Rheumatic Fever

A Great Concern For Our Māori & Pacific Population

Why is Rheumatic Fever so prevalent in Maori and Pacific population within the ages of 4-19 years?

By Kate Shaw

Introduction

Rheumatic Fever is an identified health concern in New Zealand. This disease is the consequence of an untreated streptococcal throat infection. The Maori & Pacific population has an incidence rate of more than 50 times the New Zealand European Rate (Naea et al., 2016). There are many contributing factors that when combined create an environment for contracting this disease.

Findings

- Maori or Pacific New Zealander's are affected in every 9 out of 10 cases of diagnosed acute Rheumatic Fever (Gurney, Sarfati, Stanley, Wilson and Webb, 2015).
- Maori are almost 30 times more likely and Pacific more than 40 times more likely than those of European or of other ethnicity to be diagnosed (Gurney et al., 2015).
- High levels of deprivation to this population combined with factors such as dampness in the home and sore throat regularity can increase the risk for Maori and Pacific People contracting this disease (Gurney, Sarfati, Stanley, Wilson and Webb, 2016).
- 75-80% of the Maori population has limited health literacy skills and are therefore less likely to utilize primary health services as a preventative measure (New Zealand Ministry of Health, 2011).
- There is a clear link between decreased access to healthcare and the occurrences of Rheumatic Fever. New Zealanders with less than average incomes (24%) had medical problems but did not access health care (The National Heart Foundation of New Zealand, 2009).

Implications

- **Funding**: In 2011 New Zealand established the "Rheumatic Fever Prevention Programme" (Rheumatic Fever, 2017) and was expanded to a five-year Better Public Services target that the Government invested $65 million to trial new ideas and initiatives with the aim of preventing Rheumatic Fever in New Zealand. Throughout this five-year target there was a reduction in Rheumatic Fever by two-thirds nation wide (Coleman, 2016) but yet this population still has a 30% to 40% higher chance than other ethnicities in contracting this disease (Gurney, et al., 2015). The Funding was reprioritized to DHB's that were most at risk and narrowed down to $875,000 yet is still a significant amount of funding for a disease that is still impacting the Maori and Pacific Population heavily (Coleman, 2016).
- **Education:** There is a need for more education to the primary healthcare providers in "high risk" areas of New Zealand. Positive attitudes need to be extended across to primary healthcare services. Nurses and GP's in high-risk areas need to understand the importance of throat swabbing and prescribing antibiotics for those at high high-risk of having strep throat (South Auckland Pioneering new model, 2012)

Recommendations

- Increasing Maori and Pacific Healthcare providers and providing a system where these providers can be easily accessed is one of my recommendations to preventing this disease.
- Incorporating community-based education and throat swabbing clinics through Marae, schools and churches will help to create awareness to a whole community. A more holistic approach may reduce the spread of Strep throat and potentially the burden of Rheumatic Fever.
- The importance of education in adherence to antibiotic treatment is crucial to prevent secondary prophylaxis. By educating in a primary setting to patients when given antibiotic treatment for Strep throat infections.

My reasoning for choosing to produce a poster is because I believe that it is a topic that the Government is already well aware of however is a topic that still needs a lot of attention bought about it to inform the public of the statistics that haunt our Maori and Pacific Population. The patterns that I have chosen are specifically to attract the attention of the Maori and Pacific Population. The colour scheme I have chosen was about attracting that specific population whilst also remaining informative by using calm and approachable colours. The poster is set out to keep the information clear and easy to understand with the use of test boxes and bullet point formation. Rheumatic Fever is a health concern that the government has invested a lot of money into with steady improvements so therefore my poster is designed to inform the public and educate those most at risk. (Poster Presentations, 2018).

PECOT category	Information relating to question	Explanation
Population	Maori and Pacific children and young adults (aged 4-19 years)	I chose this range of people because this is the populati is most at risk or contracting this disease.
Exposure (Intervention)	Maori and Pacific children and young adults (aged 4-19 years) who have contracted Rheumatic Fever	I will be focusing on articles with means to reduce Rhe Fever (RF) rates within this ethnic group and age grou and Pacific RF rates have increased significantly from 2016. Pacific rates increasing from 15 per 100,000 to 2 100,000 and Maori rates increasing from 7 per 100,00C per 100,000 ("Previous BPS target: Reduce rheumatic 1 2017).
Comparison / Control	Maori and Pacific children and young adults (aged 4-19 years) who are at risk for contracting Rheumatic Fever	Research suggests that Maori and Pacific Children age between 4 and 19 years have the highest rates of RF. T evidence suggests that this is a combinations of crowde housing conditions and socio-economic deprivation (Rheumatic Fever, 2017)
Outcome	To determine the barriers to preventing RF and the reasons why RF is still so prevalent in New Zealand	The incidence of acute RF amongst pacific children is times the European rate. This is a completely preventat disease but one that pacific and Maori communities ne gain a better understanding of in order to decrease the incidence of RF (Naea et al., 2016) .
Time	Ongoing	The Rheumatic Fever Prevention Programme (RFPP) produced a five-year RF better public service target to RF rates within NZ. This programme ended in 2017 bu Ministry of Health (MOH) will continue to work with t DHB's that have the highest incidences of RF (Rheum Fever, 2017).

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