

NEW ZEALAND INJURY PREVENTION STRATEGY

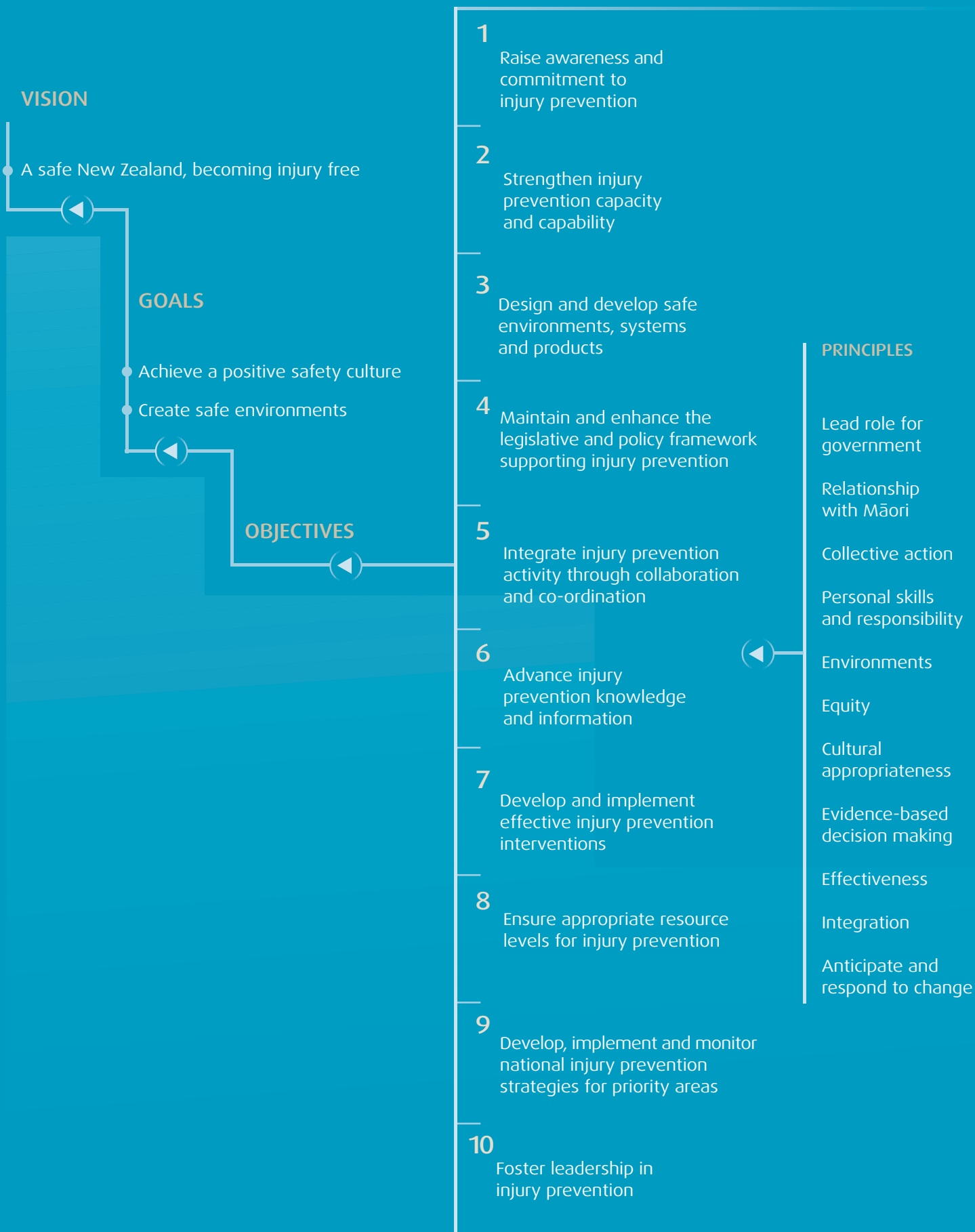
Rautaki Ārai Whara o Aotearoa

Hon Ruth Dyson, Minister for ACC

June 2003



OBJECTIVES AND ACTIONS



FOREWORD

E ngā mana, e ngā reo, e ngā iwi o ngā hau e whā, tēnā koutou, tēnā koutou, tēnā koutou katoa.
Tēnei te tuku tuhinga matapakinga atu ki a koutou e pā ana ki te kaupapa Rautaki Ārai Whara o
Aotearoa. Nā reira ngā mihi nui ki a koutou.

Greetings. It is my pleasure to present the New Zealand Injury Prevention Strategy.

Injuries, whether unintentional or intentional, are a major problem facing New Zealand. On average, four people die each day from injury and about 3,800 people are injured badly enough to seek medical help. Many of these injuries will have devastating consequences for the injured person, and the impact will also affect the lives of loved ones, friends and work-mates. The total losses to the country from injury have yet to be systematically measured but they are likely to be considerable.

The New Zealand Injury Prevention Strategy is an expression of the Government's commitment to working with organisations and groups in the wider community to improve the country's injury prevention performance. The Strategy provides a strategic framework for injury prevention activity in New Zealand. The framework is a guide for action by a range of government agencies, local government, non-government organisations, communities and individuals.

During its development, the Strategy had extensive input from injury prevention experts, stakeholders, government officials, as well as a wide range of organisations and individuals with an interest or involvement in injury prevention. I would like to pay a special tribute to their contributions that I believe are reflected in this Strategy.

The New Zealand Injury Prevention Strategy is a living document that provides a basis for action. For the next stage of work, an Implementation Plan for the Strategy will be developed by ACC in collaboration with key government agencies, the Stakeholder Reference Group, and other relevant organisations and community groups. I will be monitoring progress against the Implementation Plan and will report annually to Government. I will also be working with my colleagues across many portfolios to ensure this Strategy shapes all policies and programmes that may positively contribute toward the prevention of injury.

The New Zealand Injury Prevention Strategy reflects the wishes of New Zealanders to live in a society where more people are living free of injury while continuing to live active and challenging lives. This requires commitment not only from Government, but also from all sectors of society. It is my hope that government agencies, local government, non-government organisations, communities and individuals will work together to achieve a safe New Zealand, becoming injury free.



Hon Ruth Dyson
Minister for ACC



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The advice and comments from the following contributors is particularly acknowledged in the development of the New Zealand Injury Prevention Strategy:

- Stakeholder Reference Group
- Expert Advisory Panel
- Government Interagency Steering Group
- Participants of public consultation workshops, hui, and fono who provided feedback on the Draft Strategy for Consultation document¹
- Individuals and organisations who made written submissions on the Draft Strategy for Consultation document
- New Zealand Injury Prevention Strategy Project Team.

¹ The Draft Strategy for Consultation document was released by the Minister for ACC in October 2002.

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OVERVIEW

The purpose of the New Zealand Injury Prevention Strategy is to establish a framework for the injury prevention activities of government agencies, local government, non-government organisations, communities and individuals. The Strategy sets out the Government's vision for a New Zealand where more people can live free of injury while continuing to lead active and challenging lives. The Strategy will assist New Zealand to better focus its injury prevention efforts and resources by providing a clear direction to the range of agencies, organisations, and communities which have either a direct involvement, or a contributory role to play, in injury prevention activity in New Zealand.

How the Strategy was developed

The development of the New Zealand Injury Prevention Strategy was led by ACC in consultation with many individuals and organisations throughout New Zealand.

Three advisory groups have closely informed the development of the Strategy:

- **Stakeholder Reference Group**, comprising individuals representing the range of injury prevention sectors (e.g. violence prevention, child injury prevention, road safety, workplace health and safety).
- **Expert Advisory Panel**, comprising individuals with expertise in injury prevention research or strategy development.
- **Government Interagency Steering Group**, comprising representatives of government agencies with injury prevention responsibilities and interests.

Appendix 1 lists the membership of each group.

The Strategy has also been informed through wide consultation with individuals and organisations with an interest or involvement in injury prevention. Public consultation was undertaken on a Draft Strategy for Consultation document which involved a series of public workshops, including hui and fono, being held in locations throughout New Zealand, as well as the receipt of written submissions.

Who the Strategy is for

The Strategy provides a framework for the policy development and service delivery activities of government agencies and non-government organisations with an involvement in injury prevention. It is envisaged that central government agencies will apply the Strategy across government portfolio areas. However, government agencies are not the only organisations that might contribute to the Strategy's implementation. As the actions within the Strategy illustrate, local government, non-government agencies, businesses, communities, families/whānau and individuals all have an important role to play in injury prevention. It is anticipated that the Strategy will be used as a resource for all of these groups.







Links to other injury prevention and related strategies

The New Zealand Injury Prevention Strategy embraces a number of other national strategies dealing with specific injury areas that sit within the Strategy's overall framework. These include the Youth Suicide Prevention Strategy, and Te Rito: Family Violence Prevention Strategy.

National strategies currently under development that fit within the wider context of the New Zealand Injury Prevention Strategy include the Road Safety Strategy 2010 (being developed under the New Zealand Transport Strategy), General Violence Strategy and the Crime Reduction Strategy. Other related, broader strategies and policy frameworks that have been considered in developing this Strategy include the National Alcohol Strategy 2000-2003.

The Strategy's elements

The New Zealand Injury Prevention Strategy's broad structure includes a set of principles, vision, goals, and objectives and actions.

Eleven principles form the basis of the Strategy. These have informed the development of the Strategy and should serve to guide injury prevention policies and activities into the future.

The Strategy has an ambitious and challenging vision of 'a safe New Zealand, becoming injury free'.

To realise this vision for New Zealand we need to:

- achieve a positive safety culture; and
- create safe environments.

To advance us toward these two goals, the Strategy identifies ten key objectives. These objectives are interrelated and key actions are identified for each of them.

Delivering the Strategy - what happens next?

ACC will co-ordinate the development of an Implementation Plan for the New Zealand Injury Prevention Strategy in collaboration with key government agencies, and other relevant organisations and community groups. The Stakeholder Reference Group and Government Interagency Steering Group will continue to play an advisory role in informing the development of an Implementation Plan for the Strategy. It is expected that the first Implementation Plan for the Strategy will take effect from 1 July 2004. The Minister for ACC will report annually to Government on progress towards implementing the Strategy. The first formal review of the Strategy will occur after five years. The Strategy is intended as a living document and injury prevention work under it will be ongoing.

More detail about delivering the Strategy can be found on page 25.



INTRODUCTION

Why a New Zealand Injury Prevention Strategy?

Injury is a leading cause of premature death and disability in New Zealand. Injuries currently result in about 1,600 deaths and 42,000 hospitalisations per year and during 2001/02, over 1.4 million injury claims were accepted by the Accident Compensation Corporation (ACC).² The impact of injury on individuals, families/whānau, and communities is pervasive. The social and economic costs at all levels are considerable and are estimated to be \$6-7 billion per year, yet most injuries and their consequences are preventable.

What causes injury?

A broad range of interacting factors affect how many injuries occur. Attitudes toward safety and behavioural factors are critical. Measures such as reducing speed, not drink driving, and wearing restraints prevent injuries on the road, while balancing and strengthening exercises for older persons can reduce fall injuries. Environmental and engineering factors are also important in reducing all types of injury. Pool fencing has been shown to reduce drowning in children, while ergonomically designed workstations can reduce the likelihood of musculoskeletal injuries occurring. Injury can also result from more complex underlying social factors such as poor living conditions. Mental health issues may also be a significant contributor to some types of injury leading some people to harm themselves.

The benefits of injury prevention

Fortunately, injury prevention can result in significant economic and social benefits. It can reduce the number of new cases of injury, as well as reduce the severity of those injuries that do occur. The benefits of injury prevention are obvious: they include continued quality of life for individuals, families/whānau who live free from injury. They also include less disruption and increased productivity for businesses and service organisations. The wider community also has a lot to gain from having a safer, positive, and more productive population, and from less demand being placed on the health care system due to injury.

Achievements in reducing injuries in New Zealand

New Zealand has improved its injury prevention performance in a number of areas over recent years where concerted efforts have been made. For example, with the support of an integrated government strategy, a significant reduction in road injuries and fatalities has occurred over the past decade. This was a result of a concerted and targeted commitment in the early 1990s. Fatalities have reduced from 646 in 1992 to 404 last year. Gains have also been made in the area of youth suicide prevention because of a collaborative and targeted approach. In the year 2000, 96 young people died by suicide. This is a significant decline since the peak in 1995, when 156 youth suicides were recorded, and it is the lowest number since 1986.

² Refer to Appendix 2 for selected New Zealand Injury statistics.



Improving our injury prevention efforts

Although injury rates in New Zealand have declined over the past decade, further reductions are possible and desirable. We need to develop a culture that positively supports and values the prevention of injury. We have to shift people's thinking about injuries so they are seen to be preventable rather than an inevitable and unavoidable part of life. We need to raise the level of motivation and skill among individuals and organisations to create safer environments and support protective behaviours. We must also identify and address the conditions in our society that lead people to take unacceptable risks and/or cause harm to themselves or others.

Achieving a positive safety culture and creating safer environments is challenging and will only be achieved if injury prevention activity is well informed and well organised.

There are a number of deficiencies in our current injury prevention efforts. These include:

- **Fragmentation of effort.** Given the wide range of agencies and organisations involved in injury prevention, there is potential for inconsistent messages and unnecessary duplication of effort. Injury prevention activity needs to be integrated through co-ordination and collaboration between government agencies and other organisations.
- **Gaps in injury prevention activity.** Some important injury issues have attracted limited attention relative to their impact, e.g., fall prevention and drowning prevention. Coverage in some areas is patchy. For example, we have a Youth Suicide Prevention Strategy, but lack a cross-sectoral suicide prevention strategy covering all age groups.

- **Workforce capability issues.** The injury prevention workforce is diverse, often isolated and has limited access to training opportunities. The capability of the injury prevention workforce needs to be strengthened.
- **Quality of, access to, and dissemination of injury information.** There is a need for better, more accessible, and improved dissemination of injury data and information to support injury prevention activity.

The New Zealand Injury Prevention Strategy will address these, and other issues through an approach that focuses on actions to improve the infrastructure that supports injury prevention activity in New Zealand, as well as the development of national strategies to address specific national injury prevention priority areas.

In developing the Strategy, six national injury prevention priority areas were identified based on current statistics. They include: motor vehicle traffic crashes; suicide and deliberate self-harm; falls; workplace injuries (including occupational diseases); assault; and drowning and near-drowning.

Implementation of the Strategy will lead to an improvement in New Zealand's injury prevention performance over time.

THE NEW ZEALAND INJURY PREVENTION STRATEGY

The New Zealand Injury Prevention Strategy sets out a vision and strategic direction for injury prevention. It establishes a framework that will enhance and support the injury prevention activities of government agencies in particular and other organisations and groups in the wider community.

It will require regional and local government, non-government organisations, businesses and community groups, who have such an important role to play in injury prevention, to use the Strategy to inform and guide their activities.

The Strategy focuses on the prevention of injury (both unintentional and intentional), which involves using preventive measures to reduce the number of new cases of injury, and reduce the severity of those injuries that do occur.

Injury prevention requires appropriate action to be taken on an everyday basis by all members of society in their various roles such as parents, caregivers, managers, workers, landlords, and road users. Knowing what is appropriate action is not always common sense, however, and will need to be fostered through education, training and research.

Current evidence suggests that injury prevention will work best when it:

- addresses the multiple factors that contribute to injury
- encourages environmental and behavioural change
- engages the people who are most at risk
- involves action across sectors (e.g. health, police, education)
- is sustained and reinforced over time.

The benefits of staying injury free are considerable. For individuals, families and whānau there is continued quality of life, ongoing participation in work, leisure and educational activities, and preservation of income and assets. For organisations and businesses the benefits of injury prevention include reduced disruption to their operations, increased productivity, retention of valued staff, and reduced levies. The wider community has a lot to gain from having a safer, positive and more productive population, and from less demand being placed on the health care system due to injury.

The various elements of the Strategy are outlined on the following pages.

Principles

The New Zealand Injury Prevention Strategy is based on eleven underlying principles that the Government sees as fundamental. These are a broad set of statements, which should serve to guide and inform injury prevention policies and activity across the public sector into the future. These principles are also intended to guide the injury prevention activities of regional and local government, community groups, iwi, businesses, families/whānau and individuals.

- **Lead role for government:** central government will support injury prevention through legislation, policy, standards and resources.
- **Relationship with Māori:** the special relationship between Māori and the Crown under Te Tiriti o Waitangi (the Treaty of Waitangi) will be recognised in the undertaking of injury prevention activity.
- **Collective action:** injury prevention activity requires the active participation of regional and local government, community groups, iwi, businesses, families/whānau and individuals working in partnership with central government.
- **Personal skills and responsibility:** injury prevention activity will encourage the development of personal skills and foster responsibility for personal safety and the safety of others.
- **Environments:** injury prevention activity will encourage the creation of physical and social environments that reduce the risk of injury.
- **Equity:** injury prevention activity will aim to reduce inequalities in injury outcomes within and between groups.
- **Cultural appropriateness:** injury prevention activity will recognise and respond to the differing needs of: Māori; Pacific peoples; other ethnic groups; and new migrants.
- **Evidence-based decision-making:** injury prevention activity will be based on evidence and good information, wherever possible.
- **Effectiveness:** injury prevention activity will focus on identifying and implementing interventions that are effective and make the best use of resources (both human and financial).
- **Integration:** injury prevention activity will be co-ordinated so that interventions will be mutually reinforcing and complementary, and avoid unnecessary duplication.
- **Anticipate and respond to change:** injury prevention activity will anticipate and respond to changes in injury patterns, exposure to risks, population trends, and emerging knowledge about proven or promising interventions.



Māori and Injury Prevention

The Treaty of Waitangi is New Zealand's founding document and the Government is committed to fulfilling its obligations as a Treaty partner. This special relationship is ongoing and is based on the underlying premise that Māori should continue to live in Aotearoa as Māori.

Central to the Treaty relationship and implementation of Treaty principles is a common understanding that Māori will have an important role in developing and implementing injury prevention strategies for Māori and that the Crown and Māori will relate to each other in good faith with mutual respect, co-operation and trust.

The New Zealand Injury Prevention Strategy acknowledges the special relationship between Māori as tangata whenua and the Crown under the Treaty of Waitangi through the inclusion of a range of specific actions that support and promote injury prevention among whānau, hapu and iwi. These actions, which are located in various sections of the Strategy, are repeated below:

- Increasing the capacity and capability of Māori service providers to develop, implement and evaluate effective injury prevention interventions.
- Supporting the training of the Māori injury prevention workforce, including practitioners and researchers.
- Promoting the development of collaborative relationships and co-ordination mechanisms for injury prevention between Māori and other injury prevention partners.
- Encouraging the participation of whānau, hapu and iwi in injury prevention at all levels.
- Ensuring more kaupapa Māori injury prevention interventions are developed and delivered by Māori.

Māori me te Ārai Whara

He kawenata taketake Te Tiriti o Waitangi mō Aotearoa me te rarato o te Kāwanatanga koia nei te hoa Tiriti, kia ea āna herenga. He mea tupu tēnei pātahitanga motuhake ināhoki e ahu mai ana i te tino taukī ko te Māori kia wātea tonu ki tā te Māori noho i Aotearoa.

Hei tāhā mō te pātahitanga Tiriti me te whakatinanatanga o ngā mātāpono Tiriti ko te orotaunga noa, tērā he tino tūranga tō te Māori hei whakawhanake hei whakatinana i ngā rautaki ārai whara mō te Māori me te pātahi o te Karauna rāua ko Māori i roto i te wairua pai, te kauanu ngātahi, te whirinaki ngātahi.

E whakamihī ana Te Rautaki Ārai Whara o Aotearoa i te hononga nui kei waenganui i te Māori nā runga i tana noho hei tangata whenua, me te Karauna, i raro i te mana o Te Tiriti o Waitangi, mā te whakauru i ētahi mahi hāngai e tautoko ana, e whakatairanga ana i te ārai whara i waenganui i te whānau, hapū, iwi. Kua tāruahia ano i raro nei ngā mahi kei ia wāhanga o te Rautaki:

- Te whakanui ake i te kahapupuri me te māiatanga o ngā kaiwhakarato ratonga Māori ki te whanake, ki te arotake i ngā whakaurunga ārai whara e whai kiko ana.
- Te āwhina i te whakangungutanga o te hunga mahi ārai whara Māori, tae noa ki ngā kaiwhakamahi me ngā kairangahau.
- Te whakatairanga i te whanaketanga o ngā hononga mahi tahitanga me ngā tikanga whakaruruku mō ngā ārai whara ki waenganui i te Māori me ētahi atu hoa ārai whara.
- Ki te whakatenatena i te whakaurunga o te whānau, te hapū me te iwi ki roto i ngā mahi ārai whara ki ngā taumata katoa.
- Ki te whakatau kia nui ake ngā whakaurunga ārai whara e Māori ana te hāngai, ā, e whakaratoa ana e te Māori.

A VISION FOR INJURY PREVENTION

The vision for the New Zealand Injury Prevention Strategy is:

A safe New Zealand, becoming injury free

This vision is ambitious and challenging. It will act as a motivating force in both stimulating and guiding injury prevention efforts in New Zealand.

As we move toward this vision we will see:

- Injury prevention being integrated into everyday life across all settings (e.g. workplaces, farms, public places, marae, schools, homes, roads, and sport and recreational environments).
- People actively managing the risk of injury while living active and challenging lives.
- More people living free of injury and continuing to participate in work, play, sport and leisure activities.
- Less distress to families and whānau.
- Less disruption to business operations due to injury.
- A dramatic reduction in national statistics for fatal and non-fatal injuries.



GOALS

To realise the vision of 'A safe New Zealand, becoming injury free' we need to:

- achieve a positive safety culture; and
- create safe environments.

These terms are defined below:

▶ A positive safety culture is a shared set of beliefs, attitudes, values and ways of behaving that support the prevention of injury.

▶ Safe environments are social and physical surroundings or conditions that support the prevention of injury.

Objectives and actions for the Strategy are listed on the following pages. For an overview of the Strategy see inside back cover (includes translation into Te Reo Māori).



OBJECTIVES AND ACTIONS

Objective 1 Raise awareness and commitment to injury prevention

-
- ACTIONS**
- 1 Raise awareness and acceptance that most injuries can be prevented.
 - 2 Promote positive attitudes toward injury prevention.
 - 3 Raise commitment and motivation for improved injury prevention among government and non-government organisations, the wider community and for specific settings such as workplaces, farms, public places, marae, schools, homes, roads, and sport and recreational environments, and groups such as iwi, ethnic communities, new migrants, and rural communities.
 - 4 Encourage individuals and groups to be actively involved in injury prevention.
 - 5 Promote a community development/action approach to injury prevention.
 - 6 Establish visions and targets for injury prevention that motivate and encourage commitment to action.
 - 7 Ensure that injury prevention is given an appropriate level of consideration in decision-making relative to other goals such as production (in the workplace), convenience (on the roads), pleasure (in sport), and appearance (in design).
 - 8 Provide incentives that promote positive injury prevention behaviours and environmental changes.

OBJECTIVES AND ACTIONS

Objective 2 Strengthen injury prevention capacity and capability



ACTIONS

- 1** Increase understanding of how injuries happen and how the key contributing factors can be eliminated or controlled.
- 2** Promote the development of personal skills in injury prevention within the wider community through the education sector, workplaces, public campaigns and community-based programmes.
- 3** Increase the capacity and capability of the injury prevention workforce through education and training programmes and support mechanisms.
- 4** Increase the capacity and capability of Māori service providers to develop, implement and evaluate effective injury prevention interventions.
- 5** Increase the capacity and capability of Pacific and other ethnic service providers to develop, implement and evaluate effective injury prevention interventions.
- 6** Integrate injury prevention into curricula and unit standards, and into relevant established education programmes and courses from early childhood through to tertiary level.
- 7** Establish formal injury prevention qualifications.
- 8** Support injury prevention research centres and multi-disciplinary research teams and encourage them to focus on key injury issues.
- 9** Support the training of the Māori injury prevention workforce, including practitioners and researchers.
- 10** Support the training of the Pacific, and other ethnic, injury prevention workforces, including practitioners and researchers.

OBJECTIVES AND ACTIONS

Objective 3 Design and develop safe environments, systems and products



ACTIONS

- 1 Support the development of positive social environments that promote resourcefulness, resilience, and respect and responsibility for self and others.
- 2 Control exposure to hazards through the improved design and maintenance of environments, systems and products.
- 3 Create environments, systems and products that reduce the likelihood of injuries occurring as a result of human error, whether unintentional or intentional.
- 4 Create and promote standards that facilitate the safer design and use of environments, systems and products.
- 5 Encourage people to consider injury prevention when making purchasing decisions.

OBJECTIVES AND ACTIONS

Objective 4 Maintain and enhance the legislative and policy framework supporting injury prevention



ACTIONS

- 1** Promote compliance by providing practical and accessible guidance and advice in partnership with the relevant community or industry sector (e.g. codes of practice, and standards).
- 2** Enforce compliance with legislation, policies and mandatory standards that support and facilitate injury prevention.
- 3** Evaluate the impact of legislation and policy from an injury prevention perspective.
- 4** Develop and implement legislative and policy reforms to further support and facilitate injury prevention, following consideration of benefits and compliance costs.

OBJECTIVES AND ACTIONS

Objective 5 Integrate injury prevention activity through collaboration and co-ordination



ACTIONS

- 1 Ensure collaborative relationships for injury prevention within and between central government, local government, businesses, iwi, non-government organisations and community sectors.
- 2 Establish or strengthen co-ordination mechanisms (e.g. coalitions) to ensure injury prevention activity is integrated.
- 3 Develop collaborative relationships and co-ordination mechanisms for injury prevention between Māori and other injury prevention partners.
- 4 Develop and implement plans to co-ordinate and guide injury prevention activity at various levels: organisational; community; regional; and national.
- 5 At the various levels, encourage participation in injury prevention by: Māori; Pacific peoples; other ethnic groups; and new migrants.
- 6 Increase collaboration and co-ordination between the injury prevention sector and related sectors, such as health promotion and crime prevention, to integrate prevention activities and avoid unnecessary duplication of effort.
- 7 Develop mechanisms to co-ordinate injury prevention research and evaluation activities.

OBJECTIVES AND ACTIONS

Objective 6 Advance injury prevention knowledge and information



ACTIONS

- 1 Investigate the social and economic costs of injury.
- 2 Investigate the demographic (e.g. age and gender), geographic, and socio-economic characteristics of groups most at risk of injury, and the factors that contribute to injury, both underlying (e.g. social conditions) and more immediate (e.g. alcohol).
- 3 Investigate the circumstances of specific injury events and near-misses, and collate and analyse this information as a means of identifying opportunities for prevention.
- 4 Improve injury surveillance systems through the co-ordination and enhancement of injury databases and the aggregation and publication of timely and comprehensive injury statistics.
- 5 Improve the availability and quality of ethnicity information in injury databases by ensuring consistency with standards for the collection, production and presentation of ethnic data recommended by Statistics New Zealand.
- 6 Review the literature (national and international) to identify proven or promising interventions.
- 7 Ensure injury prevention interventions are evaluated to determine their effectiveness.
- 8 Disseminate injury statistics and information on interventions and their effectiveness in ways that are relevant and accessible to users such as injury prevention practitioners and service providers.
- 9 Ensure that injury prevention research strategies focus on key injury issues, particularly those where effective interventions are not well established.
- 10 Investigate methods to measure changes in safety culture and safe environments.

OBJECTIVES AND ACTIONS

Objective 7 Develop and implement effective injury prevention interventions



ACTIONS

- 1** Identify the groups most at risk of injury, the settings in which injuries occur, and the circumstances of injury.
- 2** Ensure that interventions are designed to engage those groups who are most at risk of injury, or have key responsibilities for others (e.g. caregivers), or cause the most injury to others.
- 3** Identify the key features of effective injury prevention activity and apply this knowledge to the design and implementation of interventions.
- 4** Implement injury prevention interventions that have been proven to be effective.
- 5** Ensure more kaupapa Māori injury prevention interventions are developed and delivered by Māori.
- 6** Ensure the development and delivery of injury prevention interventions for, and by, Pacific peoples, and other ethnic groups.

OBJECTIVES AND ACTIONS

Objective 8 Ensure appropriate resource levels for injury prevention



1 Ensure the overall resourcing of injury prevention activity is in line with the full social impact of injury and the potential for prevention.

2 Ensure that injury prevention resources are allocated based on factors such as the incidence and severity of injury, and the potential for prevention.

ACTIONS

3 Support the implementation of effective injury prevention efforts through sustained funding arrangements.

OBJECTIVES AND ACTIONS

Objective 9 Develop, implement and monitor national injury prevention strategies for priority areas



ACTIONS

1

Implement and build on existing national injury prevention strategies (either completed or near-completion) for priority areas (e.g. Road Safety Strategy 2010, Te Rito: Family Violence Prevention Strategy, Youth Suicide Prevention Strategy). (Refer to page 26 for the six national injury prevention priority areas identified under the New Zealand Injury Prevention Strategy.)

2

Develop, implement, and monitor action plans to support the national injury prevention strategies for priority areas.

3

Identify and close strategy gaps by developing new national injury prevention strategies for priority areas where these do not already exist (e.g. drowning and near-drowning, falls prevention, workplace health and safety, suicide prevention across all ages).

4

Ensure any new national strategies relating to priority areas have an appropriate focus on injury prevention (e.g. General Violence Strategy, Crime Reduction Strategy).

5

Review the national injury prevention priority areas periodically as part of the New Zealand Injury Prevention Strategy's formal review process.

OBJECTIVES AND ACTIONS

Objective 10 Foster leadership in injury prevention



ACTIONS

- 1 Encourage individuals and organisations in positions of influence within communities to demonstrate leadership in injury prevention.
- 2 Encourage regional and local government, and iwi, to demonstrate leadership in injury prevention.
- 3 Ensure ACC provides leadership at a national level by co-ordinating the development and monitoring of an Implementation Plan supporting the New Zealand Injury Prevention Strategy.
- 4 Provide leadership by ensuring that specific government agencies lead the co-ordination of cross-sectoral strategies focusing on national injury prevention priorities.
- 5 Ensure that government agencies with injury prevention responsibilities build these into their accountability documents, along with performance measures.

DELIVERING THE STRATEGY

Implementation

Recognising the importance of ongoing stakeholder involvement in the strategy implementation process, ACC will co-ordinate the development of an Implementation Plan for the New Zealand Injury Prevention Strategy in collaboration with key government agencies, the Stakeholder Reference Group, and other relevant organisations and community groups. The timeframe for the Implementation Plan will be determined in consultation with the Government Interagency Steering Group and Stakeholder Reference Group.

It is envisaged the first Implementation Plan will take effect from 1 July 2004. ACC will work with government agencies to apply the Strategy across government portfolio areas. The Implementation Plan will identify work items to be undertaken by these agencies in support of the objectives and actions in the New Zealand Injury Prevention Strategy. Government agencies will be required to provide information to ACC on the achievement of specific work items in July each year. This reporting will enable progress in implementing the Strategy to be monitored.

However, the implementation of the Strategy will rely on more than government agencies for its success.

Local government, non-government agencies, businesses, community groups, families/whānau and individuals all have a critical role to play and it is intended that the Strategy serve as a resource for all of these groups. ACC will also collect information, where appropriate, from other organisations and groups which will assist in monitoring progress towards the achievement of the Strategy's objectives and actions.

The Minister for ACC will report annually to Government on progress against the Implementation Plan for the New Zealand Injury Prevention Strategy. The first report, which will be compiled by ACC, will be available to the public in late 2005.

Status reports

In addition to reporting on Strategy implementation, ACC will publish a status report, at approximately two-year intervals, on New Zealand's injury prevention performance. This report will provide information on measures of safety culture and safe environments, and key injury statistics and trends.

National strategies for injury prevention priority areas

Current statistics indicate motor vehicle traffic crashes; suicide and deliberate self-harm; falls; workplace injuries (including occupational diseases); assault; and drowning and near-drowning account for at least 80% of injury deaths and serious injuries in New Zealand. These six areas have been identified as national injury prevention priority areas.

Specific government agencies will lead the co-ordination of national strategies and supporting action plans for these identified priority areas as part of the development of the Implementation Plan for the Strategy. This will involve lead agencies co-ordinating the appropriate involvement of contributing agencies, as well as ensuring an appropriate governance structure for these national strategies is in place. In implementing the New Zealand Injury Prevention Strategy, national strategies for injury prevention priority areas will build on and/or take into account any existing related strategies where possible.

The lead agencies for the identified national injury prevention priority areas are:

Motor vehicle traffic crashes	Land Transport Safety Authority
Suicide and deliberate self-harm	Ministry of Health and Ministry of Youth Affairs
Falls	ACC
Workplace injuries (including occupational diseases)	Department of Labour
Assault	Ministry of Justice and Ministry of Social Development
Drowning and near-drowning	ACC

Through its mandate, which requires it to cost-effectively address injuries across a broad range of settings and circumstances, ACC will always have a strong focus on injury prevention. Therefore, ACC will work closely with other lead agencies so that the Implementation Plan for the New Zealand Injury Prevention Strategy and the action plans for the other national strategies are co-ordinated.

Strategy review

The first review of the New Zealand Injury Prevention Strategy will be after five years.

APPENDIX 1

Membership of advisory groups and project team

Stakeholder Reference Group (appointed by the Minister for ACC)

Name	Sector
Assoc. Prof. Carolyn Coggan	Chair
Kevin Bryant	Training and Education
Janferié Bryce-Chapman	Older Persons
Kitch Cuthbert	Road Safety
Margaret Devlin	Injury Prevention Practitioners
Bonnie Dowding	Pacific People
George Fairbairn	Road Safety
Dr Janet Fanslow	Violence Prevention
Corrina Gage	Injury Prevention for/by Māori
Shelley Hanifan	Child Safety
Dr Ian Hassall	Child Abuse Prevention
Paul Jarvie	Workplace Injury Prevention
Bruce Mackie	Suicide Prevention
Gary Moller	Sports Injury Prevention
Alan Muir	Water Safety
Tom Mulligan	Injury Prevention for/by Māori
Tony St. Clair	Workplace Injury Prevention/Agriculture
Dr Bruce Scoggins	Injury Prevention Research Funding
Cr Carolynne Stone	Local Government
Sally Thompson	Community/Local Government
Maevis Watson	Workplace Injury Prevention
Ross Wilson	Workplace Injury Prevention

New Zealand Injury Prevention Strategy Project Team

The following people have been involved in the development of the New Zealand Injury Prevention Strategy:

Dr Keith McLea
 Dr Carol Slappendel
 Georgie Ross
 Carol Hinton

Expert Advisory Panel

Dr Keith McLea (Chair)
 Tony Bliss
 Dr Barry Borman
 Assoc. Prof. John Broughton
 Assoc. Prof. Carolyn Coggan
 Prof. John Langley
 Des O’Dea
 Dr Carol Slappendel
 Dr Chris Walls
 Prof. Peter Vulcan

Government Interagency Steering Group

Accident Compensation Corporation
 Department of Corrections
 Department of Labour
 Land Transport Safety Authority
 Maritime Safety Authority of New Zealand
 Ministry of Consumer Affairs
 Ministry of Health
 Ministry of Pacific Island Affairs
 Ministry of Social Development
 Ministry of Transport
 Ministry of Women’s Affairs
 Ministry of Youth Affairs
 New Zealand Police
 Te Puni Kōkiri
 Sport and Recreation New Zealand

APPENDIX 2

Selected New Zealand injury statistics³

Injury deaths

- Injuries resulted in 1,614 deaths in 1999.
- In 1999, New Zealand's injury death rate was 42.4 deaths per 100,000 person-years.
- The three leading causes of injury death are suicide, motor vehicle traffic crashes, and falls.
- During 1995-1999, the injury death rate for males was over twice that for females (64 per 100,000 person-years compared to 28 per 100,000 person-years).
- During 1995-1999, adults aged 75 years and over had the highest rate of injury deaths (154 deaths per 100,000 person-years) and young adults aged 15-24 years had the second highest rate (68 deaths per 100,000 person-years).
- During 1996-1999, the injury death rate (age-standardised) for Māori was 68 per 100,000 person-years compared to 40 per 100,000 person-years for Pacific peoples and 41 per 100,000 person-years for NZ Europeans/Others.

Injury hospitalisations

- Each year, about 42,000 people stay one or more days in hospital as a result of an injury.
- Falls are the leading cause of injury hospitalisation.
- During 1997-2001, females were hospitalised due to injuries more often than males (1264 per 100,000 person-years compared to 955 per 100,000 person-years).
- During 1997-2001, adults aged 75 years and over had the highest rate of injury hospitalisation (3,299 per 100,000 person-years) and young adults aged 15-24 years had the second highest rate (1,322 per 100,000 person-years).
- During 1997-2001, Māori had higher injury hospitalisation rates compared to NZ Europeans/Others in age groups 0-4 years, 15-24 years, 25-39 years, and 40-59 years.
- During 1997-2001, Pacific peoples had higher rates of injury hospitalisation compared to NZ Europeans/Others in age groups 0-4 years, 5-14 years, 15-24 years, 25-39 years, and 40-59 years.

ACC claims

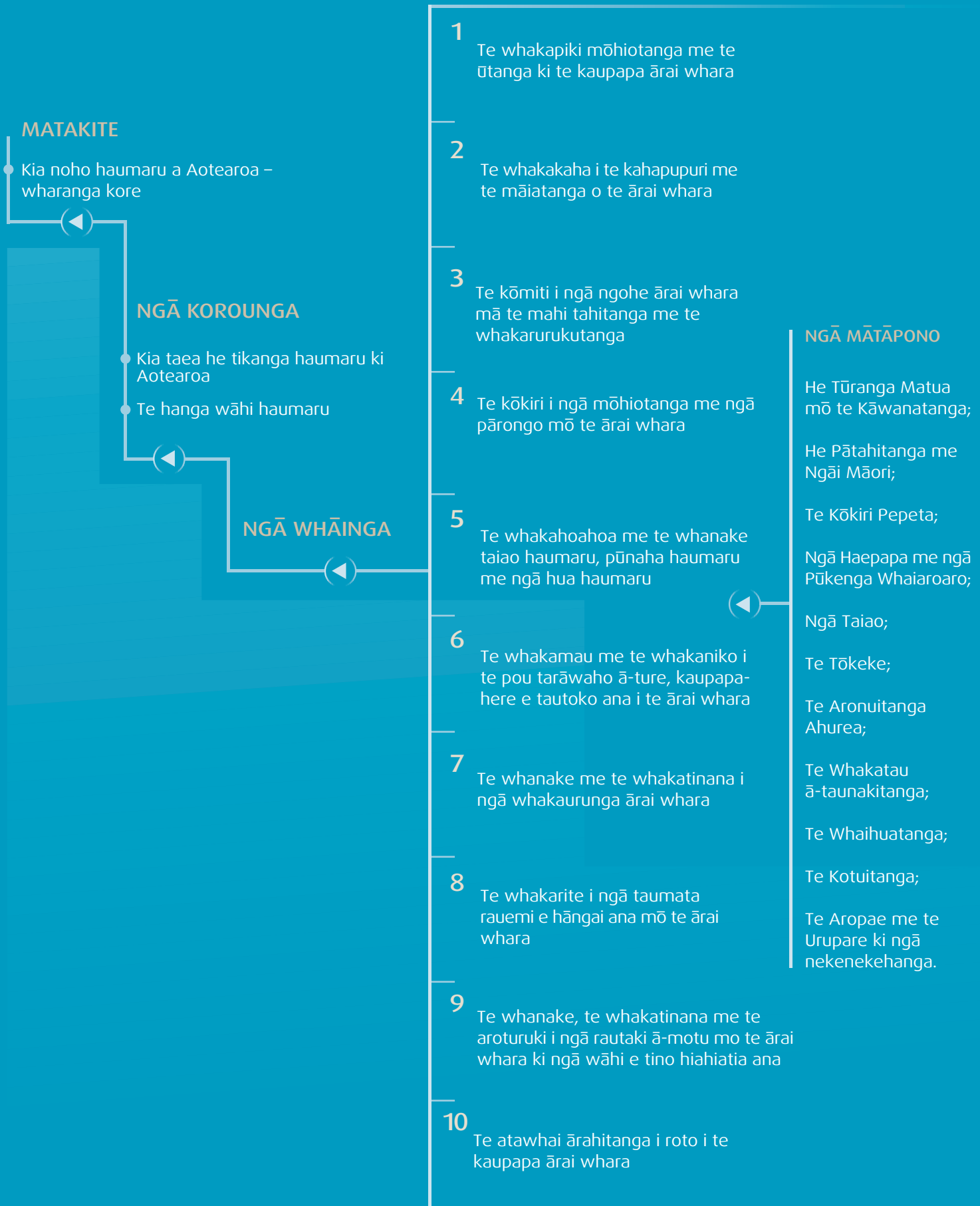
- In 2001/02, ACC accepted over 1.4 million claims, including nearly 97,000 new claims for moderate to serious injuries.
- In the same year, ACC paid just over 58,000 new weekly compensation claims due to an injury.

Disability adjusted life years (DALYs) lost due to injury

- 49,584 years of healthy life were lost due to injury in New Zealand in 1996.
- Motor vehicle traffic crashes are the leading cause of healthy life lost due to injury.
- Road traffic/transport injuries, suicide and self-harm, falls, assault, and drowning accounted for 80% of DALYs lost in 1996.

³ For more detailed information on injury statistics, visit www.nzips.govt.nz

TE RAUTAKI ĀRAI WHARA O AOTEAROA – HE TIROHANGA WHĀNUI



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