

Safe Communities

Southland

Initial Report



'SAFE IN THE SOUTH'

Report Commissioned by: Safe Communities Southland Steering Group

Report Compiled by: Community Development Department Invercargill City Council.

Abstract:

Invercargill, Gore and Southland Communities are investigating registration as a *Safe Community*. The purpose of this document is to provide an initial report of what the trends are around safety in Southland. The methodology used to gather data to inform this report is by collecting nominated agency data and then applying thematic data analysis. Agencies where data is collected from include; NZ Police, NZ Fire Service, Southern District Health Board and ACC. The mentioned agencies in partnership with the three TLA's and Environment Southland will then be able to make considered decisions on how to proceed on a regional Safe Communities Designation. Conclusions include that Southland is a violent place and that a lot of violence can be attributed to alcohol.

1. Introduction

This report focuses on the incidences of injury in Southland, highlighting areas of trend and occurrence, to inform a Hui on Safe Communities. The report is divided into subheadings and commentary is provided under each heading. The report starts by providing an explanation of the brief and this is followed by the rationale of the project. This is followed by a small overview of demographic and geographic information about the Southland area. Next, a brief commentary is provided on the methodology used to gather information. This is then followed by the findings and a description of the limitations identified in the report. Following this is a brief outline on safe communities and the process in New Zealand. The report concludes with a summary of the key trends identified and offers some recommendations on further action.

2. Brief

The purpose of this report is to provide an initial overview on what are likely contributing factors, trends, and occurrences that lead to injury in the Southland region.

3. Rationale and Definitions

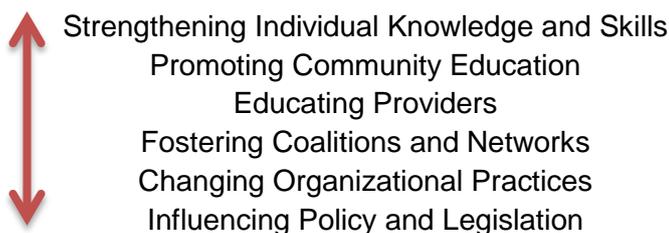
In New Zealand between 1998 and 2003 injury was the leading cause of death in the age group of 1 to 34 years and in the top five reasons across all age groups (0 to 65 + years) for hospitalisations (Gulliver and Simpson, 2007). Injury is defined as the cause of harm intentional or otherwise. Injuries can be categorized into three measures;

- 1) Minor: Harm that can be recovered from,
- 2) Catastrophic: Injury that has life long affects,
- 3) Fatal: Death.

It is an important concept to understand that injuries are not always necessarily accidents. Accidents often result in injuries; however the term accident refers to an uncontrollable, unintentional mishap/incident that occurs without deliberate cause. However, many injuries that result from 'accidents' are not from an uncontrollable, unintentional mishap/incident that occurs without deliberate cause. Many injuries can be prevented or the effect of the severity of injury can be minimized and this can happen within the local community (Safe Communities, 2008).

Evidence suggests a collaborative approach to creating a safer community that is injury aware is prudent and can assist in the prevention of many injuries (Cohen and Swift, 1999). Successful injury prevention requires in-depth assessment into the causative nature and predetermining factors that result in injuries (Cohen and Swift, 1999). This is above and beyond anecdotal reactive measures. Cohen and Swift (1999) discuss a spectrum of prevention and that this pervades a rational and logical approach to injury prevention and the creation of safe communities.

Spectrum of Prevention



Cohen and Swift (1999), posit that the spectrum delineates a systems approach to effective injury prevention and can assist in strategy development. Moreover, Cohen and Swift (1999) add that this spectrum is adopted by the World Health Organization as a best practice example. Therefore this approach is important in any application towards making Southland a designated safe community. Furthermore, a safe community is more than just injury prevention and addressing matters that cause physical harm, it can also include community perceptions of safety and well being. This creates a broader definition of injury prevention and what it entails and essentially means that safe communities is predominately about community wellbeing in the broadest sense. A safer community will have higher levels of community wellbeing.

Safe Communities, 2008: <http://www.safecommunities.org.nz/>

Cohen and Swift, 1999: <http://injuryprevention.bmj.com/content/5/3/203.full>

Gulliver and Simpson, 2007: <http://ipru3.otago.ac.nz/ipru/FactSheets/FactSheet38.pdf>

4. Economy, Population, Demographics and Geographic Area

An understanding of population, demographics and geographical is important to the study of and prevention of injuries. Below is a brief synopsis of important characteristics of the Southland region.

- Southland has a diverse environment and is geographically a large area encompassing a total land area of 3,035,577 ha with a coast line measuring 3400km.
Environment Southland: <http://www.es.govt.nz/living-in-southland/about-southland/>
- Southland region area consists of four Territorial Local Authorities(TLA)
 - TLA's
 - Invercargill 51,696 people, Median Age 39.2
 - Gore 12,033 people, Median Age 42.9
 - Southland District 29,613 people, Median Age 39.1
 - Environment Southland.

Statistics New Zealand, 2013:
http://www.stats.govt.nz/StatsMaps/Home/Maps/2013-census-quickstats-about-a-place-map.aspx?viewer=viewer_config_2013_Live.txt&webmap=map_config.txt&layerId=3&featureId=15

- The Southland region has the principle towns of Gore and Invercargill with a number of other communities with over 1000 inhabitants, such as: Te Anau, Riverton, and Winton.
- Southland has had a static population growth over the past six years. It is projected that population will stay static or decrease slightly over greater Southland area

Jackson 2014:

http://www.venturesouthland.co.nz/Portals/0/Documents/R_15_2_2943.PDF

- There is an aging population in the Southland region, i.e. more over 65 year olds than under 20 year olds. This is set to increase over the coming years and according to national projections from statistics New Zealand that the population will become elder aged heavy.

Jackson 2014:

http://www.venturesouthland.co.nz/Portals/0/Documents/R_15_2_2943.PDF

- Southland district is a mixture of areas with high and low socio-economic deprivation. High deprivation areas are mainly concentrated around urban areas and towns, such as Invercargill and Gore. Rural areas are generally less deprived. However, it is noted that Ohai Nightcaps & Mataura are exceptions and have very high deprivation scores.

NZ Herald, 2014:

http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=11254032

- Urban areas will see a projected increase, however this will be small compared to other regions and cities in New Zealand.

Statistics New Zealand, 2014:

http://www.stats.govt.nz/browse_for_stats/population/census_counts/2013CensusUsuallyResidentPopulationCounts_HOTP2013Census/Commentary.aspx

- The Southland region economy is mainly a primary producing region. There are more than 5300 farms in the region, occupying over 85% of the total area of non-conservation land in Southland. The largest non-agricultural based industry in Southland is the Tiwai Point Aluminium Smelter. A growth industry in Southland is Tourism seeing a rise in the numbers of visitors.

Environment Southland: <http://www.es.govt.nz/living-in-southland/about-southland/>

5. Methodology

The methodology utilised for this report is the collation and review of statistical data and reports from organisations that collect data on injury and injury prevention. The catchment area is within Southland, and if possible local TLA is identified. It is noted that this is not a comprehensive list of all available information. However this can be seen as a starting point for further in depth research and analysis.

Data was collated from the following named organisations;

- Police (Southern District)
- Fire Service (Southern District)
- Accident Compensation Commission (ACC).
- Southern District Health Board through Public Health South (Impact of Alcohol).
- Ministry of Health
- Injury Prevention Unit
- Ministry of Health

Data was also gathered from public reports and public records sourced from the internet to further inform this report. The methodology used was of no scientific merit and it is noted that this is a limitation of this report.

6. Findings

The findings have been broken up into 5 Key headings

- Injury
- Health
- Crime
- Traffic
- Environmental

6.1. Injury

Data on Injury has been collated from the Injury Prevention Unit and ACC. The Injury Prevention Research Unit is based out of the University of Otago. They collate statistics and provide reports on trends that appear with injury statistics. The website has a tool called the National Injury Query System. This tool can gather statistics about injury within certain desired parameters. The most recent data available in this tool is from 2012. The tool was used over a three year period in order to determine any trends. The results of these are displayed below.

Safe Communities Southland Initial Report
January 2015

Injury Prevention Unit

Southland District

2010 to 2012 New Zealand Public Hospital Injury Discharges, all external causes, all intents, both genders, all age groups.

Year of Discharge	Number of Discharges	Crude Rate (per 100,000 persons)
2010	343	1,164.3
2011	363	1,225.9
2012	329	1,107.4
TOTAL	1,035	1,165.8

http://ipru3.otago.ac.nz/niqs/index.php?ethnicity=&query_type=nonfatal&year_min=2010&year_max=2012&age_min=0&age_max=85&ecode=&intent=&gender=®ion_type=tla&dhb=&tla=52&local_board=&report=year&submit=Produce+Report

Gore

2010 to 2012 New Zealand Public Hospital Injury Discharges, all external causes, all intents, both genders, all age groups.

Year of Discharge	Number of Discharges	Crude Rate (per 100,000 persons)
2010	197	1,606.9
2011	208	1,691.1
2012	227	1,857.6
TOTAL	632	1,718.3

http://ipru3.otago.ac.nz/niqs/index.php?ethnicity=&query_type=nonfatal&year_min=2010&year_max=2012&age_min=0&age_max=85&ecode=&intent=&gender=®ion_type=tla&dhb=&tla=15&local_board=&report=year&submit=Produce+Report

Safe Communities Southland Initial Report
January 2015

Invercargill

2010 to 2012 New Zealand Public Hospital Injury Discharges, all external causes, all intents, both genders, all age group.

Year of Discharge	Number of Discharges	Crude Rate (per 100,000 persons)
2010	786	1,498.6
2011	671	1,266.5
2012	682	1,289.5
TOTAL	2,139	1,351.1

http://ipru3.otago.ac.nz/nigs/index.php?ethnicity=&query_type=nonfatal&year_min=2010&year_max=2012&age_min=0&age_max=85&ecode=&intent=&gender=®ion_type=tla&dhb=&tla=22&local_board=&report=year&submit=Produce+Report

ACC

ACC produced Community Profiles for the year 2012/2013. The Community Profiles provide information on claims of injuries to ACC. As well as this the Community Profiles also identify trends and areas where injury prevention can be focused. Other areas are also specifically measured. These are; Work Place claims, Assaults claims, Fall claims, Water Based Sport claims and Motor Vehicle Accident claims.

Southland District

Top 5 New Claims by location of accident

- Home 42.9%
- Sport and Recreation 22.8%
- Farm 13.0%
- Commercial/Service Location 6.0%
- Road or Street 5.9%

Top 5 New Claims by Cause

- Loss of Balance 24.7%
- Lifting Carrying/Stain 15.7%
- Struck by Person/Animal 11.1%
- Collision/Knocked over by Object 7.6%
- Slipping/Skidding on feet. 7.4%

Safe Communities Southland Initial Report
January 2015

A downward trend over the past 5 years is noted in Work Place claims, Water Based Sport claims and Motor Vehicle claims. An upward trend over the past 5 years is noted in Fall and Assaults. Southland District had proportionally higher levels of recorded accidents per 10,000 people than the national average in Work Place claims, Assault claims, Water Sport claims and Motor Vehicle claims.

Invercargill

Top 5 New Claims by location of accident

- Home 46.4%
- Sport and Recreation 24.5%
- Road/Street 8.1%
- Commercial/Service Location 7.5%
- School 6.7%

Top 5 New Claims by Cause

- Loss of Balance 27.0%
- Lifting Carrying/Stain 15.9%
- Struck by Person/Animal 9.6%
- Collision/Knocked over by Object 9.1%
- Slipping/Skidding on feet. 7.5%

A downward trend over the past 5 years is noted in Work Place claims, Water Based Sport claims and Motor Vehicle claims. An upward trend over the past 5 years is noted in Fall and Assaults. Invercargill City had proportionally higher levels of recorded accidents per 10,000 people than the national average in Assault claims. Work Place claims, Fall claims, Water Based Sport claims and Motor Vehicle accident claims were all below the National Average. However, Fall Claims and Water Sports Claims were trending towards the National average.

Gore District

Top 5 New Claims by location of accident

- Home 48.3%
- Sport and Recreation 19.2%
- Farm 8.8%
- Commercial/Service Location 6.6%
- Road or Street 6.1%

Top 5 New Claims by Cause

- Loss of Balance 26.3%
- Lifting/Carrying/Stain 15.5%
- Struck by Person/Animal 11.0%
- Collision/Knocked over by Object 7.0%
- Slipping/Skidding on feet. 6.7%

Of the other areas are also specifically measured. (Work Place claims, Assaults claims, Fall claims, Water Based Sport claims and Motor Vehicle accident claims). It is of particular note that the Dwelling Assault rate for the 2012/2013 year is considerably higher than the National average of recorded claims per 10,000 people across all three districts. ACC report that Assault Numbers are drawn from the Local Policing District Area rather than the TLA area.

	Southland	NZ
Serious Assaults resulting in injury rate	35.86 per 10,000 people	21.56 per 10,000 people
Public Place Assault rate	29.57 per 10,000 people	25.18 per 10,000 people
Dwelling Assault rate	90.14 per 10,000 people	56.29 per 10,000 people

<http://www.acc.co.nz/search-results/index.htm?ssUserText=community+profiles+southland>

6.2. Health

Data on health has been collated from a number of different sources including Public Health South, Ministry of Health, and Southern District Health Board.

Self Harm and Suicide

Statistics on Suicide and Self Harm have come from the report 'Deaths and Intentional self-harm hospitalisations' produced by the Ministry of Health in 2014. This report collated data nationally on Suicide and Self Harm rates between 2007 and 2011.

The Southland regions Suicide level is above the national average during the period of 2007 to 2011. The national average is 11.3 per 100,000 people and Southlands rate is 14.7 per

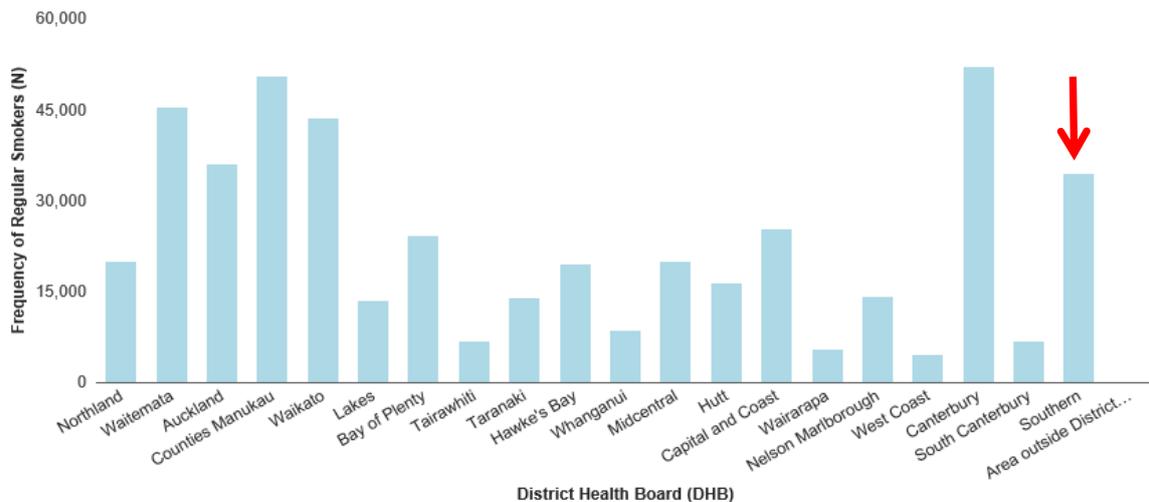
100,000 people. Southland suicide rate is 7th out of the 21 DHB's (Note; Southland DHB had not yet merged with Otago at this point in time.) Suicide rates peaked in the 1990's however is again trending upwards. Rural suicide rates are more than urban areas at 12.5 per 100,000 (rural) compared 10.6 per 100,000(urban). Males are more likely to commit suicide than females. By age, young men of 15 to 29 years of age are the most likely. Suicide rates also increase as deprivation rates increase. Maori are over represented in suicide statistics.

Self harm in the Southland Region is below the national average. For the years 2009, 2010, & 2011 there were 178 hospitalisations for intentional self harm in Southland. Of these presentations 59% were female. Young Maori females between the ages of 15 and 19 years are the most predominant cohort to present at hospital for intentional self harm in New Zealand

(Ministry of Health 2014).

Smoking

Though smoking is not necessarily related to injury it was deemed as useful to add to the report in that there is empirical evidence in the harm that it causes and that this can be prevented.



The above graph shows regular smoking rates within New Zealand by District Health Board. The Southland rate is highlighted with the red arrow. This is 34,668 people and is approximately a third of all people in the Southland region.

http://www.tcddata.org.nz/Census%20data/Census_01.aspx

Alcohol

Public Health South prepared *The Impact of Alcohol on the Health of Southern Communities, A Report to Inform the Development of Local Alcohol Policies by Southern District Councils*. The report contained information collated about alcohol admissions and perceptions of professional's about alcohol related harm in the Southern District Health Board catchment area. This are includes Otago, Queenstown Lakes and Southland.

The main findings of this report found that;

- Southern District Health Board has the highest prevalence of hazardous drinking among all District Health Board regions in New Zealand.
- The trend is heading upwards in Alcohol related Hospital presentations
- Alcohol poisoning is mainly seen in the 18 -24 year age bracket.

Throughout the Southland District Health Board catchment area;

- The greatest proportion of alcohol-related presentations were for injury.
- Alcohol related presentations to A&E departments were mainly over the weekend.
- Over an 8 month period in 2012 there were 697 presentations at Southland hospital.
- 11% of these presentations were for people under the legal age to buy alcohol.

Public Health South, 2013: *The Impact of Alcohol on the Health of Southern Communities, A Report to Inform the Development of Local Alcohol Policies by Southern District Councils*.

6.2. Crime

Statistics relating to police incidents were provided by the New Zealand Police Service Southern District. Two reports were provided for this document; The Southern District Violence Knowledge Profile 2014 and The Southern District Road Safety Assessment. Overall physical numbers of violence have increased; however, the net population has also increased. This effectively results in an over all decrease in violence per capita.

Violence

Public Place Assaults

Number of attended Public Place Assaults 2013/2014	
Invercargill CC	122
Gore DC	28
Southland DC	39

Safe Communities Southland Initial Report
January 2015

Serious Assaults

Number of attended Serious Assaults resulting in injury 2013/2014	
Invercargill CC	194
Gore DC	37
Southland DC	53

Dwelling Assaults

Number of attended Dwelling Assaults 2013/2014	
Invercargill CC	386
Gore DC	85
Southland DC	113

Domestic Disputes

Number of attended Domestic Disputes 2013/2014	
Invercargill CC	561
Gore DC	42
Southland DC	115

<http://www.acc.co.nz/search-results/index.htm?ssUserText=community+profiles+southland>

Family Violence

Family Violence is a very real problem in New Zealand. New Zealand is ranked the worst, by some considerable margin in the Organisation of Economic and Cooperative Development (OECD) Community (Social Policy Division OECD, 2013). In the Southland area Domestic Violence and the severity of Domestic Violence is trending upwards. Southland has a significant rate per area proportion compared to the Dunedin District and Central Otago district. The Southland Region Domestic Violence rate is also trending upwards of the national average.

Family Violence is most likely to occur on a weekend, at night and during the summer months. There is a strong correlation to alcohol and family violence. A study reported in the Southern District Violence Knowledge Profile from the Counties Manakau District found that offenders of Family Violence usually drank at home or another private residence. Reporting of Family Violence numbers have increased overall and this is attributed to media and police campaigns to highlight the issue.

Southern District Violence Police

http://www.oecd.org/els/soc/SF3_4_Family_violence_Jan2013.pdf

Public Place Violence

Overall Public Place Violence is trending downwards in the Southland area. Public Place Violence offences are more connected to locations, such as areas close to bars and generally to a specific age group of young men. Again alcohol is attributed as a contributing factor and similarly to family violence trends, public place violence is more likely to take place over a weekend late at night and during the summer months.

Southern District Violence Police

Burglaries

Burglaries have an affect on perceptions of safety within a community. Burglaries are an invasion of an individual's security and therefore have an affect of safe communities and community wellbeing.

Dwelling Burglaries year 2013/14	
Invercargill CC	501
Gore DC	61
Southland DC	100

In all of the Southland Region TLA areas there has been an upwards trend in the number of dwelling burglaries. Most notably there was an increase of 150% from the year 2012/13 to 2013/14 in Invercargill City. Though, this increase is still less than the highest recorded number of 579 burglaries recorded in 2008/09.

Southern District Crime Data Police

Traffic

Overall traffic incidents in the Southland area remain steady with a mean traffic incident rating of 101.83 incidents per year over the past 6 years.

- **Fatal Crashes:** There were 21 fatal crashes across the Southern Police District in the fiscal year 2013/14. Speed was a common factor with alcohol being involved in 38% of fatal crashes. Two fatal crashes involved rental cars and 52% were on state highways. No exact data of fatal crashes in the Southland area was disseminated in the Southern District Road Safety Assessment.
- **Contributing Factors to Traffic Crashes:** Speed, alcohol, restraints, young drivers, and dangerous driving have been identified by police as the 5 factors that are most likely to cause a Traffic accident resulting in injury and/or death.
- **Distractions:** Such as cell phone use while driving is an issue across the district. Infringement notices for cell phones whilst driving are tracking upwards. As of the half year of Jan 1 to 23 July 2014 the total number of infringements was 241. In the entire year of 2013 the total number of infringements were 294.
- **Young Drivers:** Young Drivers still persist to be a high risk group to be involved with car accidents.

- Drink Driving: Drink Driving Laws changed on December 1 2014 and this is hoped to have an affect on drink driving rates.

Southern District Road Safety Assessment New Zealand Police

The NZ Transport Agency in 2014 released a summary report of traffic incidents that involved overseas drivers, tourists. This report details traffic incidents between the years 2009 to 2013 in the Southland/Otago area. This topic is receiving a lot of media attention at present and Southland is seen as an area that sees a lot of tourism traffic due to the natural features and close proximity to places like Queenstown and Milford Sound. A summary of the key findings of this report are outlined below.

- 493 injury crashes
- Main collision area is: SH94 followed by: SH6
- Most common on bends/corners
- 66% were single vehicle crashes
- 75% occurred in 100km/h zones
- 66% male as driver
- 50% were rentals
- 75% of crashes occurred in dry conditions
- High proportion of older vehicles

Morrison, 2014, NZ Land Transport Agency:

<http://www.saferjourneys.govt.nz/assets/Overseas-Divers-crash-analysis-to-advance-a-signature-project-part1-overview.pdf>

6.5. Environmental

Fire

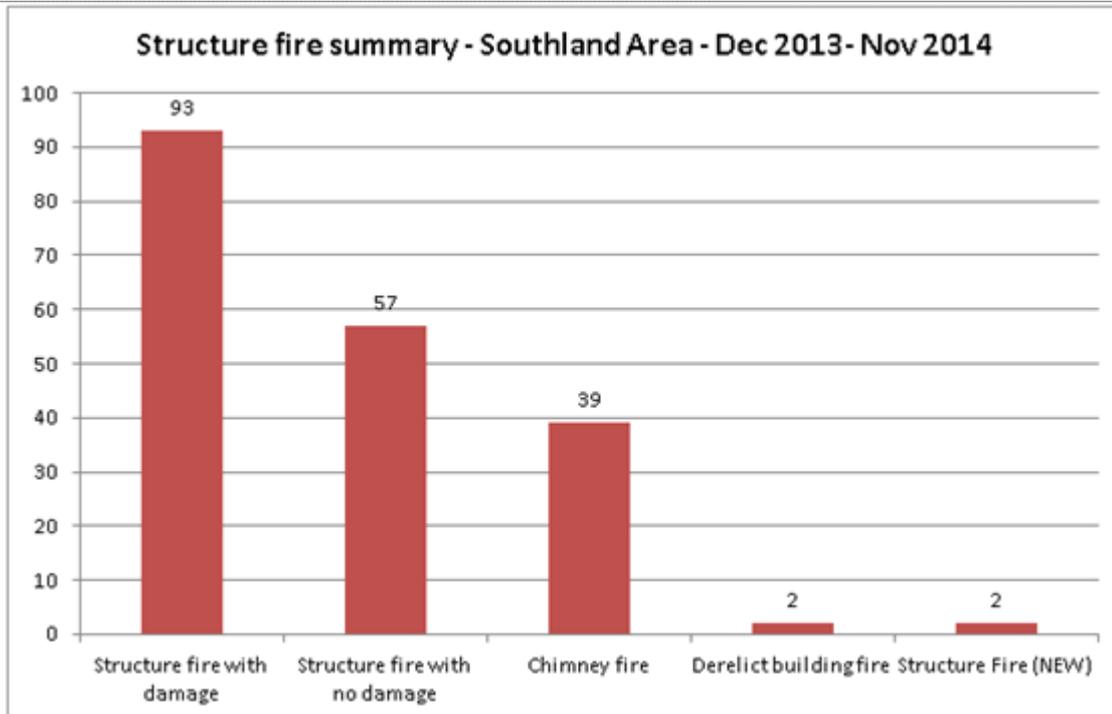
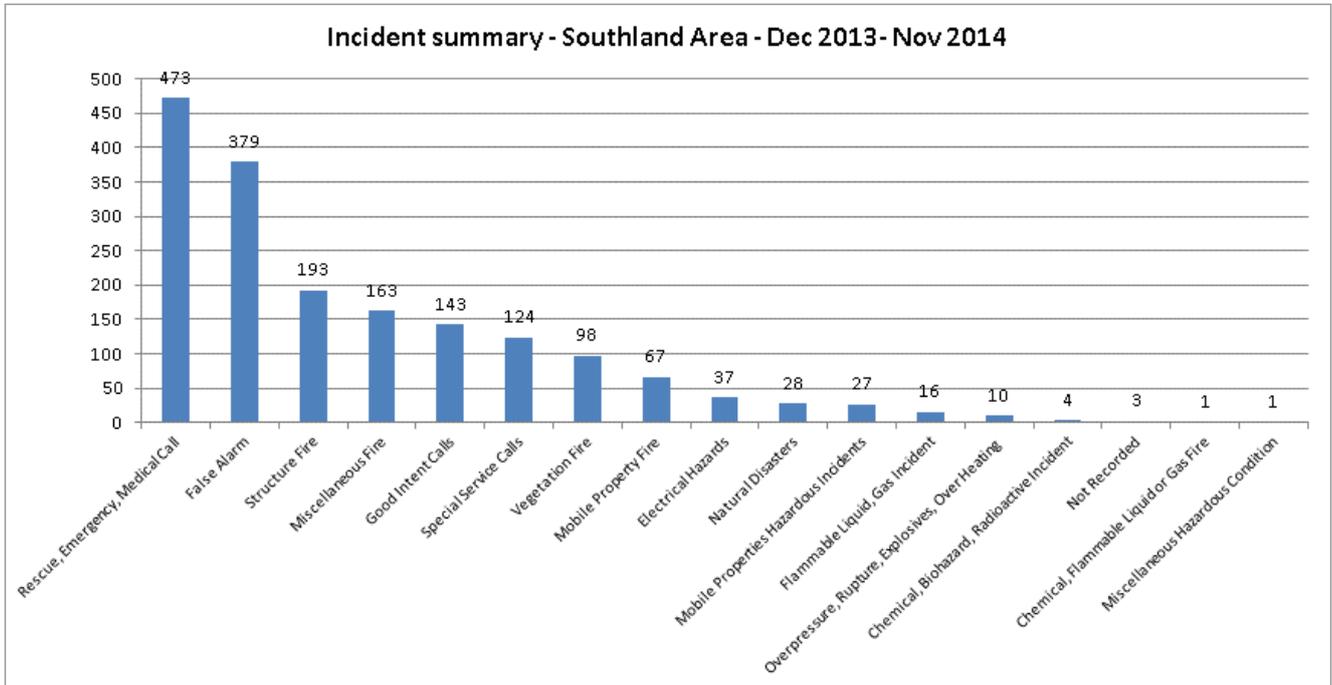
The New Zealand Fire Service is one of the three emergency services. They respond to a number of events and incidents that threaten injury and affect safety. Statistics relating to fire incidents were supplied by the New Zealand Fire Service. A summary of the trends include;

- Highest Incident rate is for rescue/emergency call, followed by false alarm, and then structure fire.
- Deliberately lit fire is a leading type of fire cause in Southland.
- Incident summary for the years 2012 to 2014 (inclusive) show that incident rates are static. However, incidents in the Gore and Southland District TLA areas are marginally trending downwards, and Invercargill City TLA area is marginally tracking upwards.
- Structure fires are mainly recorded in winter months whereas, outdoor fires, such as rubbish fires have a higher occurrence in warmer months.

Safe Communities Southland Initial Report
January 2015

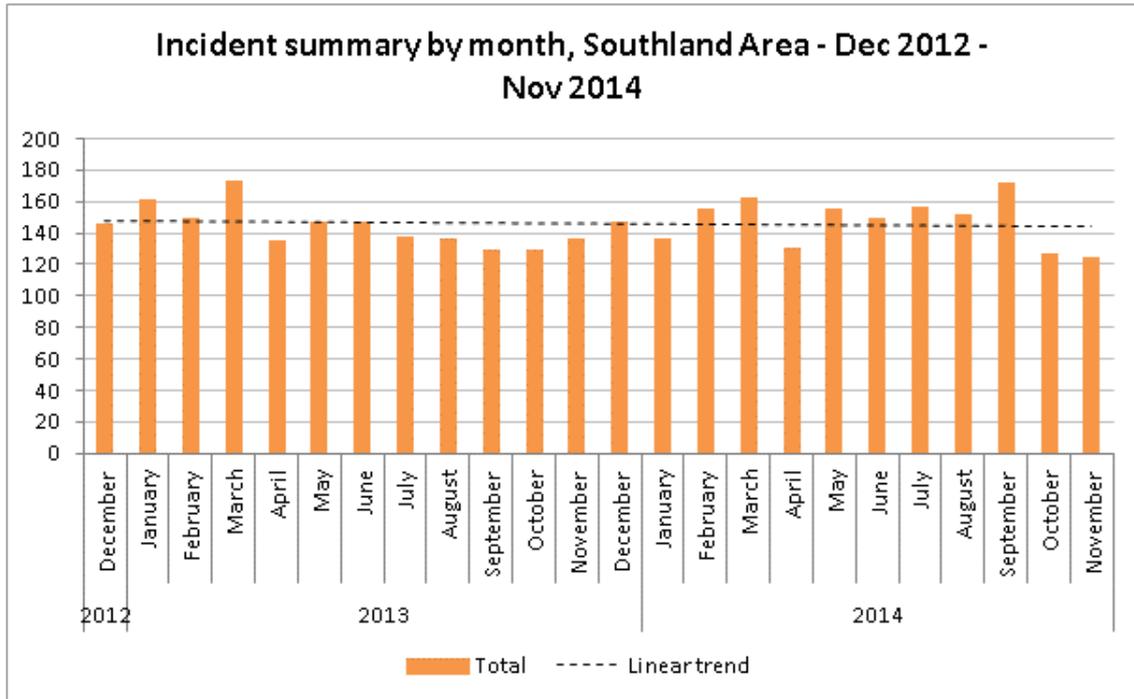
Below are a series of graphs that provide data relating to fire statistics and types of incidents in the Southland area. Graphs show incidents over the 12 month period from December 2013 to November 2014. The final graph shows a breakdown of the types of deliberately lit fire by TLA for the last year.

Incident summary for Southland Area, last year

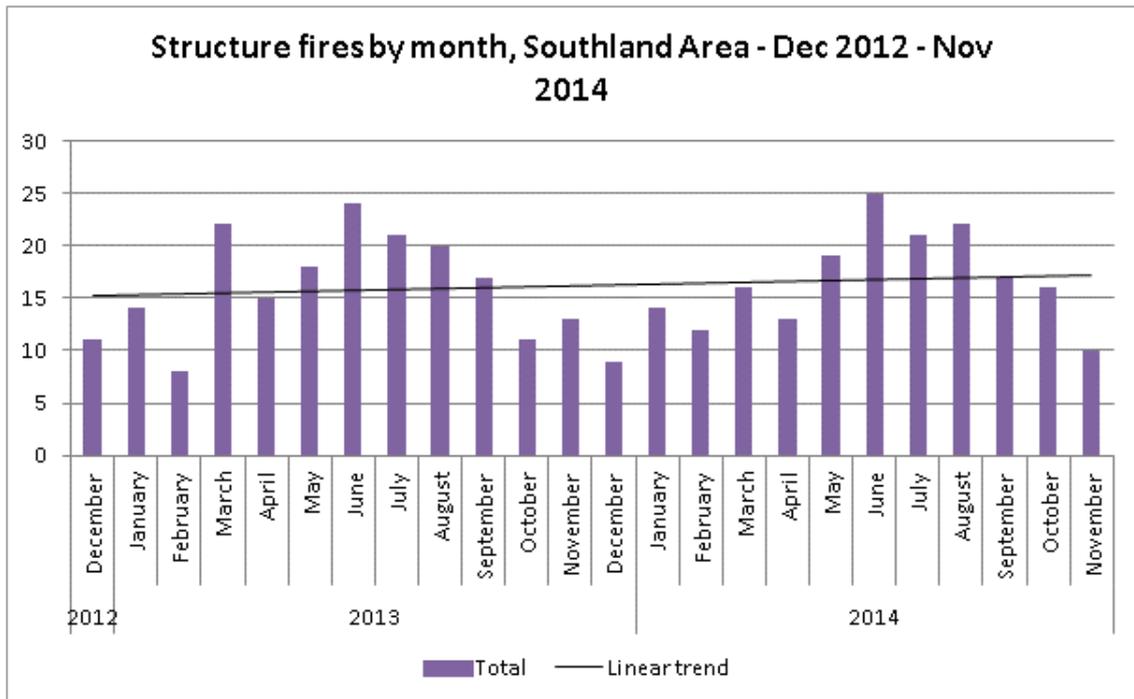


Incident counts, Southland Area - last two years with trend:

Safe Communities Southland Initial Report
January 2015

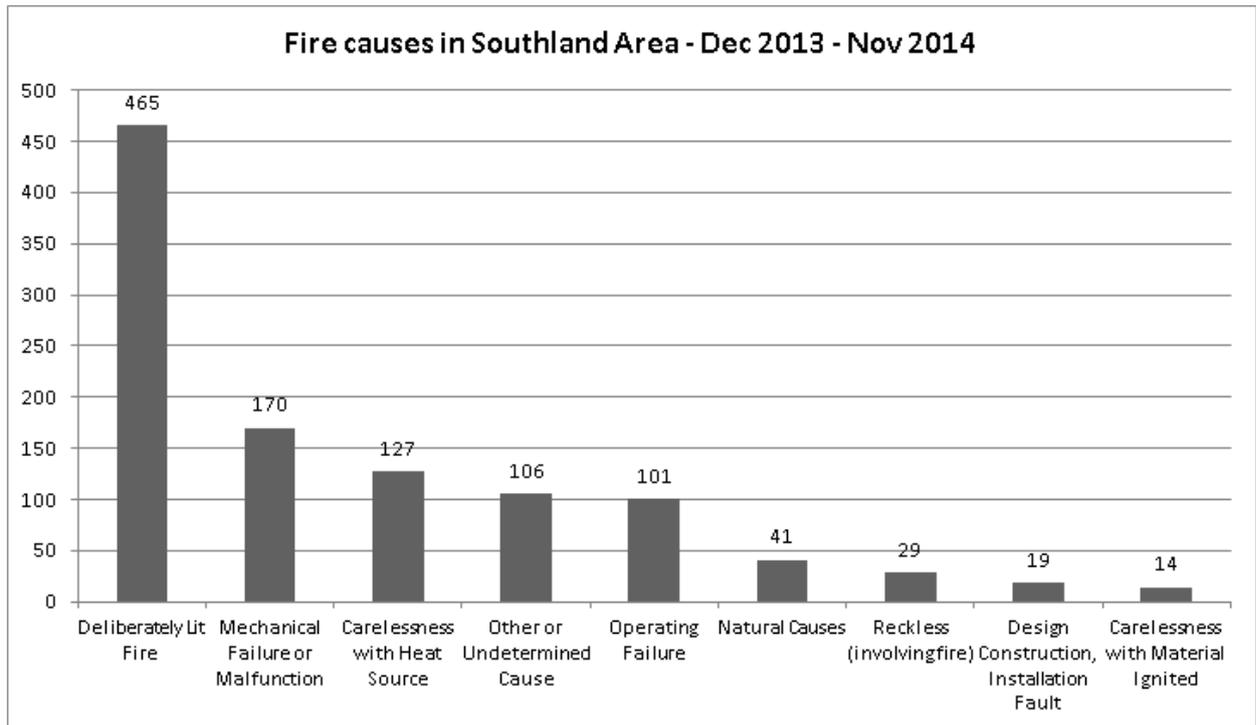


Structure fires by month, Southland Area, last two years with trend:

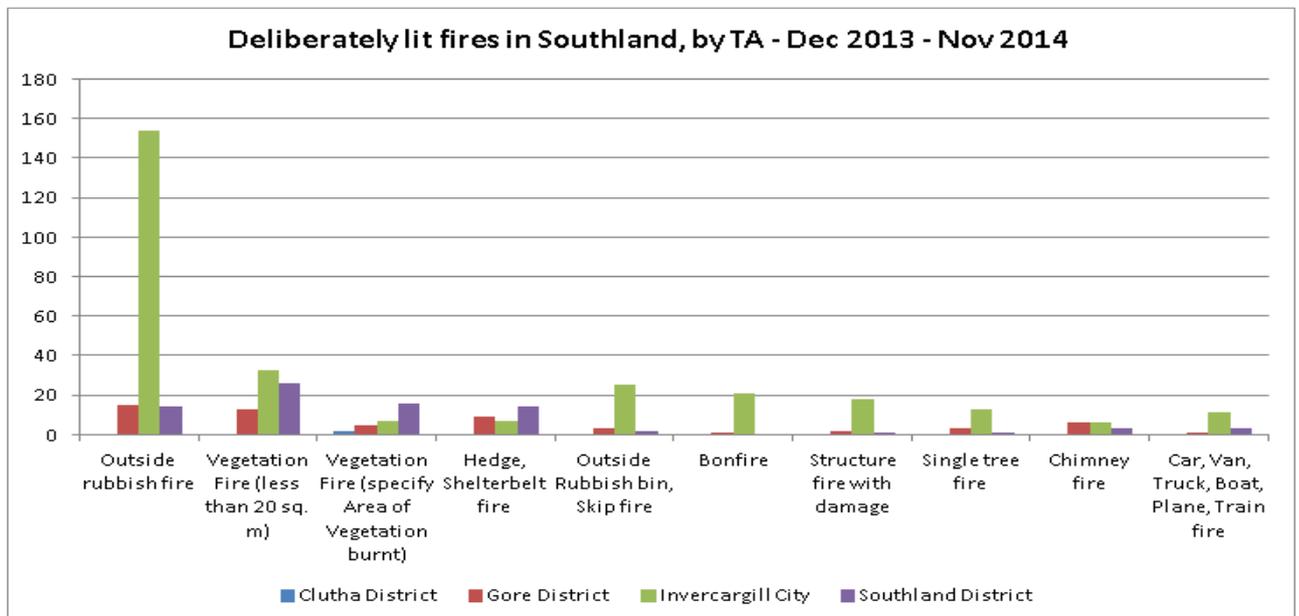


Safe Communities Southland Initial Report
January 2015

Fire causes in the last year, Southland Area:



Deliberately lit fires



New Zealand Fire service Southern Region

Workplace Injuries

As mentioned in the demographics Southlands industry revolves around primary industry, this includes farming. Farming is one of the most dangerous occupations in New Zealand. On January 16, 2015, Radio New Zealand ran a news story outlining the severity of farm injuries, fatal and otherwise, that occur on Southland farms. This is supported by the ACC reports that show farm related injuries rank highly.

Below is a list of the most common farm incidents that cause injury, as sourced from the farm safe website.

Dairy Farms

- Injury by animals.
- Vehicle injuries (ATV rollover).
- Lifting, strain (lifting calves and feed).
- Noise and OOS
- Slips, trips and falls (mostly in and around dairy shed).

Sheep and Beef Farms

- Injury by animals (hits and crushes).
- Vehicle injuries (ATV rollover).
- Lifting, strain (lifting implements, animals and feed).
- Slips, trips and falls.
- Noise (hearing loss).

Horticulture Farms

- Lifting and straining (produce, building materials, loading and unloading).
- Repetitive work (picking, pruning, harvesting, sorting/bagging and noise).
- Slips, trips and falls (ladders, wet surfaces, uneven ground).
- Vehicles and towed implements (slipping off machinery, struck by towed implements, repetitive driving, run over, hit by tree branch).
- Struck by object (tree branch in face, wire, building material, saws and knives).

<http://farmsafe.co.nz/beingsafe/common-injuries/>

7. Limitations

Limitations do exist in this report. These include the following;

- District size, statistics across a larger area, e.g.
 - Southern District Police area includes Otago as well as Southland
 - Southern District Health Board area includes Otago as well as Southland
- Time constraints.
- Availability and to data.
- Methodology weakness and bias

8. Background Information on Safe Communities Designation

8.1. World Health Organisation

The Safe Communities movement began at an International Conference that focused on Accident and Injury Prevention. This was held in Stockholm 1989. The conference passed a resolution that *“All human beings have an equal right to health and safety”*. This is the main premise for World Health Organisations (WHO) Global Programme on Accident Prevention and Injury Control. This programme has a collection of designated Safe Communities that have gone through an accreditation process. This collection of designated communities seeks out best practice in safety and injury prevention A Safe Community is defined by the community aspiring to safety through a structured and collaborative approach

Sundström, 2014: http://www.ki.se/csp/who_introduction_en.htm .

Safe Communities have:

- An infrastructure based on partnership and collaborations, governed by a cross-sector group that is responsible for safety promotion in their community;
- Long-term, sustainable programs covering genders and all ages, environments, and situations;
- Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups;
- Programs that are based on the available evidence;
- Programs that document the frequency and causes of injuries;
- Evaluation measures to assess their programs, processes and the effects of change;
- Ongoing participation in national and international Safe Communities networks.

Sundström, 2012: <http://www.ki.se/csp/>

8.2. Pan Pacific Safe Community Network

The Pan Pacific Safe Community Network (PPSCN) is a regional accreditation board in the Pacific region and includes the following countries; New Zealand, United States of America, Australia and Canada. PPSCN is aligned to the WHO and collectively there is over 120 accredited ‘Safe Communities’ within the four named countries and some 40 communities

which are completing the process of accreditation The PPSCN mission is to see a collaborative response to best practice to improve designated Safe Communities in the Pan Pacific region.

PPSCN: <http://www.ppscn.org/>

8.3. Safe Communities Foundation New Zealand

The Safe Communities Foundation New Zealand (SCFNZ) is lead organisation for accreditation and certification purposes in New Zealand

As cited on the SCFNZ website the process for accreditation is as follows;

1. Submit a Letter of Intent to SCFNZ.
2. SCFNZ will invoice the community for entire process and appoint a key contact person.
3. Submit your draft documentation to SCFNZ.
4. Feedback will be provided on draft within 14 working days.
5. Submit final application document.
6. Receive feedback on your application from the SCFNZ team of reviewers.
7. Host a site visit to demonstration community safety efforts for the Certifier/Review Team.
8. Conduct a ceremony celebrating your official accreditation.

Safe Communities New Zealand, 2006

<http://www.safecommunities.org.nz/becoming/accred/view>

The following centers/regions in New Zealand are accredited and designated Safe Communities:

- | | |
|--|--|
| 1. Waitakere SC (1999, 2006) now Safer West (2013) | 7. Tauranga SC (2008) |
| 2. Waimakariri SC (1999, 2006, 2013)) | 8. Porirua SC (2008) |
| 3. New Plymouth SC (2005, 2010) | 9. Christchurch SC (2008) |
| 4. Whangarei SC (2005, 2011) | 10. Wairarapa Region - South Wairarapa SC (2010) |
| 5. Wellington SC (2006, 2012) | 11. Wairarapa Region - Carterton SC (2010) |
| 6. North Shore SC (2007) now Auckland North (2013) | 12. Wairarapa Region - Masterton SC (2010) |

- | | |
|--|-------------------------------------|
| 13. Taupo SC (2010) | 21. Tairāwhiti SC (2012) |
| 14. Rotorua SC (2010) | 22. Central Hawkes Bay SC (2012) |
| 15. Hutt Valley - Hutt City SC (2010) | 23. Hastings SC (2013) |
| 16. Hutt Valley - Upper Hutt SC (2010) | 24. Waitaki SC (2013) |
| 17. Napier SC (2010) | 25. Marlborough SC (2014) |
| 18. Wanganui SC (2010) | 26. Palmerston North SC (2014) |
| 19. Nelson SC (2011) | 27. Western Bay of Plenty SC (2014) |
| 20. Tasman SC (2011) | |

Safe Communities New Zealand, 2006 <http://www.safecommunities.org.nz/sc/>

9. Conclusions

In summary, trends have been identified across the information that has been gathered. Most notably the two that stand out as having the most impact on the Southland region are alcohol and violence. The data shows that Southland is a very violent place in comparison to the rest of New Zealand and Domestic Violence rates are on the increase. In most cases violence, domestic and public, can be attributed to alcohol. Furthermore, it is reported that Southland has a hazardous alcohol consumption culture and this also has an affect on hospital related admissions for injury. From this it can be said that there is a definite correlation between alcohol and violence and these are interrelated and interdependent. The data in this report also highlight other areas whereby collaborative intervention could decrease the amount of injuries sustained by the population. This is something that can be approached now to solve problems in the future. This includes the aging population, industry types, and poverty and areas of deprivation. A Safe Communities designation will have a definite impact on community wellbeing. This is through a collaborative approach to identifying and addressing issues that relate to the safety and wellbeing of people in Southland.

From the report a number of recommendations are made for the continue investigation to injuries and safe community designation in Southland. These include;

- Workshop on safer communities
- Identification of work streams
- Further research and data analysis on trends
- Community consultation
- Identification of lead agencies.