



# NEWSLETTER

## Bioethics Research Centre

University of Otago  
Te Whare Wananga o Otago

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### Editorial

This edition of the Newsletter is dominated by discussion of legislative changes in New Zealand. We make no apology for this. In social ethics there is an inevitable convergence of ethical and political issues, and health care is an area of particular vulnerability to legislative change. Three major pieces of legislation occupy our attention: the new Mental Health Act (discussed in Law Notes); the implications for research subjects of the changes to the Accident Compensation scheme (discussed in Readers' Views); and the major restructuring of the health care system proposal in the Health and Disability Services Bill, but already foreshadowed by the Green and White Paper, *Your Health and the Public Health*. We have presented this last issue in the form of a debate of the question: "Are the changes to the health system an unethical experiment?" We are particularly fortunate in having the Minister of Health as a contributor to this debate, evidence of his particular concern that the ethical aspects of the changes are fully and openly debated.

Since some readers will not be familiar with the details of the proposed changes to the New Zealand health care system, may we briefly then summarise as follows: The system of provision of health care by fourteen area health boards is to be replaced by four Regional Health Authorities (RHAs). The RHAs will be responsible for the purchasing (but not the provision) of services. They will purchase them from providers in both the public and the private/voluntary sector by means of contracts. The services previously provided by Health boards in public hospitals and other facilities will now be provided by Crown Health Enterprises (CHEs), which will operate

as profitmaking enterprises. The services which the RHAs must purchase will be specified by the Minister, following advice from the Core Services Committee. Public health provision will be separately funded and will be determined by the Public Health Commission. In addition to these organisational changes, a system of part charging has been introduced to the (formerly free) secondary care sector, with exemption from charges or reduction in charges determined by income level.

It is against this background that Dr Holmes, Professor Malcolm and Mr Upton debate the issue of the ethical justification for the changes. Our three contributors wrote their statements quite independently, without knowledge of the other statements. It is interesting to note the similarity of their identification of the main ethical issues, even though their conclusions are quite different.

It is not appropriate for a Centre of our type to be partisan. Our task, as our University connection indicates, is to promote reasoned and free debate on what is undeniably a central issue of social concern. Each of our contributors to the debate offers a view on whether the changes are ethically justified and on what the outcomes in terms of social benefit are likely to be. We hope that our readers will continue the debate by offering their comments for publication in future issues.

Alastair V. Campbell  
Director

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