

The New Zealand Injury Burden

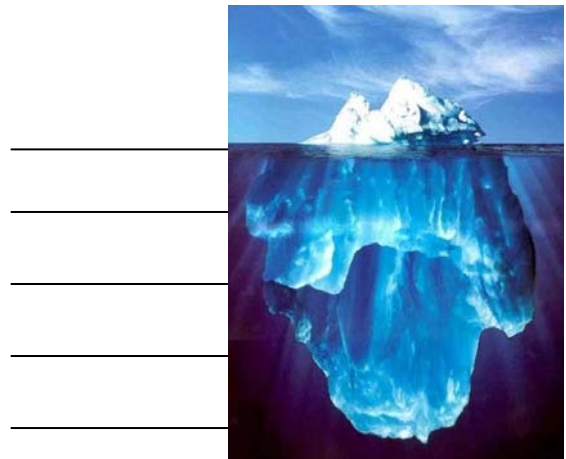


In New Zealand, injury (unintentional and intentional) is the leading cause of death for ages 1 to 34 years, and the second leading cause of hospitalisation.

Injuries also account for more potential years of life lost than cancer and heart disease combined. In childhood, injury accounts for approximately 60% of all deaths and by adolescence and young adulthood, injury (including suicides) accounts for approximately 80% of deaths.

The New Zealand
Injury Burden

- 1,524 Deaths (2001)
- 43, 632 Hospitalisations (2003)
- 250,419 Emergency Departments (2003)
- 1.5 million ACC injury claims (2002/03)
- 214,400 Long-term disability
(Statistics New Zealand, 2001)



If researchers and practitioners are serious about reducing the injury burden then the first step must be to raise awareness of injuries. For example:

- Internationally, 7 of the 15 leading causes of death for those aged 15-44 years are injury related;
- In New Zealand, in the most recent year for which data is available, 1,524 New Zealanders died as a result of an injury;
- During 2003, 43,632 people were hospitalised for 24 hours or more following a serious injury;
- In New Zealand, during 2003, 250,419 New Zealanders were treated in emergency rooms;
- During 2002/03, over 1.5 million injury claims were accepted by the Accident Compensation Corporation (ACC);
- Findings from a 2001 health survey indicate that 214,400 New Zealanders have long-term disability as a result of an injury; and
- Injury is an important cause of disability and costs New Zealand taxpayers, employers, insurers and individuals billions of dollars each year. Current evidence indicates that the social and economic costs of injury are high, approximately \$6-7 billion per year, yet many injuries and their consequences are preventable.

Safe Communities Foundation New Zealand (SCFNZ)

Hurstmere House, Suite 5A, 128 Hurstmere Road, Takapuna, PO Box 331399, Takapuna, North Shore 0740, New Zealand.

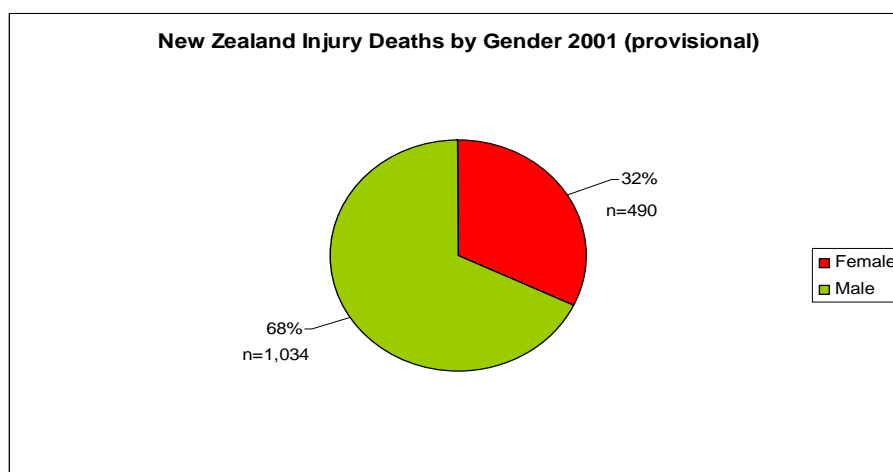
Tel: +64 9 488 7601 Fax: +64 9 488 7602 Email: contact@scfnz.org Web: www.safecommunities.org.nz

SCFNZ is a: Certifying Centre and

Affiliate Safe Community Support Centre of the WHO Collaborating Centre on Community Safety Promotion;
Accrediting Centre for Safe School Community International Accreditation Programme.

Injury deaths by gender, age-group and ethnicity

Gender: Males had twice the number of injury deaths than females in 2001.



Age-groups:

Age group	Frequency	Percent	Rate (per 100,000 population)
0-4	42	2.8	16
5-9	18	1.2	6
10-14	32	2.1	11
15-19	125	8.2	47
20-24	141	9.3	59
25-39	357	23.4	43
40-59	330	21.7	35
60-74	161	10.6	40
75+	318	20.9	156
Total	1524	100.0	41

- 🚗 The highest rate of injury deaths was for people aged 75⁺.
- 🚗 The second highest rate of injury occurred among young people aged 20-24, followed by young people aged 15-19.
- 🚗 However just under half of all injury deaths occurred among adults aged 25-59 (45%, n=687).

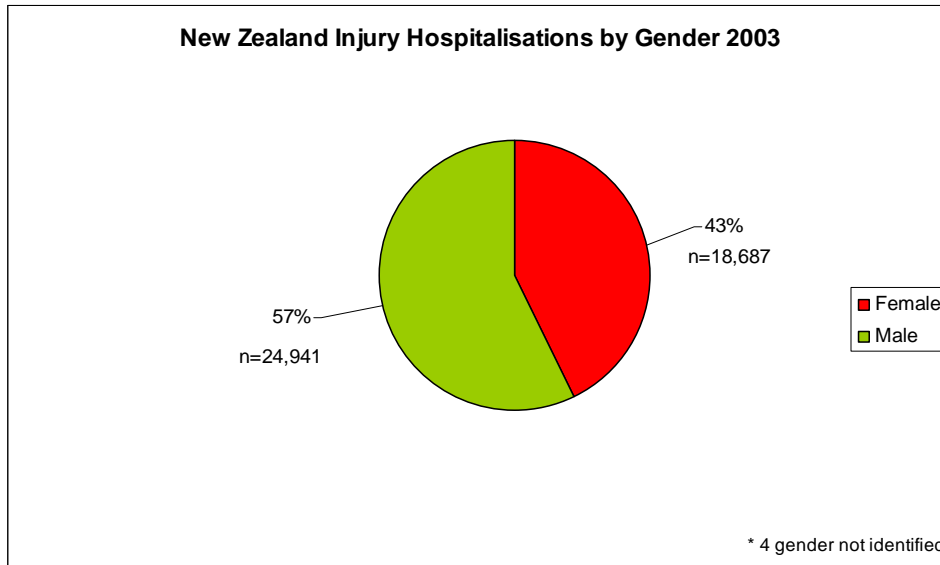
Ethnicity:

Ethnicity	Frequency	Percent	Age-standardised rate (per 100,000 population)
New Zealand European/Other	1203	78.9	31
Maori	263	17.3	52
Pacific	58	3.8	27

- 🚗 During 2001, the injury death rate for Maori was 52 per 100,000 population compared to 27 per 100,000 for Pacific peoples and 31 per 100,000 for people who identified as New Zealand European/Others.

Injury hospitalisations by gender, age-group and ethnicity

Gender: During 2003, more males were hospitalised due to injuries than females.



Age-groups:

Age group	Frequency	Percent	Rate (per 100,000 population)
0-4	2803	6.4	1035
5-9	3399	7.8	1211
10-14	3229	7.4	1119
15-19	3782	8.7	1379
20-24	3304	7.6	1322
25-39	8022	18.4	1000
40-59	7841	18.0	785
60-74	3935	9.0	919
75+	7317	16.8	3154
Total	43,632	100.0	1141

- During 2003, adults aged 75 years and over had the highest rate of injury hospitalisations (3,154 per 100,000 population) and young adults aged 15-24 had the next two highest rates (1,379 and 1,322 per 100,000 population respectively).
- However the majority of injury hospitalisations occurred among adults aged 25-39 (n=8,022), followed by those in the 40-59 year age-group (n=7,841).

Ethnicity:

Ethnicity	Frequency	Percent	Age-standardised rate (per 100,000 population)
New Zealand European/Other	34046	78.0	964
Maori	7066	16.2	1273
Pacific	2520	5.8	1020

- During 2003, Maori had higher rates of injury hospitalisations (1,273 per 100,000 population) compared to 1,020 per 100,000 population for Pacific peoples and 964 per 100,000 for people who identified as New Zealand European/Others.

Types of injuries

Deaths, 2001

- 🚗 Transport (n=499; 32.7%)
- 🚗 Suicide (n=490; 32.2%)
- 🚗 Falls (n=278; 18.2%)
- 🚗 Assault (n=46; 3.0%)

Leading causes of injury- death and hospitalisation in New Zealand

Hospitalisations, 2003

- 🚗 Falls (n=17,045; 39.1%)
- 🚗 Transport (n=3,943; 9.1%)
- 🚗 Cutting/Piercing (n=3,436; 7.9%)
- 🚗 Attempted suicide (n=2,787; 6.4%)

From routinely collected data, injuries occur in a variety of settings.

For example:

- Fractures & head injuries from motor vehicle traffic crashes;
- Suicide or self-inflicted injury which is now the second leading cause of injury death in New Zealand;
- Falls among children, older people and while at work or home, resulting in injuries to the head and to other parts of the body;
- Falls, strains, sprains and in extreme cases disablement while engaging in sport and recreational activities;
- Cutting and piercing which often result in the loss of limbs and can cause serious disruption to activities of daily living;
- Injuries as a result of violence and assault;
- Drowning while swimming or boating;
- Burns and scalds from fires;
- Serious dog bites resulting in disfigurement and in extreme cases death; and
- Injuries as a result of alcohol or other drug misuse which can have devastating results on the individual and their family and friends.



Impact of injuries

The personal, social and economic costs of injury are significant, with unintentional and intentional injuries affecting the quality of life of millions of children, young people and their families. In New Zealand, it has been estimated that the cost of injuries exceeds \$7 billion per annum. The majority of this cost is related to treatment and ongoing rehabilitation costs, indicating the long-term cost of disablement suffered by the victims of injury.

The impact of injury on a person, their family, their friends and the community as a whole can be devastating. Many injuries result in lifelong changes for all those involved. It is recognised that the cost of injuries are far greater than treatment and rehabilitation costs alone, and that the cost of a life, of lost potential and opportunities foregone are immeasurable.

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