

# CHOOSING WISELY MEANS CHOOSING EQUITY

**Anna Adcock** (Ngāti Mutunga), project lead for Choosing Wisely Means Choosing Equity, [anna.adcock@live.com](mailto:anna.adcock@live.com);  
**Prof David Tipene-Leach** (Ngāti Kahungunu, Ngāti Kere), Chair, Te Ohu Rata o Aotearoa (Te ORA); **Dr Derek Sherwood**, Choosing Wisely Clinical Lead; **Dr Graeme Lindsay**, Choosing Wisely medical adviser; **Sue Ineson**, Choosing Wisely Facilitator, [sue.ineson@cmc.co.nz](mailto:sue.ineson@cmc.co.nz)

Choosing Wisely NZ in partnership with Te Ohu Rata o Aotearoa (Māori Medical Practitioners Association)

## CHOOSING WISELY AND EQUITY

The Choosing Wisely NZ campaign seeks to:

- reduce harm from unnecessary and low-value tests and treatment
- avoid making health inequities worse, and to help reduce health inequities.

Health care interventions or campaigns have the tendency to widen inequities, as they are taken up first by those in society with the most resources and least need.<sup>1</sup>

As Choosing Wisely is adopted in Aotearoa, care must be taken to ensure that it does not increase existing inequities for Māori who already receive less care from and less satisfaction with health services.

## FOUR QUESTIONS TO ASK YOUR HEALTH PROFESSIONAL

- 1 DO I REALLY NEED THIS TEST, TREATMENT OR PROCEDURE?
- 2 WHAT ARE THE RISKS?
- 3 ARE THERE SIMPLER, SAFER OPTIONS?
- 4 WHAT IF I DON'T DO ANYTHING?

"Do I really need this test, treatment, or procedure?"  
That one's actually quite tricky. I'm not sure that I would be comfortable myself asking that of a doctor who is the one that's providing this opportunity or recommending that I get this treatment... particularly for people who still find that the power imbalance of a doctor patient relationship is an issue.

[These questions are] quite confronting... you could make it more like four conversations or discussions... not you know, asking your doctor, because that sounds a bit scary.

I think often it's a big barrier just getting to the doctor in the first place, and then once you get there I think it's going to be a lot harder to question the doctor. Because it's taken quite a lot of effort for you to get there, because of money, transport, GP availability, everything like that.

(Ref focus group of 6 Māori medical students at Otago medical school)

## "ASKING MORE QUESTIONS" ALONE WILL NOT IMPROVE EQUITY IN SHARED DECISION-MAKING

For example, Māori consumers are consistently and significantly less likely to<sup>2</sup>:

- Always get answers they could understand when asking a doctor important questions
- Have their condition explained to them in a way they could completely understand
- Always feel that doctors listened to what they had to say
- Always feel that nurses listened to what they had to say.

Encouraging underserved groups to just "ask more questions" is not addressing the barriers to shared decision-making.

## A STUDY TO IMPROVE SHARED DECISION-MAKING WITH MĀORI

### STUDY AIM

Develop an in-depth understanding of Māori perspectives on health care shared decision-making, and make recommendations for strategies to inform an equity focused Choosing Wisely (CW) campaign in Aotearoa.

### OBJECTIVES

Explore Māori health consumers' and health professionals' feelings and advice about CW, and their experiences of and recommendations for shared decision-making.

Make recommendations for practical, cost-effective strategies to improve shared decision-making with Māori.

### KAUPAPA MĀORI RESEARCH METHODOLOGY

This qualitative Kaupapa Māori (by Māori, for Māori) Research seeks to be transformative with findings used to inform health service delivery to be more responsive to Māori.

### PLANNED RESEARCH

The research will address the question of how to implement CW in an appropriate way for Māori.

This will be answered through:

- a literature review,
- qualitative interviews with Māori whānau and health professionals (with data analysed thematically),
- the development of recommendations for strategies to improve shared decision-making for Māori.

### CO-CREATED WITH PATIENTS

A Reference Group including Māori consumers were involved in the research proposal development that is presented as this "seed" presentation, and will continue to advise the research team during the implementation of the project and interpretation of findings.

Participants will also be invited to check the interpretation of data and appropriateness of recommendations/proposed strategies.

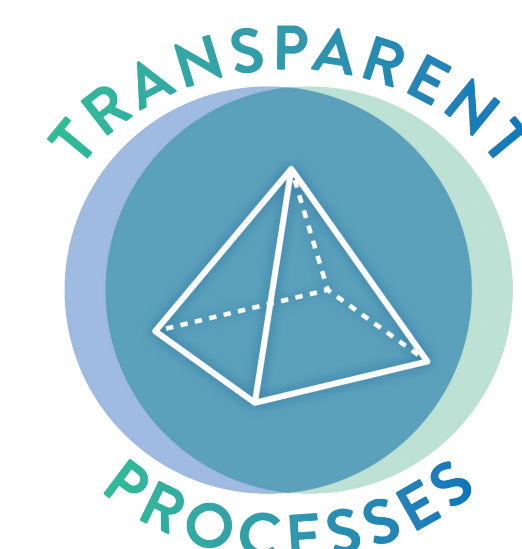
### POTENTIAL OR ACTUAL IMPACT

Results will be shared with interested groups as well as published in an academic journal.

The potential impact is more equitable shared decision-making between health professionals and Māori.



## CHOOSING WISELY PRINCIPLES



<sup>1</sup> Rose G. Sick individuals and sick populations. Int J Epidemiol. 2001 Jun 1;30(3):427-32.  
<sup>2</sup> Health Quality and Safety Commission. Patient experience survey 2018.