

156 SECTION G INDICATOR 5:

Programmes that document the frequency and causes of injuries - both un-intentional (accidents) and intentional (violence and self-directed).

Summary of Injury in Marlborough

Presented below is the range of local data that is used to determine injury prevention strategies, along with activities outlined in the New Zealand Injury Prevention Strategy and New Zealand legislation.

Ministry of Health – National Minimum Data

Deaths due to injury are the tip of the injury iceberg. Since 1988, for Marlborough residents the number of deaths attributed to intentional and unintentional injuries varies year by year (see Figure 1), with the least occurring in 2006 (number = 10) and the most in 2002 (number = 31). Between 2005 and 2009, around 23 % of the total number of deaths were of intentional intent (includes assaults and self-inflicted injury).

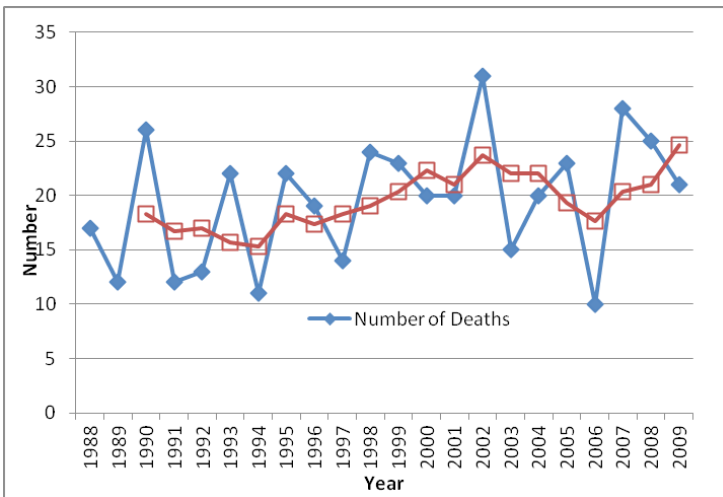
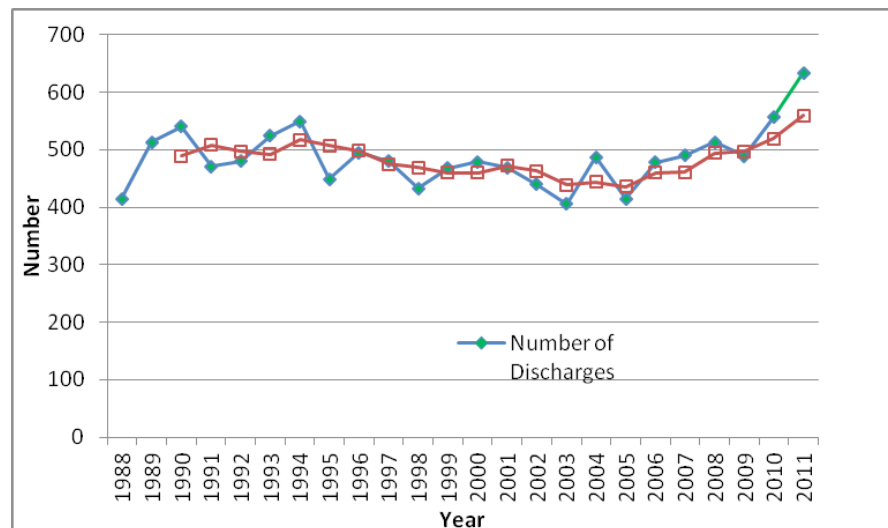


Figure 1. The number of deaths attributed to intentional and unintentional injury for Marlborough residents (Source: National Injury Query System)

Hospital discharge data is useful to understand the burden of injury which was serious enough to warrant hospitalisation. Figure 2 shows that the average number of people (red line) discharged from hospital due to an injury in Marlborough has been around 500 people per year, dropping slightly during the late 1990s then steadily rising above an average of 500 per year most notably since 2009.

Figure 2. The number and three year rolling average of Hospital Discharges due to injury for Marlborough District Council residents



Nelson Marlborough District Health Board -Emergency Department data

Emergency department data serves as an indicator of the next level of injury severity and also is affected by how easily people can access primary care. Wairau Hospital's Emergency Department services the people living in Marlborough as well as visitors to the area or, as the gateway to the South Island, people travelling through to or from Nelson, West Coast, or Canterbury. Wairau Emergency Department sees, on average, 7,500 people per year. The distribution throughout the year is fairly even.

ACC work-related claims

ACC claims covers all those with more severe injuries as well as those with less severe injuries where treatment is sought from a primary care provider or physiotherapist. The total number of new claims in Marlborough has reduced from 16,984 for the year Jul-Jun 2007/08 to 10,739 for the year Jul-Jun 2011/12. However despite these reductions in the number of new claims, there has been only a modest reduction in overall cost from 26,308,641 in Jul-Jun 2007/08 to 24,996,363 in Jul-Jun 2011/12.

On average 21% of new claims are due to a work –related injury. The distribution of new claims by the location of where the injury occurred (including sporting and work claims) is shown in figure 3. The proportion of total claims due to injuries occurring in places of work, medical care and education over the past 5 years as reduced whereas there has been a small but steady increase in the distribution of injuries occurring in the home, place of recreation or sports, and those classified as scene other or unknown.

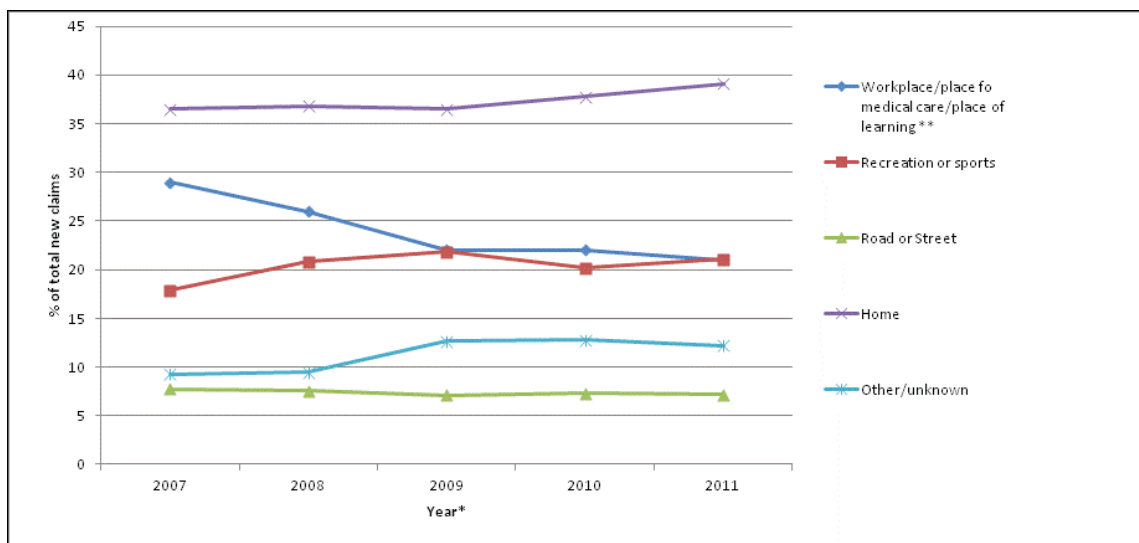


Figure 3. The average distribution of new claims by location (scene) where the injury occurred.

NZTA

Injuries occurring on rural roads and roadsides are of major concern for Marlborough and are reflected in the number of fatal, serious and minor injury crashes for this region. Taking the total number of fatal, serious, and minor injury crashes based on data reported by the New Zealand Transport Agency between 2007-2011, each year on average 2.6 people are killed, 13 seriously injured and 34 receiving minor injuries on Marlborough's rural roads.

Drownbase

Between 2007 to 2011 there were eight people who drown in the Marlborough region. Of those who drowned, 88% were participating in recreational activity, all were male, and 63% involved alcohol. Between 2010 and 2012 there were three Marlborough residents who drowned within New Zealand and five people drowned in the Marlborough region.

Key person characteristics

Ethnicity

Maori and Pacific people often experience poorer health outcomes compared with Europeans. Because of the small numbers proportionately, understanding injury data by ethnicity for ethnic groups resident in our community is not well supported by injury statistics. The link between injury rates and census areas of higher deprivation for most injury types is strong and assists with priority setting. An example of this is found for road safety which shows that there is a higher risk of an injury causing crash for people who live in areas with a higher level of deprivation.

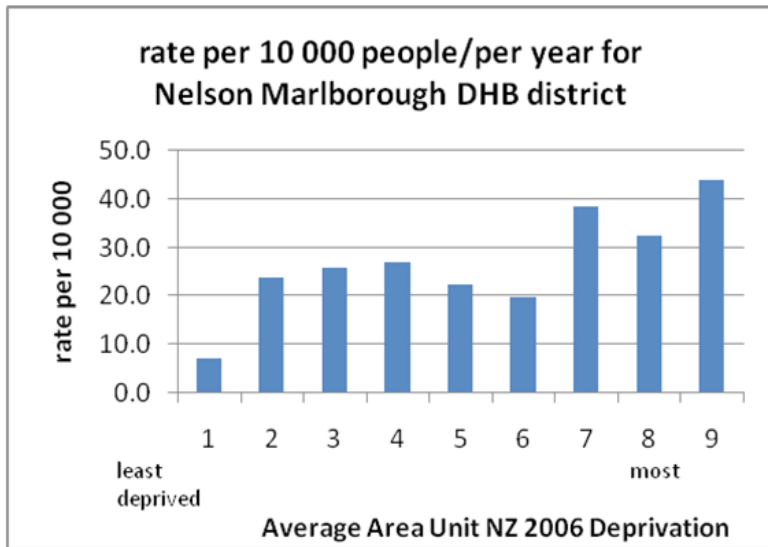


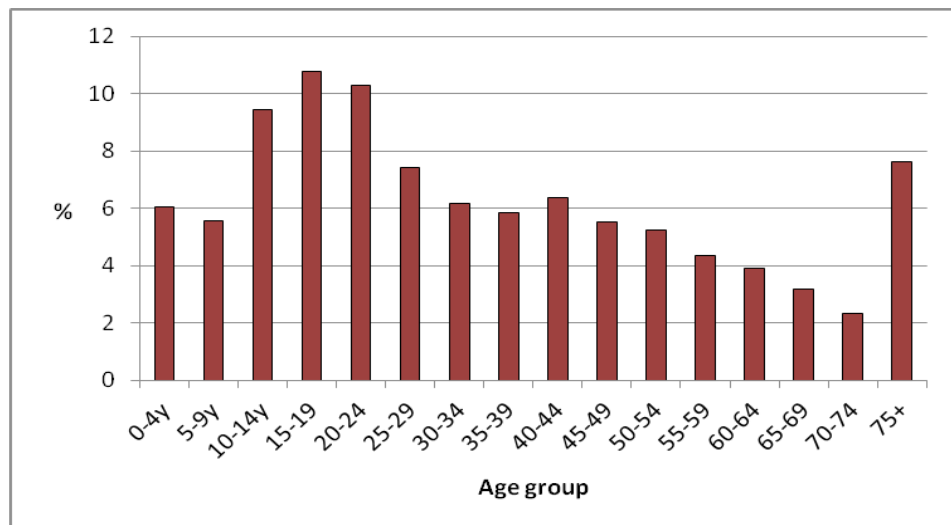
Figure 4. ACC injury claims linked to records from Ministry of Transport Crash Analysis System for 5 years ending 30 June, 2010 by area unit residence of claimant and average area unit NZ Deprivation (2006 Census)

Based on provisional data for 2011 for all of New Zealand, Pacific peoples had the highest incidence rate of workplace injury out of all ethnicities, with 115 claims per 1,000 FTEs.

Age and gender

The average distribution of presentations to Wairau Emergency Department by age is shown in the figure below by the numbers. For Wairau, those aged between 10-24 and those aged over 75 years have the highest number of injury presentations.

Figure 5. The distribution (in percent) of injury presentations to Wairau Emergency Department by age category.



For work related claims for all of New Zealand, workers aged 15–24 years and workers aged 65 years and over had the highest claim rates across all age groups, with just over 1 in 8 making a claim.



Drivers aged 15- 24 years are of high concern for road safety due to the high number of fatal, serious, and minor injuries occurring on Marlborough's rural and urban roads and roadsides. Taking the total number of fatal, serious, and minor injury crashes based on data reported by the New Zealand Transport Agency between 2007-2011, each year on average 1.6 young people are killed, 6.6 seriously injured and 33.4 receiving minor injuries on roads in Marlborough District.

Most sources of injury information note that there are a higher number of males compared with females who experience a serious or fatal injury. For example, approximately 56% of all ACC new claims were for males. Around 57% of Wairau Emergency Department injury presentations were for males. Table 1 show that there were more males in Marlborough who died because of an injury compared with females most notably between the ages of 20 through to 69 years. There are also a greater number of males discharged from hospital compared with females throughout the age groups until the age of 60 years, where the number of females is greater.

Table 1. The number of injury deaths by gender from 1988-2009 and the number of hospital discharges due to injury between 2002-2011.

Age Group	Deaths 1988 - 2009		Hospital Discharges 2002-2011	
	Males	Females	Males	Females
0-4	9	4	95	69
5-9y	4	4	100	89
10-14 y	4	≤3	138	78
15-19	19	19	203	129
20-24	37	9	161	68
25-29	24	≤3	128	51
30-34	19	6	131	78
35-39	26	6	151	75
40-44	13	9	119	80
45-49	15	4	116	71
50-54	14	≤3	115	89
55-59	14	≤3	109	87
60-64	10	4	75	81
65-69	19	<3	80	93
70-74	12	12	85	94
75-79	14	4	78	162
80-84	13	13	92	218
85+	14	39	99	384

Crime and safety

Crime and violence disrupts the lives, physical and mental health of many people and is a major challenge for health, justice, human rights, and social and economic development.

The number of offences in Marlborough varies from year to year. Table 2 shows the average over a five year period (2007-2011) for the Marlborough region by offence type. On average during the five year period from 2007 to 2011, 5472 offences occurred every year of which on average 37.5% occur in a dwelling.



Table 2. The average number and type of offences occurring each year in Marlborough

Offence type	Average number of offences	% occurring in a dwelling
Acts intended to cause injury	511	46.8
Sexual assault and related offences	43	66.3
Dangerous or negligent acts endangering persons	16	31.7
Abduction, harassment and other related offences against a person	197	52.2
Robbery, extortion and related offences	14	-
Unlawful entry with intent/burglary, break and enter	455	57.6
Theft and related offences	1398	28.7
Fraud, deception and related offences	142	24.4
Illicit drug offences	500	59.9
Prohibited and regulated weapons and explosives offences	107	36.5
Property damage and environmental pollution	867	36.3
Public order offences	928	23.5
Offences against justice procedures, government security and government operations	257	31.4
Miscellaneous offences	37	28.3
Total Offences	5472	37.3

There are currently 397 offenders on sentences in the Marlborough district of which 156 are on Community Work, 33 on electronically monitored sentences (Home Detention or Community Detention), 155 on supervisory sentences and 53 on post release sentences (Parole).

Purpose collected data

At times the community will design specific tools to collect data to answer specific questions. The most frequent examples of this are evaluations which generally are designed to measure whether an intervention had the desired effect on changing behaviour and knowledge, attitudes and where feasibility and realistic, the frequency of injury. Another example is when there is uncertainty or lack of data to drive action – for example reliable information on alcohol related harm. In these circumstances it is useful to understand via surveys what the key issues are based on people's lay and profession experience.

Examples of these are shown in Section H.

Closing remarks

Marlborough enjoys a range of active community groups and forums to discuss the implications of available data. How the data is used in the community is described more fully in Section H.



Source:

From National Injury Query System accessed May 2013 from <http://ipru3.otago.ac.nz/niqs/index.php>
ACC Injury Statistics Tool accessed May 2013 from <http://www.acc.co.nz/for-individuals/injury-statistics/index.htm>

From Briefing notes for Marlborough, 2012 Accessed May 2013 from <http://www.nzta.govt.nz/resources/crash-analysis-reports/briefing-notes.html>

From Watersafety NZ. Accessed May 2013 from <http://www.watersafety.org.nz/research/drownbase/>
Statistics NZ Accessed May 2013 from http://www.stats.govt.nz/browse_for_stats/health/injuries/InjuryStatistics_HOTP11.aspx

From Briefing notes for Marlborough, 2012 Accessed May 2013 from <http://www.nzta.govt>.
Violence Prevention Alliance- World Health Organisation. Conceptual framework 2010 <http://www.who.int/violenceprevention/en/>

Recorded Crime statistics Accessed from Statistics New Zealand Table Builder located at http://www.stats.govt.nz/tools_and_services/tools/TableBuilder.aspx

