual behaviour, use of tobacco products declined significantly during the period from 1976 to 1992, levelling off from 1992 to 1996, but subsequently falling steadily. However, the rate of smoking is not even among all groups within the population. An estimated 50% of Māori and 33% of Pacific island people smoke, compared with 23% of the New Zealand European population, a 30% decline since 1997. People are smoking fewer cigarettes per day. The Government is also concerned about reducing overconsumption of alcohol, especially by men and young people; reducing the average fat intake; and promoting physical exercise. Mean alcohol consumption in 2003 was 10.8 litres of pure alcohol for all drinkers. In 2003, 88.5% of men and 80.3% of women aged 15–64 years drank alcohol. In 2003, drinking and driving contributed to 141 deaths, 555 serious injuries and 1398 minor injuries, and 31% of all road deaths were caused by drinking-related crashes.

New Zealand has low levels of air pollution compared with other similar countries, but a relatively high incidence of waterborne diseases, such as campylobacteriosis, giardiasis and cryptosporidiosis compared with other developed countries. There is also evidence of pollution of recreational waters. It is estimated that 90.0% of the population have an improved drinking water source.

3.2 Health systems

The New Zealand Health Strategy (NZHS) and the New Zealand Disability Strategy (NZDS) provide the framework for the health sector's overall direction. These strategies take a population approach to identify the areas where intervention will make a contribution to the goal of healthy and independent New Zealanders. The two strategies sit alongside each other and guide the development and implementation of more detailed service, specific health-issue and population-group strategies and action plans.

The Ministry of Health aims to ensure the health and disability support system works for New Zealanders. It is the Government's primary advisory on health policy and disability support services.

District Health Boards (DHBs) have the responsibility for improving, promoting and protecting the health and independence of a geographically defined population. Twenty-one DHBs are in place to plan, fund and ensure the provision of health and disability services (including hospital services) for their populations.

The Government is placing particular emphasis on the role of primary care to achieve health improvements. DHBs are responsible for establishing, funding and monitoring primary health organizations (PHOs). PHOs have been established to ensure early and affordable access to primary care services and to focus on health promotion and disease prevention for their enrolled populations. By April 2005, more than 3.8 million New Zealanders (95% of the population) were enrolled in PHOs.

The Minister of Health has overall responsibility for the health and disability support system. The Minister determines the content of the NZHS, works through the Ministry of Health to enter into accountability arrangements with DHBs and agrees with government colleagues how much public money will be spent on the delivery of public services.

4. NATIONAL HEALTH PLAN AND PRIORITIES

The Government's overall direction for the health and disability sector places particular emphasis on improving population health outcomes and reducing disparities among all New Zealanders, including Māori and Pacific peoples. Thirteen population health objectives, set out in the New Zealand Health Strategy, aim to:

- reduce smoking;
- improve nutrition;
- reduce obesity;
- increase the level of physical activity;
- reduce the rate of suicide and suicide attempts;
- minimize harm caused by alcohol and illicit and other drug use to both individuals and the community;
- reduce the incidence and impact of cancer;
- reduce the incidence and impact of cardiovascular disease;
- reduce the incidence and impact of diabetes;
- improve oral health;
- reduce violence in interpersonal relationships, families, schools and communities;
- improve the health status of people with severe mental illness; and
- ensure access to appropriate child health care services, including 'well child' and family health care and immunization.

Toolkits identify appropriate actions to address the priority objectives, while DHB accountability documents contain specific targets to give effect to the Strategy.

The New Zealand Disability Strategy guides action to promote a more inclusive society which values disabled people's lives and enhances their full participation in society.

Population- or illness-specific strategies include the Child Health Strategy, Achieving Health for All People (public health), the Health of Older People Strategy, the *Korowai Oronga* (the Māori Health Strategy), the Pacific Health and Disability Action Plan, the National Mental Health Strategy and the Primary Health Care Strategy.

The Ministry of Health is responsible for planning the national response to health service emergencies of all kinds. The Ministry is working on a number of projects that will collectively form the National Health Emergency Plan (NHEP), of which infectious diseases is one part. The NHEP describes the larger context within which the Ministry of Health and all New Zealand health services will function during any national health-related emergency, including New Zealand's responsibilities under international agreements and regulations.

5. MAJOR INFORMATION SOURCES

New Zealand Ministry of Health

New Zealand Health Information Service (<http://www.nzhis.govt.nz>)

Statistics New Zealand (<http://www.stats.govt.nz>)

6. ADDRESSES

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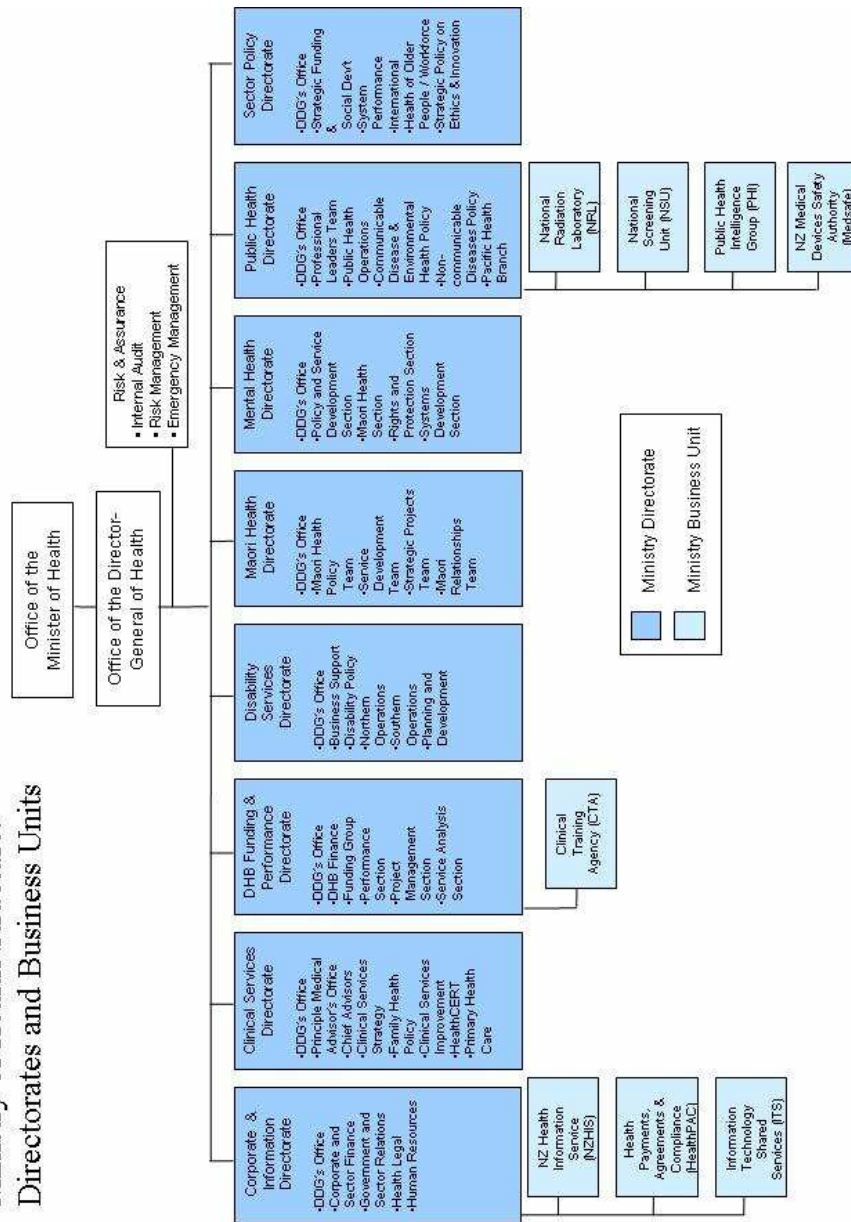
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ORGANIZATIONAL CHART: MINISTRY OF HEALTH

Ministry of Health Structure:
Directorates and Business Units



COUNTRY HEALTH INFORMATION PROFILE

NEW ZEALAND

WESTERN PACIFIC REGION HEALTH DATABANK, 2006 Revision

	INDICATORS	DATA			Year	Source
		Total	Male	Female		
1	Area (1 000 km ²)	270.69 ^b			2005	1
2	Estimated population ('000s)	4098.90 ⁱ	2017.10 ⁱ	2081.80 ⁱ	2005 est	1
3	Annual population growth rate (%)	0.90 ⁱ	...	...	2005 est	1
4	Percentage of population					
	- 0–14 years	21.47 ⁱ	...	...	2005 est	1
	- 65+ years	12.14 ⁱ	...	...	2005 est	1
5	Urban population (%)	85.90	...	...	2003	3
6	Crude birth rate (per 1 000 population)	14.30 ⁱ	14.89 ⁱ	13.73 ⁱ	2004 est	1
7	Crude death rate (per 1 000 population)	7.00 ⁱ	7.05 ⁱ	6.95 ⁱ	2004 est	1
8	Rate of natural increase of population (% per annum)	0.73 ^a	...	...	2004	
9	Life expectancy (years)					
	- at birth	...	68.05	72.03	2001 est	4
	- Health-adjusted Life Expectancy (HALE) at age 60	...	21.08	24.00	2001 est	4
10	Adult literacy rate (%)	...	...	...
11	Neonatal mortality rate (per 1 000 live births)	3.10	...	...	2004 est	1
12	Infant mortality rate (per 1 000 live births)	5.58	...	...	2004 est	1
13	Under-five mortality rate (per 1 000 live births)	6.34	...	...	2003	1
14	Total fertility rate (women aged 15–49 years)			1.95	2003	1
15	Maternal mortality ratio (per 100 000 live births)			5.30	2001	5
16	Percentage of newborn infants weighing at least 2500 g at birth	93.00	...	...	2003	5
17	Prevalence of underweight children under five years of age	...	...	...
18	Percentage of pregnant women with anaemia			27.00	1998	4
19	Immunization coverage for infants (%)					
	- BCG	...	...	...
	- DTP3	...	...	...
	- OPV3	...	...	...
	- Measles	...	...	...
	- Hepatitis B III	...	...	...
20	MCH coverage (pregnancies, deliveries, infant care)					
	- Percentage of pregnant women cared for by skilled health personnel			100.00	2001	5
	- Percentage of pregnant women immunized with tetanus toxoid (TT2)			...		
	- Percentage of deliveries at home by skilled health personnel (as % of total deliveries)			...		
	- Percentage of deliveries in health facilities (as % of total deliveries)			96.60	2001 est	5
21	Percentage of women in the reproductive age group using modern contraceptive methods			72.00	2002 est	6
22	Condom use rate of the contraceptive prevalence rate	...	...	...
23	HIV prevalence among 15–24 year-old pregnant women			...		
24	Number of children orphaned by HIV/AIDS ^{ab}	...	...	...

NEW ZEALAND

INDICATORS		DATA			Year	Source			
		Total	Urban	Rural					
25	Proportion of population with sustainable access to an improved water source	90.00 °	97.00	81.00	2002	2			
26	Proportion of population with access to improved sanitation	100.00	100.00	100.00	2002	7			
27	Proportion of the population using solid fuels for cooking or heating (%)	<5.00	...	...	2003	8	
28	Proportion of households with access to secure tenure	...	...	...		
29	Proportion of vehicles using unleaded gasoline (%)	...	...	...		
30	Health care waste generation (metric tons per year)	...	...	...		
31	Human development index	0.93	...	...	2003	9	
32	Per capita GDP at current market prices (US\$)	23 200.00	...	...	2003	1	
33	Rate of growth of per capita GDP (%)	4.80	...	...	2004	1	
34	Health expenditure								
	Total health expenditure (National medical care expenditure)								
	- amount (in million US\$)			7383.42	2005	2			
	- total health expenditure on health as % of GDP			7.27	2004	2			
	- per capita total expenditure on health (in US\$)			1801.62	2005	2			
	Government expenditure on health								
	- amount (in million US\$)			5781.00	2005	2			
	- general government expenditure on health as % of total expenditure on health			78.30	2005	2			
	- general government expenditure on health as % of total general government expenditure			20.00	2005	2			
	External source of government health expenditure								
	- external resources for health as % of general government expenditure on health			4.60	2002	2			
	Private health expenditure								
	- private expenditure on health as % of total expenditure on health			21.70	2005	2			
	Exchange rate in US\$ of local currency is: 1 US\$ =			1.52 NZD	2006	2			
35	Health insurance coverage as % of total population			...					
INDICATORS		DATA			Year	Source			
		Total	Male	Female	Total	Male	Female		
		Number			Rate per 10 000 resident population				
36	Health workforce								
	- physicians	8790	5754	3036	21.90 °	14.40 °	7.50 °	2003	5
	- dentists	1582	1182	400	5.50 °	4.10 °	1.40 °	2003	5
	- pharmacists	3808	10.20	2002	11
	- nurses	34 660 g	2205 g	31 497 g	85.40 °	2004	5
	- midwives	3780 h	11 h	3683 h	9.30 °	2004	5
	- other nursing / auxiliary staff		
	- other paramedical staff (e.g. medical assistants, laboratory technicians, X-ray technicians)		
	- other health personnel (health inspectors, assistant sanitarians, traditional workers, etc.)		
37	Yearly new graduates – physicians					
38	Yearly new graduates – nurses					

COUNTRY HEALTH INFORMATION PROFILE

INDICATORS		DATA						Year	Source
		Total	Male	Female	Total	Male	Female		
39	Ten leading causes of morbidity	Number			Rate per 100 000 , age-standardized to Segi's world population				
	1. Malignant neoplasms	41 585	22 161	19 424	1054.98	1144.98	968.01	2002/2003	5
	2. Ischaemic heart diseases	27 295	16 808	10 487	692.40	868.41	522.63	2002/2003	5
	3. Complications of labour and delivery	28 306	NA	28 306	718.04	NA	1410.65	2002/2003	5
	4. Other forms of heart disease	20 107	10 773	9334	510.06	556.60	465.17	2002/2003	5
	5. Maternal care related to the fetus and amniotic cavity and possible delivery problems	18 901	NA	18 901	479.47	NA	941.94	2002/2003	5
	6. Chronic lower respiratory diseases	18 450	8819	9631	468.02	455.64	479.97	2002/2003	5
	7. Arthropathies	15 688	8216	7472	397.96	424.49	372.37	2002/2003	5
	8. Symptoms and signs involving the circulatory and respiratory systems	18 201	9164	9037	461.71	473.47	450.36	2002/2003	5
	9. Symptoms and signs involving the digestive system and abdomen	18 053	6179	11 874	457.95	319.25	591.75	2002/2003	5
	10. Pregnancy with abortive outcome	13 917	NA	13 917	353.04	NA	693.56	2002/2003	5
40	Ten leading causes of mortality	Number			Rate per 100 000 population				
	1. Malignant neoplasms	7800	4125	3675	197.86	213.12	183.15	2002	5
	2. Ischaemic heart diseases	6287	3333	2954	159.48	172.20	147.21	2002	5
	3. Cerebrovascular diseases	2829	1078	1751	71.76	55.70	87.26	2002	5
	4. Chronic lower respiratory diseases	1748	943	805	44.34	48.72	40.11	2002	5
	5. Other forms of heart disease	1293	579	714	32.80	29.91	35.58	2002	5
	6. Diabetes mellitus	805	427	378	20.42	22.06	15.83	2002	5
	7. Organic, including symptomatic, mental disorders	648	203	445	16.43	10.49	22.18	2002	5
	8. Diseases of arteries, arterioles and capillaries	558	305	253	14.16	15.76	12.61	2002	5
	9. Transport accidents	531	382	149	13.47	19.74	7.43	2002	5
	10. Intentional self-harm	465	352	113	11.80	18.18	5.63	2002	5
41	Selected diseases under the WHO-EPI	Number of cases			Number of deaths				
	- Diphtheria	0	0	0	0	0	0	2004	8
	- Pertussis (whooping cough)	3689	...	...	...	...	...	2004	8
	- Tetanus	1	...	...	...	...	...	2004	8
	- Neonatal tetanus	0	0	0	0	0	0	2004	8
	- Poliomyelitis	0	0	0	0	0	0	2004	8
	- Hib meningitis	1	...	...	...	...	...	2004	8
	- Measles	33	...	...	...	...	...	2004	8
	- Mumps	45	...	...	...	...	...	2004	8
	- Rubella	25	...	...	...	...	...	2004	8
	- Congenital rubella syndrome	0	0	0	0	0	0	2004	8

INDICATORS		DATA						Year	Source
		Total	Male	Female	Total	Male	Female		
42	Selected communicable diseases	Number of cases ^{aa}			Number of deaths				
	Hepatitis viral								
	- Type A	49	18	31	0	0	0	2004	C: 8, D: 10
	- Type B	39	23	16	16	12	4	2004	C: 8, D: 10
	- Type C (one case with unspecified gender)	24 ^c	14 ^c	9 ^c	15	10	5	2004	C: 8, D: 10
	- Type E	...	...	...	...	...	...
	- Unspecified	0	0	0	0	0	0	2004	10
	Cholera	1	...	...	0	0	0	2005	8
	Typhoid fever	30	...	...	0	0	0	2005	8
	Encephalitis	0	0	0	0	0	0	2005	8
	Plague	0	0	0	0	0	0	2004	8
	Syphilis	...	...	...	0	0	0	2004	10
	Gonorrhoea	...	...	...	0	0	0	2004	10
	Leprosy	3	...	...	...	...	...	2004	8
Malaria (1 unspecified gender case)	33 ^d	26 ^d	6 ^d	0	0	0	2004	10	
Dengue/DHF	8	5	3	0	0	0	2004	10	
43	Malaria	Prevalence rates			Death rates				
	- Rates associated with malaria (per 100 000 population)	...	...	...	...	...	...
	- Proportion of population in malaria-risk areas using effective malaria prevention measures ^e						...		
	- Proportion of population in malaria-risk areas using effective malaria treatment measures ^f						...		
44	Tuberculosis	Number of cases			Number of deaths				
	- All types	373	...	...	...	...	...	2004	8
	- New pulmonary tuberculosis (smear-positive)	112	...	...	...	...	...	2004	8
		Prevalence rates			Death rates				
	- Rates associated with tuberculosis (per 100 000 population)	11.00	...	...	1.00	...	...	2004	8
		Detection rates			Success rates				
- Proportion of tuberculosis cases detected and cured under directly observed treatment, short-course (DOTS)	59.00	...	...	36.00 (2003)	...	...	2004	8	
		Cases = publicly funded hospital discharges (2002/2003)			Number of deaths (2002)				
45	Acute respiratory infections	28 632	15 454	13 178	481	177	304		5
46	Diarrhoeal diseases	6509	3390	3119	17	3	14		5
47	Cancers	Cases = Registrations			Number of deaths				
	All cancers (malignant neoplasms only)	17 943	9399	8544	7800	4125	3675	2002	5
	- Trachea, bronchus and lung	1619	931	688	1471	866	605	2002	5
	- Stomach	408	264	144	301	189	112	2002	5
	- Colon and rectum	2588	1208	1380	1135	590	545	2002	5
	- Lip, oral cavity and pharynx	262	164	98	122	83	39	2002	5
	- Liver	167	111	56	153	94	59	2002	5
	- Cervix			180			65	2002	5
- Leukaemia	695	392	303	236	128	108	2002	5	

COUNTRY HEALTH INFORMATION PROFILE

INDICATORS		DATA						Year	Source
		Total	Male	Female	Total	Male	Female		
48	Circulatory	Cases = publicly funded hospital discharges (2002/2003)			Number of deaths (2002)				
	All circulatory system diseases	69 768	38 719	31 049	11 402	5449	5953		5
	- Ischaemic heart disease	27 295	16 808	10 487	6287	3333	2954		5
	- Acute myocardial infarction	11 582	7272	4310	3254	1699	1555		5
	- Rheumatic fever and rheumatic heart diseases	703	329	374	150	55	95		5
	- Cerebrovascular diseases	8681	4131	4550	2829	1078	1751		5
	- Hypertension	857	335	522	219	74	145		5
49	Maternal causes	Cases = publicly funded hospital discharges (2002/2003)			Number of deaths (2002)				
	- Haemorrhage			5521			0		5
	- Abortion			15 123			1		5
	- Eclampsia			71			0		5
	- Sepsis			369			0		5
	- Obstructed labour			2805			0		5
			Cases = publicly funded hospital discharges (2002/2003)			Number of deaths (2002)			
50	Diabetes mellitus	7139	3825	3314	805	427	378		5
51	Mental disorders	21 999	10 391	11 608	725	252	473		5
52	Injuries	Cases = publicly funded hospital discharges (2002/2003)			Number of deaths (2002)				
	- All types	135 489	72 170	63 319	1695	1124	571		5
	- Motor and other vehicle accidents	12 603	7925	4678	531	382	149		5
	- Suicide	5292	1682	3610	465	352	113		5
	- Homicide and violence	4316	3252	1064	69	38	31		5
	- Occupational injuries	229 489	170 448	59 041	85	80	5		7
53	Proportion of population with access to affordable essential drugs on a sustainable basis			...					
54	Health infrastructure	Number			Number of beds				
	Public health facilities			85			12 484	2002	5
	- General hospitals			...			...
	- Specialized hospitals			...			...
	- District/first-level referral hospitals			...			...
	- Primary health care centres			...			...
	Private hospitals			360			11 341	2002	5
Notes:									
Red text	Millennium Development Goals (MDG) indicators								
...	Data not available								
est	Estimate								
NA	Not applicable								
C	Cases								
D	Deaths								
aa	Figures refer to number of new reported cases.								
ab	Proxy indicator for MDG indicator 20: Ratio of school attendance of orphans and school attendance of non-orphans age 10-14 years.								
a	Computed by Health Information and Evidence for Policy Unit, WHO Regional Office for the Western Pacific.								
b	Excludes inland waters and oceanic areas.								
c	Revised data.								
d	Imported cases.								

e	Prevention is measured by the percentage of children ages 0–59 months sleeping under insecticide-treated bednets.
f	Treatment is measured by the proportion of children ages 0–59 months who were ill with the fever in the two weeks before the survey and who received appropriate antimalarial drugs.
g	Figure refers to nurses (registered) and midwives. There were 958 registered nurses without reported gender.
h	Figure also included in the registered nurses. There were 86 midwives without registered gender.
i	Figure refers to resident population.
Sources:	
1	<i>Demographic trends 2005</i> . Statistics New Zealand (http://www.stats.govt.nz)
2	Information furnished by the Ministry of Health, New Zealand, February 2006
3	<i>Urban and rural areas 2003</i> . New York, United Nations Department of Economic and Social Affairs, Population Division, 2004
4	Information furnished by the Ministry of Health, New Zealand, 14 July 2005
5	New Zealand Health Information Service (http://www.nzhis.govt.nz)
6	<i>2002 ESCAP population data sheet</i> . Bangkok, Economic and Social Commission for Asia and the Pacific, 2002.
7	Information provided by WHO Representative in the South Pacific, 05 April 2004
8	WHO Regional Office for the Western Pacific, data received from technical units
9	<i>Human development report 2005</i> . New York, United Nations Development Programme, 2005.
10	Environmental science and research, New Zealand
11	New Zealand Pharmaceutical Society