

Editorial

Tony Townsend has been a general practitioner for 30 years. Although he has dabbled in medical politics, medical ethics, community-based teaching, university-based teaching, quality improvement and assessment, his passion remains clinical general practice. He is currently a full-time general practitioner in Whangamata.



Developing competence in cross-cultural consultations

I thought that I would simply reprint the accompanying table and charts as an introduction to this issue as they really speak for themselves.

Given the current ethnic disparity in morbidity and mortality and the projected increases in the Maori and Pacific populations in New Zealand, developing cultural competency is becoming increasingly important for all of us. In this issue cultural competence is discussed from several perspectives; political, theoretical and practical. For most of us it is the practical suggestions that we can incorporate into our professional lives immediately that are the most important

Table 1. Projected Ethnic Populations of New Zealand, by Sex and Age, 2001(base)–2021¹

Age	Total All Ages			
Sex	Total Sex			
Series	Series 6*			
Ethnicity	European	Maori	Asian	Pacific
At 30 June				
2001	3,074,000	585,900	272,500	261,800
2006	3,158,700	629,900	391,800	299,000
2011	3,198,500	673,800	476,000	337,100
2016	3,218,000	715,700	572,600	375,600
2021	3,226,400	758,100	667,100	417,000

* Series 6: Assuming Medium Fertility, Medium Mortality, Medium Annual Net Migration and Medium Inter-ethnic Mobility

Ethnic mortality trends²

Figure 1. Life expectancy: males, prioritised

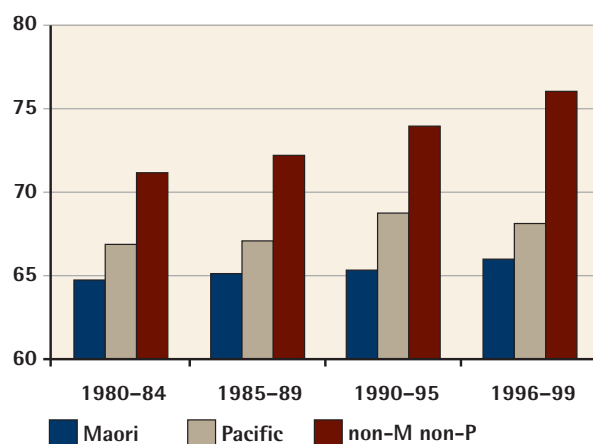
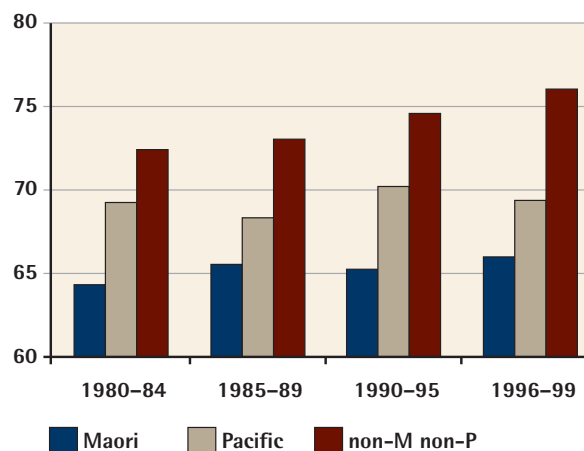


Figure 2. Life expectancy: females, prioritised



but these need to relate to cross-cultural theory and, in New Zealand, at the present time, to political reality.

It has been an interesting exercise trying to get papers together for this issue. We would have had more Pacific contributions but unfortunately a relative of one of the potential contributors was lost at sea and then King Taufa'ahau Tupou IV died and this further complicated matters. We are therefore most grateful for

Professor Finau's contribution championing cultural democracy.

We have come a long way since the launching of the Maori faculty of the College in 2002 but we still have a long way to go. Hopefully, the changes that we make now to improve our cross-cultural expertise will result in improved health status for Maori and Pacific people and the mortality graphs will eventually merge so that we will be able to talk

about the health of New Zealanders without having to take into account differences in ethnicity.

For those of you who are musically inclined, listen to Whirimako Black singing classic soul in Te Reo Maori and you will gain some insight into why both celebrating cultural traditions and enhancing cross-cultural blending are important in the preservation of peace and understanding and, in our profession, the pursuit of health.

References

1. <http://xtabs.stats.govt.nz/eng/TableView/wdsview/print.asp>
 2. Blakely T, Robson B, Tobias M, Ajwani S, Bonne M. Decades of disparity: Ethnic mortality trends in New Zealand 1980-1999. <http://www.wnmeds.ac.nz/academic/dph/research/HIRP/nzcms/DoDMasterPresentation2003.pdf>
-