

## Dec 2007: Commentary by West Auckland GP Jonathan Simon

### A LETTER FROM THE WILD WEST

From West Auckland Jonathan Simon

I have been working as a GP in West Auckland for the past two years and before that was interested in the process that had allowed the spraying of a large population of humans and the occasional moth.

The Report of the ombudsman was released last week (12 December), "Report of the Opinion of Ombudsman Mel Smith on complaints arising from Aerial spraying of the biological insecticide Foray 48b on the population of parts of Auckland and Hamilton to destroy incursions of painted apple moths, and asian gypsy moths, respectively during 2002 - 2004";

On 28th April 2003 a complaint was received from Ms Jane Schaverien against the Ministry of Agriculture and Fisheries and Waitakere Council.

She is a concerned citizen who worked in the area at the time of the spraying. This set in motion the process that would involve the Ombudsman and take 4.5 years to reach publication.

She complained that the Ministry of Health had failed to pursue its obligations to protect the health of the community and had abdicated those responsibilities to MAF.

Ms Schaverien sent out a press release at the time of Ombudsman's report, it is helpful to reproduce her take on the report:

"Ombudsman Mel Smith states unequivocally in his report that the spray Foray 48B (the spray used in Auckland and Hamilton against biosecurity incursions in 1996 and 2002-2004) has not been proven "safe"; contrary to MAF, Ministry of Health, Cabinet, and backbenchers' assurances to the affected populations.

Mr Smith is in no doubt that people suffered harm from the spray.

He states that: [In the event of future spraying of human populations with pesticide] "the spraying agency must provide full and accurate information &hellip;about the contents of the spray. It should also unequivocally acknowledge that there may be harm caused to some people residing or present within the spray zone." Mr Smith's report vindicates the claims of the communities affected by aerial spraying with Foray 48B and of their spokespeople.

Findings and recommendations from the Office of the Ombudsmen are not easily ignored by governments. They will be pursued by the Office of the Ombudsmen under S22 of the Ombudsmen Act to ensure they are implemented.

The key recommendations of this report, which should be implemented, are as follows:

- Development of a fast track process for the Environment Court to ensure that in the event of a biosecurity incursion for which aerial spraying may be the preferred response, the needs of people and the views of the community, cannot be ignored or sidelined. Amendments to the relevant legislation are, Mr Smith says, to be implemented "as a matter of urgency";
- The Ministry of Health must not abdicate its responsibility under the Health Act 1956, allowing another government department to take responsibility for human health, as it did when allowing MAF to look after the health affects resulting from aerial spraying in Auckland and Hamilton. Mr Smith is critical of this type of interdepartmental arrangement. He recommends the appointment by the Ministry of Health of a senior official whose task it will be to look critically at all relevant human health implications, and to be prepared to express an independent viewpoint where there appears to be a conflict between the spray operation and the human health of those who may be affected.
- Priority is to be given to appropriate research to establish the effects of aerial spraying with Foray 48B on human populations. This research may include the suggestions made by Simon Hales et al, in 2004, in the Wellington School of

Medicine Assessment of Potential Health Impacts of Spraying for Painted Apple Moth in Auckland. Mr Smith illuminates, in his report, the lengths to which the Ministry of Health went to suppress this research when it indicated that the spray causes harm and that there is a need for further research to determine the extent and way in which that harm is caused.

“That the fullest information about the spray [Foray 48B] and its possible effects should be made available.” Mr Smith does not look benevolently on the government’s entry into an agreement with the manufacturer of the spray to keep the ingredients of the pesticide secret from people who may be affected by it.

The spraying was detrimental to human health, especially, those with pre-existing respiratory disease. If spraying affected them how can the quantum of damage be determined? How could GPs assess the effects of the spray if there was no way of knowing how it was constituted?

What has happened begs a number of questions:

- Did the local GPs notice anything and what did they do?
- Did the local PHOs, these community health organisations know and do anything to advocate for the health of the local population?
- Did Waitemata DHB know and do anything to protect the health of their population?
- Did the local Iwi and Urban Maori Development Organisations do anything?
- Did Waitakere City Council do anything to protect their ratepayers?

Last, but not least, did the Ministry of Health at the centre of spraying campaign uphold its obligations to maintain the health of New Zealanders.

Suppression of information that is relevant to understanding the impact of human health is not the role of the Ministry of Health. They are not there to defend acts in the rest of Government whether or not right or wrong. They are there to be honest, they are there to show integrity.

When we look at a number of other issues managed by the Ministry of Health it could make us wonder:

- The slow progress towards accepting that Agent Orange is dangerous to Health
- The slow progress to understanding that those who live in Taranaki close to the old chemical plant have had their health impaired by exposure to chemical residues
- The severe criticism the Ministry received as to its part in the Cervical Screening disaster. Dr E McGoogan was particularly critical of the competence of the Ministry to mount national screening programmes.

The very slow process that led to settlement with those who given hepatitis C through blood transfusions.

The Ministry of Health has responded to the recent criticism by being upset that no one gave them credit for the work they had done in this area. Thus ignoring all the significant criticism about their actions.

The Hon Jim Anderton has responded in the typical political way by dismissing the messenger and the message.

These two responses clearly show us that these are substantive and embarrassing issues the Ministry and Government want to go away.

The Ministry has a dysfunctional culture in which being self serving and protecting the Minister from blame may interfere with its core functions.

Maybe we need a small competent Ministry that develops high quality implementable health policy and then monitors the performance of the health sector on behalf of the Crown.

The operational parts could be resited in the ACC who could form a national purchaser and develop the capacities around quality, innovation and information.

A radically downsized Ministry with a clear and accountable focus may help us develop an infrastructure for the future that will suit us better than the current structures.

Whatever happens, we need a health bureaucracy where honesty and integrity feature as realtime values.