

VIBRANT SAFE WAITOMO



**KIA MAU TONU KI TĒNĀ; KIA MAU KI TE
KAWAU MĀRŌ, WHANAKE AKE! WHANAKE AKE!**

**STICK TO THAT, THE STRAIGHT-FLYING
CORMORANT!**

Chief Maniapoto's final instructions to his people - to be a force like the cormorant which darts forward in the charge, unyielding.

Reference:

Te Ara - The Encyclopedia of NZ

TABLE OF CONTENTS

Vibrant Safe Waitomo, An introduction by The Mayor – Brian Hanna	4	Effective Strategies.	46
Vibrant Safe Waitomo - A message from Iwi.	5	Local Programme Alignment	49
Collaborative Leadership	6	National and Regional Programme Alignment	49
The Journey begins	7	Successful Strategies.	51
Sustainability	8	Social Sector Trials- A case Study	51
Structure.	9	Tuia and the Mayors Taskforce For Jobs (MTFJ) Rangatahi - A case study	52
Regional Coalition Group	10	The Great New Zealand Muster – A case study	54
Waitomo District Background	16	Future Strategies	55
Location	16	Adding Value	55
Terrain	16	Programme Directory	56
Climate	16	Economic Development	56
Population	16	Shared Learnings	58
Commentary.	19	Key Achievements in the Safe Community Journey	58
Industry.	19	Community Engagement	59
Education	20	Evaluation Strategies	60
Recreation	20	Results Based Accountability (RBA)	60
Waitomo District Background	21	Surveys	61
The Place	21	Story Telling	61
The People.	21	Benchmarking	61
The conflicts	22	Counts	61
The future.	23	Communication Plan and strategies	61
Priority Setting	24	Communication: Waitomo District Communities	62
Community safety viewed through different lenses	24	Communication: Waitomo District Council and Council staff.	64
Sources of Statistics.	25	Communication: The Regional Coalition	64
Handling the data	25	Shared Experience.	65
Areas of research.	26	Appendices.	66
Overview and analysis of data and trends - How are we looking?	26		
Injury rates and Occurrences	27		
Injury Setting	29		
Crime	30		
Suicide	33		
Obesity	33		
Alcohol Harm	34		
Drug Harm	36		
Smoking Harm	37		
Education	38		
Fire and emergency	39		
Youth Outcomes.	39		
Safety perception in the community	41		
Priority areas for Vibrant Safe Waitomo	42		

VIBRANT SAFE WAITOMO, AN INTRODUCTION BY THE MAYOR – BRIAN HANNA



TĒNĀ KOUTOU

As the Mayor of the Waitomo District and the Chair of the Vibrant Safe Waitomo Regional Coalition, I am delighted to support the application for accreditation through Safe Communities Foundation NZ for Vibrant Safe Waitomo (VSW). When I think about our District in this context I think of the strengths of our area including the people that shape the unique communities we live in, the rural settings, business prospects and the opportunities and challenges that lay ahead as we move forward together.

Our Council is set on a new pathway, one that focusses on people and when I look at the people of our District I know that over 40% of our population identify with being Māori. Having the support of the Maniapoto Māori Trust Board as the mandated entity for Ngati Maniapoto is fantastic and I want to mihi to the Board and the Chief Executive for their input so far. Our District comprises of many ethnic groups all contributing to our Districts cultural depth and identity and it is the combination of these that has held us steadfast as a community. We will be drawing upon this to guide and support us as VSW develops.

In terms of location we boast extraordinary landscapes and coast lines with the added benefit that it sits in close proximity to major population centres such as Hamilton and

Auckland. It is indicative that the tourism industry is flourishing and we plan to take advantage of this more.

Specifically linked to VSW is the work Council is doing to improve population centres within communities in an attempt to encourage our individuals and families to live, work and play within our District more. We want residents to be safer in general and to consider our District as their first choice to raise a family and start a business, in saying this we know there is work to be done.

Waitomo District Council is committed to increasing and promoting safety through reducing harm and injury. These are the settings we will be focussed on:

- Whanau / Family
- Hakinakina / Recreation
- Mahi / Workplace

The developed plan will be concentrated on improved outcomes for Māori populations, with the key identified demographic being young people and the issue being the reduction of injury and harm linked to alcohol.

It will require a collective journey and a mutual willingness to be actively participating in mapping services, resources and skill sets. It will call forward a brave change mentality to look at our challenges and short falls and understand the dynamics of inequities. On balance we will inevitably have new contracts and priorities introduced so we will be flexible without compromising our reasoning for taking this pathway, which is to increase safety through reducing harm and injury for those living within our Districts bounds.

We listened to the feedback our communities gave us during the Long Term Plan consultation and now the foundations are being laid to develop and set the plan to action. I am extremely proud to provide leadership to this journey for our people. Haeremai ra!

Noho ora mai

VIBRANT SAFE WAITOMO, A MESSAGE FROM IWI



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17 April 2019

Foreword:

The Maniapoto Māori Trust Board fully endorses national acknowledgement and recognition of the 'Vibrant Safe Waitomo Regional Coalition'. With Māori, and in particular rangatahi, consistently identified as 'most at risk' across all socio-development areas, it is imperative that Iwi governance organisations be involved in every effort to encourage more positive outcomes for the people they serve. The Trust Board looks forward to continued and effective participation and engagement in collaboration with all the stakeholders within the Waitomo District, to ensure a safer community that is thriving for all constituents.

Sonya H Hetet
Chief Executive
Maniapoto Māori Trust Board

COLLABORATIVE LEADERSHIP



**KI TE KAHORE
HE WHAKAKITENGA
KA NGARO TE IWI**

*WITHOUT FORESIGHT OR VISION THE
PEOPLE WILL BE LOST*

In recent times Waitomo District Council (WDC) has focused on place making, that is to say working to improve and enhance the core infrastructure that communities rely on to function each day.

WDC has been successful in this endeavour. Although the Waitomo District (the District) is geographically large and rugged with small rural communities it has secure water supplies, modern water treatment plants, good road accessibility across the District and some excellent community facilities. All of this work means that the infrastructure in place is capable of supporting a vibrant and thriving population. The work to continue infrastructure maintenance and upgrades is not over; these areas of work are scheduled and form part of the business as usual work plan.

WDC is now broadening its focus of work towards supporting a District that nurtures communities towards becoming thriving, positive and sustainable for the future. This outlook can be encapsulated as place shaping.

This is not a completely new area of work for WDC; in 2011 WDC worked with key stakeholders in support of the Social Sector Trials (SST). The Trials were implemented in partnership between the Ministries of Social Development (MSD), Justice, Health, Education and New Zealand Police ('partner agencies').

The SST were set up to test a new approach to improving social service delivery. The approach involved focussing on a set of desired social outcomes for a target group, reorganising funding and decision-making processes across the social sector, and shifting the control of service delivery to local levels. The SST was extended beyond the initial trial period for an extra two years and some positive outcomes were noted.

The experience and success of the SST gave WDC the knowledge that a targeted approach to improving the well-being of their communities could be achieved and a coordinated collaborative approach was a good model to effect change.

The Government recently announced a move to restate the promotion of social, economic, environmental and cultural well-being of communities to the statutory purpose of local government. This restores territorial authorities' power to collect contributions and distribute them to support these four pillars of well-being within the communities that they serve.

The Bill received Royal Assent on Monday 13 May, with Section 11A being repealed. WDC will already be working within the scope of promoting the four pillars of well-being within our communities.

THE JOURNEY BEGINS

In developing the LTP 2018-28 (LTP), WDC confirmed that its plans for enhancing its Community Development initiatives with the aim of shaping Waitomo into a place that is safe and welcoming. One initiative that was identified through this process was the establishment of an accredited safe community programme through Safe Communities Foundation NZ. Through the LTP process the enhancement of the Community Partnership Fund was explored. It was agreed that focus should be placed on forming partnership foundations for the implementation of the Safe Communities model.

WDC included a key project within the Community Development activity to facilitate and support the establishment of a Safe Communities model. That model is known as **Vibrant Safe Waitomo**.

OUR VISION FOR VSW:

"To Create safe and vibrant communities where people want to live and do business"

OUR MISSION FOR VSW :

"To initiate valued and meaningful partnerships with those that have a vested interest in our communities and increase positive outcomes for those that live and work within its bounds."

In February 2018 Council considered a paper on the Safe Community Waitomo model, and agreed to seek community feedback on its proposal to establish an accredited Safe Community programme, in the Consultation Document for the LTP. The Consultation document was made publicly available in print and online and copies were made available at key locations across the District.

The consultation for the LTP ran from 5th April to 4th May 2018. WDC held public meetings were held throughout the District, which were open to the public and provided an opportunity for people to discuss their views with the Elected Members.

A Public Hearing was held on the 15th May 2018 where two submitters elected to speak to Council about their proposal.

One of the submitters was Maniapoto Family Violence Intervention Network (MFVIN) and the other was the Waitomo District Youth Council (WDYC).

Both of these groups were positive about the proposal, with MFVIN proposing that WDC make community safety an even greater priority and allow for more funding to be allocated towards it. With the reasoning that this would allow for "meaningful and tangible outcomes to be achieved." MFVIN also requested the opportunity to collaborate with the WDC on the accredited Safe Community projects to further ensure their effectiveness and success.

WDYC also came out in support of the proposal and researched their proposal recommendations through a peer survey of 286 students across the three high schools within the District (for full survey see appendix Ii). The survey identified the top four areas of concern; gangs, drugs, alcohol and violence (all are crime related).

A total of 88 submissions were received on the consultation document, 72 of those submissions supported Council's proposal to pursue Safe Communities accreditation, which was included in the final LTP, and adopted by Council on the 26th June 2018.

WDC has now started its journey towards creating prosperous, safe communities.

Work began in earnest with the confirmation of the Community Development Coordinator leading the project. The application fee was forwarded to SCFNZ. From there a Community Engagement Advisor from SCFNZ was appointed to assist WDC with the development of the accreditation application and an ACC

Senior Injury Prevention Specialist was appointed to facilitate the accreditation process. In July 2018 the Community Development Coordinator attended the SCFNZ National Forum.

The Safe Communities accreditation process is recognised and accepted by the World Health Organisation as an effective and acceptable intervention to improve community safety.

Developing the foundations for this takes considerable commitment, energy and engagement from both the governing and operational sector of Council.

Funding has been made available to support the development and partnerships required to see VSW develop and mature.

SUSTAINABILITY

With the adoption of the LTP, WDC confirmed a commitment to sustain and grow Safe Waitomo for the next ten years.

The project name was amended to VSW to better reflect that commitment and the vision of WDC.

WDC via the Community Development Fund Policy seeks to facilitate and support strong and sustainable partnerships and to seek co-funding arrangements to support improved social outcomes in the community. This in turn supports VSW.



STRUCTURE

A founding structure was established to ensure the success of VSW.

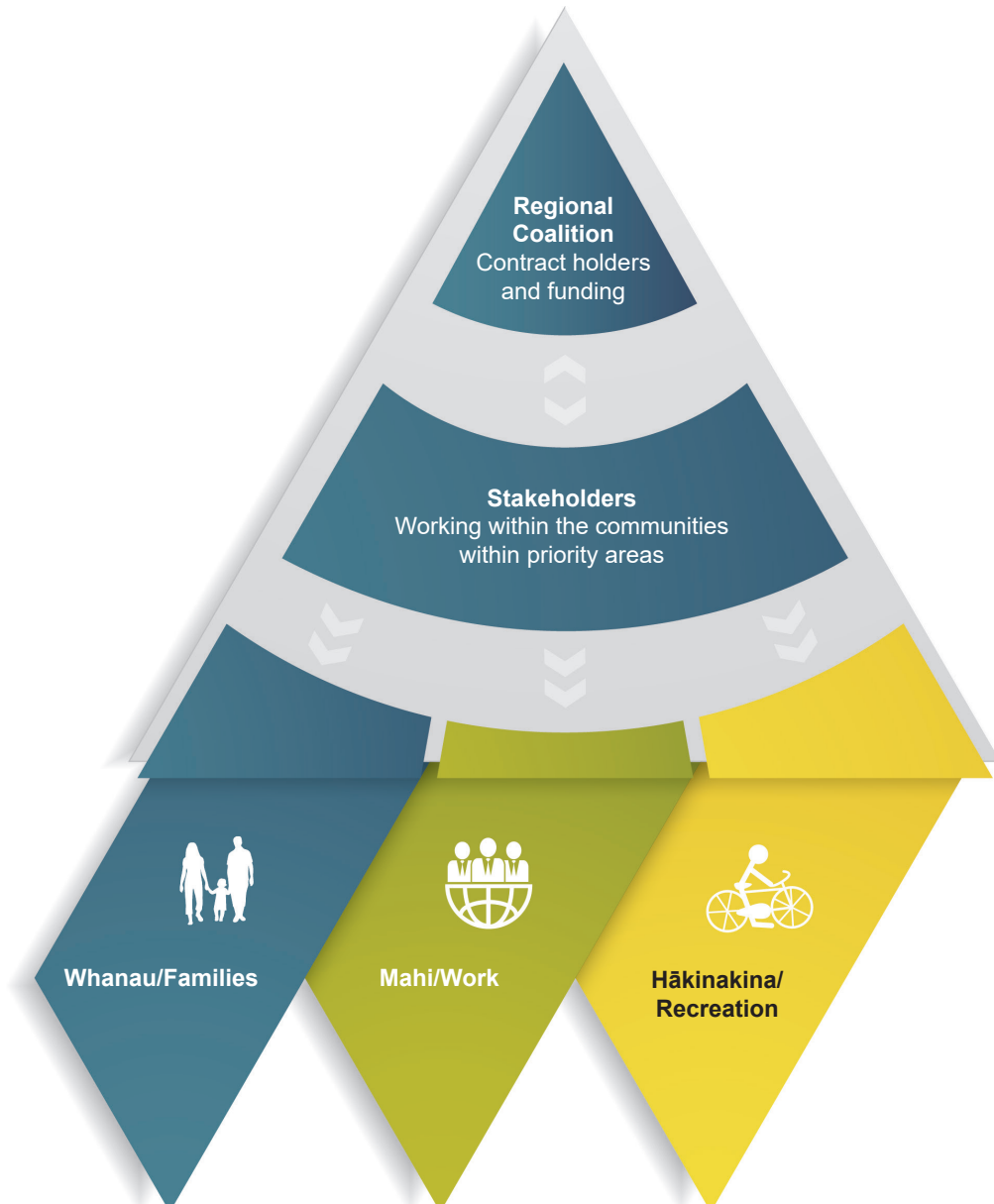
The collaborative leadership approach needed for VSW is reflected in all areas of participation.

The structure was created around three main objectives, as outlined in the diagram below:

1. Enablement
2. Understanding local strategies
3. Local intelligence



Collaborative Leadership



REGIONAL COALITION GROUP

The Regional Coalition's main purpose is enablement, providing influence and support at a governance level.

The group's collective knowledge, understanding and access to detailed statistical analysis of their sectors will be used to inform and determine appropriate projects, initiatives, and priority areas.

Through their participation obstacles for stakeholders and local contractors can be worked on and removed to enable successful delivery of programmes through Vibrant Safe Waitomo.

To ensure a full understanding of what Vibrant Safe Waitomo's mandate and scope is an overarching Terms of Reference was developed for the Regional Coalition (Appendix Iii).

The Regional Coalition group comprises of, but is not limited to:

- Maniapoto Māori Trust Board
- Waikato District Health Board
- Accident Compensation Corporation
- New Zealand Police
- Ministry of Education
- Fire and Emergency New Zealand
- Ministry of Social Development
- Oranga Tamariki Ministry for Children
- Health Promotion Agency
- Waikato Regional Council
- Integrated Safety Response
- Representative for MP for Taranaki – King Country
- Waitomo District Council



**NAU TE ROUROU,
NAKU TE ROUROU,
KA ORA TE IWI**

**WITH YOUR FOOD BASKET AND MY FOOD
BASKET, THE PEOPLE WILL BE FED**

MANIAPOTO MĀORI TRUST BOARD

The Maniapoto Māori Trust Board (MMTB) is a tribal organisation that aspires for a vibrant Maniapoto Iwi. It seeks a unified Maniapoto Iwi achieving cultural and social well-being, environmental sustainability and economic growth.

The MMTB's mission is connecting, enabling and facilitating opportunities for Maniapoto Iwi.

With over 41% of the District population identifying as Māori, it is important that the interests of Iwi specifically are represented within the Regional Coalition.

As Ngāti Maniapoto are the largest Iwi within the District it is appropriate that they are part of the Regional Coalition and are represented by their Chief Executive.

WAIKATO DISTRICT HEALTH BOARD INCLUDING PUBLIC HEALTH UNIT

Waikato District Health Board (DHB) is one of 20 District Health Boards in New Zealand. It serves a population of more than 390,000 and covers more than 21,000km.

There are 10 territorial authorities within the DHB boundary, one of which is Waitomo.

The DHB's mission is to enable all people to manage their health and well-being and to provide excellent care through smarter, innovative delivery.

The DHB receives funding from government to undertake its functions. About 60 per cent of funding received by Waikato DHB is used to directly provide hospital and health services. The remaining 40 per cent is used to fund contracted services provided by non-government organisations (NGOs), primary health care organisations (PHOs), Pharmacies and Laboratories.

As the largest provider of health services the DHB is well represented within the Regional Coalition through their Senior Planning Manager.

ACCIDENT COMPENSATION CORPORATION

The role of Accident Compensation Corporation (ACC) is to help prevent injuries and get New Zealanders and visitors back to everyday life if they have had an accident.

Everyone in New Zealand is covered by ACC's no-fault scheme if they are injured in an accident. The cover provided helps pay for the costs of recovery.

ACC's vision is to create a unique partnership with every New Zealander, improving their quality of life by minimising the incidence and impact of injury.

Having ACC within the Regional Coalition adds statistical and injury prevention knowledge. ACC is represented by a Senior Injury Prevention Specialist.

NEW ZEALAND POLICE

The New Zealand Police (NZ Police) work with the community to make New Zealanders be safe and feel safe. With over 12,000 staff, they provide policing services 24 hours a day, every day.

NZ Police are always actively working towards preventing crime and traffic accidents. Their mission is for New Zealand to be the safest country in the world. As part of that mission NZ Police aim to have the trust and confidence of all.

Part of the strategy to achieving this is to work in partnership with individuals, communities, businesses and other public sector agencies to achieve 'Safer Communities Together'.

NZ Police and District level crime and safety knowledge, statistics and prevention programme overview and is represented by the District Commander.

MINISTRY OF EDUCATION

The Ministry of Education (MoE) develops strategic policy for, and delivers services to, the education sector.

The MoE undertakes education research and analysis and monitors education sector capability and viability. The MoE also deliver policies, programmes and services focused on improving the community's knowledge of, and participation in, the education system. This involves working with parents, Iwi, Pasifika Advisors and community groups.

Education is an important part of any community and the availability and range of service providers available within the District provides greater options to the community.

With an overview of local statistics and service delivery in the District, the MoE is a valued member of the Coalition and is represented by the Lead Pathways Adviser.

FIRE AND EMERGENCY NEW ZEALAND

The information available around Fire and Emergency Services, and who is at risk, was not in a format that could be translated into the Course of Life Safety Matrix. The table attached in Appendix Ili (Fire and Emergency Data) represents the information received.

Amalgamated data from 1 January 2016 to 31 December 2018 for local Brigades working within the Waitomo District indicate the majority of callouts were for road traffic accidents. However, when reviewing the injury and accident data, the statistics do not correlate. A possible explanation could be vehicle occupants were not local residents, or medical treatment was not always required.

False alarms, medical assistance, and special services calls were also common reasons for callouts, as was the reason "not recorded". Out of just over 100 false alarm callouts, only two were malicious.

There were 38 structural fires across the time period involving homes and buildings. 10 of these fires were caused by unattended cooking which represents just over a quarter of total fires. Short circuit, earth fault, and other electrical failures accounted for another nine fires. Of the 38 structural fires, 30 occurred in Te Kuiti.

The Te Kuiti Fire Brigade is active within the community. During the time period, they attended 76 home fire safety visits. They were also the Brigade with the most callouts. As Te Kuiti is the highest populated centre in the District, and the Brigade also covers a wide rural area, this is not a surprising statistic.

Information that would be useful in the future would be clarification on the reason for home visits, for example, fire alarm installation, advice on fire safety in the home, escape route planning, etc.

MINISTRY OF SOCIAL DEVELOPMENT

The Ministry of Social Development (MSD) aim is to build successful individuals, and in turn strong, healthy families and communities.

MSD works toward this by providing support either financially, through service delivery within communities, and by working collaboratively with other government agencies, non-government organisations, advisory and industry groups, and communities and Iwi.

With extensive reach within our communities often to the most vulnerable, along with extensive research capabilities they are a valued member of the Regional Coalition and are represented through the Regional Commissioner.

ORANGA TAMARIKI-MINISTRY FOR CHILDREN AND YOUTH JUSTICE

Oranga Tamariki-Ministry for Children and Youth Justice (MCYJ) is dedicated to supporting any child in New Zealand whose well-being is at significant risk of harm now, or in the future. MCYJ also work with young people who may have offended, or are likely to offend.

The belief is that in the right environment, with the right people surrounding and nurturing them, any child can, and should flourish.

The MCYJ support children, family and whānau to restore their mana, sense of self, important connections and relationships, their right to heal, recover, and reach their potential.

MCYJ representation in the Regional Coalition is through the Youth Justice Regional Manager and the Partnering for Outcomes Regional Manager.

HEALTH PROMOTION AGENCY

The Health Promotion Agency (HPA) is an evidence-based health promotion organisation, influencing all sectors that contribute to health and well-being.

The HPA's key role is to lead and support health promotion initiatives to:

- Promote health and well-being and encourage healthy lifestyles
- Prevent disease, illness and injury
- Enable environments that support health, well-being and healthy lifestyles
- Reduce personal, social and economic harm

The HPA has been engaged and invited to participate.

WAIKATO REGIONAL COUNCIL

The Waikato Regional Council (WRC) is a local government body that works with communities, Iwi and industry to sustainably manage our natural resources. The region covers 25,000 square kilometres and stretches from the Bombay Hills in the north down to Mt Ruapehu in the south, and from Mokau on the west coast across to the Coromandel Peninsula in the east. The role of WRC is to help communities, industry and other groups in New Zealand's Waikato region to live and work while sustainably managing the natural resources.

The WRC have been engaged and invited to participate.

INTEGRATED SAFETY RESPONSE (IRS)

The Integrated Safety Response (IRS) is a multi-agency pilot that has been created to ensure the immediate safety of victims of violent harm, and to work with perpetrators to prevent further violence. The pilot is led by the NZ Police and is part of the broader Family Violence and Sexual Violence Work Programme.

ISR takes a whole-of-family/whānau approach that puts the risk and needs of family/whānau at the centre of what they do.

Key features include dedicated staff, funded specialist services for victims and perpetrators, and an intensive case management approach to collectively work with high risk families.

ISR have been engaged, and invited to participate.

REPRESENTATIVE FOR MP FOR TARANAKI – KING COUNTRY

Barbara Kuriger is the elected Member of Parliament for the Taranaki- King Country electorate.

As the Elected Member, Barbara represents our communities and their interests at the highest political level. Barbara is also our conduit to the upper levels of Parliament and decision making.

As such all input from Barbara and her staff into Vibrant Safe Waitomo is welcomed. She is represented within the Regional Coalition by the Out of Office, Parliamentary Community Engagement and Communication Advisor.

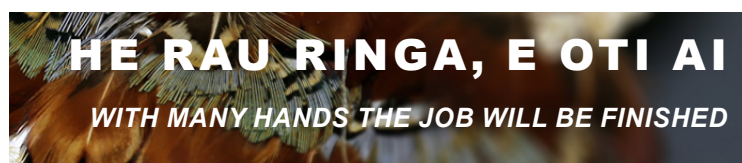
WAITOMO DISTRICT COUNCIL

The WDC provide leadership in relation to issues that affect the Waitomo District community, through the sustainable management of the environment and promotion of the District's needs and aspirations.

WDC's vision is *"Creating a better future with vibrant communities and thriving business"*. To achieve this vision WDC must promote a healthier, safer and more rewarding lifestyle across all of the diverse communities that make up our District.

As part of those goals and through the LTP, WDC is mandated to work towards and become an accredited Safe Community under the Safe Communities Foundation model and maintain that accreditation.

WDC will be represented within the Regional Coalition by the Mayor and Community Development Coordinator.



THE BRINGING TOGETHER

REGIONAL COALITION

The inaugural meeting of the Regional Coalition was held on the 3rd October 2018. A turnout of 13 individuals with a representation of 11 service providers were in attendance and all verbally committed to VSW. Members of the Regional Coalition were invited to offer feedback on the Terms of Reference (ToR) to ensure that members felt it was a true reflection of the role they would be performing.

Since the meeting, members of the Regional Coalition have signed and returned the ToR which signals their acceptance of the ToR and confirms their participation in VSW. It has been acknowledged that the tourism and civil defence sectors will be invited to join VSW in the future.

As part of the foundation work for VSW a snapshot of all the services the Regional Coalition agencies directly or indirectly delivered needed to be developed as a baseline to begin planning and progressing stakeholder engagement.

STAKEHOLDERS GROUP

The Stakeholders Group will be providing information regarding the local contracts held within the District and what is being achieved, with the focus on understanding local strategies. This will include anecdotal evidence. From this group it is envisioned that there will be some valuable insights into programme delivery in the District. This in turn will provide input into projects within VSW ambit.

The Stakeholders Group will be instrumental in assisting and securing local partnerships. It is considered that the Stakeholders Group will be able to provide sector knowledge as a whole and in particular, around strategies to support the positive implementation of VSW and advise on project progress.

VSW COORDINATOR

The overall vision holder, facilitator and communication channel for VSW will be met within the role of the WDC Community Development Coordinator.

Timeline for Vibrant Safe Waitomo

Through 2017	<ul style="list-style-type: none"> Strategic Consideration Workshops - Council exploration of Safe Communities Foundation NZ.
	<ul style="list-style-type: none"> Vision and Mission for Safe Waitomo established.
February 2018	<ul style="list-style-type: none"> Council include Safe Waitomo in the Consultation Document for the LTP.
5 April - 4 May 2018	<ul style="list-style-type: none"> Stakeholder engagement period for LTP 2018-28.
15 May 2018	<ul style="list-style-type: none"> Council hearing on LTP. Submitters include Maniapoto Violence Intervention Network on Safe Waitomo.
26 June 2018	<ul style="list-style-type: none"> LTP adopted by Council.
	<ul style="list-style-type: none"> Application fee to Safe Communities Foundation NZ submitted.
July 2018	<ul style="list-style-type: none"> Community Development Coordinator attended Safe Communities Foundation NZ National Forum.
21 August 2018	<ul style="list-style-type: none"> Work Plan for Safe Waitomo presented including name change from Safe Waitomo to Vibrant Safe Waitomo.
	<ul style="list-style-type: none"> Work Plan and name change accepted.
September 2018	<ul style="list-style-type: none"> Structure for VSW developed.
	<ul style="list-style-type: none"> Terms of Reference for the VSW Regional Coalition and Stakeholder Group developed.
	<ul style="list-style-type: none"> Prospective Regional Coalition members approached and invited to a meeting.
3 October 2018	<ul style="list-style-type: none"> Inaugural meeting VSW and the Regional Coalition.
29 November	<ul style="list-style-type: none"> Regional Safe Communities group meeting.
November onwards	<ul style="list-style-type: none"> Application for Accreditation commences construction.
7 February	<ul style="list-style-type: none"> VSW Regional Coalition meeting
	<ul style="list-style-type: none"> Terms of Reference For VSW accepted with amendments by Regional Coalition.

WAITOMO DISTRICT BACKGROUND

LOCATION

The Waitomo District (the District) is situated on the west of the Central North Island and encompasses 354,649 hectares of predominantly rural land.

The District's western boundary is the Tasman Sea. It is adjacent to the Otorohanga District to the north, Taupo District to the east and Ruapehu and New Plymouth Districts to the south.

While the District lies predominantly within Waikato Region, the south-eastern corner of the District is within the Manawatu-Wanganui (Horizons) Regional Council's jurisdiction.

Te Kūiti is the main trading centre in the District, with approximately 45% of the District's population residing in the town. There are several other smaller settlements located throughout the Waitomo District, including the popular beach settlements of Mokau, Awakino, Marokopa, Te Waitere and Taharoa. The main rural communities are Benneydale, Piopio and Waitomo Village.

The Waitomo District is also well placed in relation to other major centres and tourist attractions. Waitomo Caves is within the Waitomo District and Auckland is two and a half hours north.

The Taranaki Region and Rotorua are both two hours away, Hamilton is only an hour to the north and major North Island ski resorts are just one and a half hours south.



TERRAIN

The physical landscape across the District ranges from isolated west coast beaches to steep karst landscapes and caves, numerous native bush reserves, podocarp forests to productive rolling pastureland. The area is also shaped by the numerous streams and rivers which run above and below ground. The soil is rich and productive.

CLIMATE

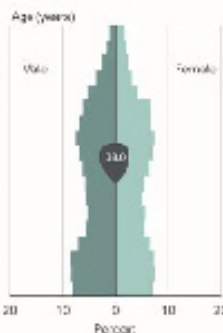
The District has a favourable climate with an annual average of 1,749 hours of sunshine. The average temperature ranges between 18.5°C in the summer to 9.5°C in the winter. Frosts are experienced 47 days per year on average, with 1,473mm of rainfall annually.

The District does occasionally experience some extreme weather. In the past five and a half years recorded major weather events include four storm category events, one ex-cyclone and one heavy rain and flooding event.

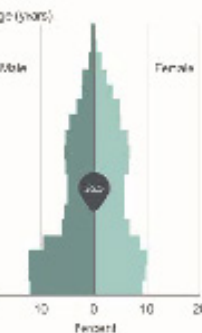
POPULATION

QuickStats about
Waitomo District

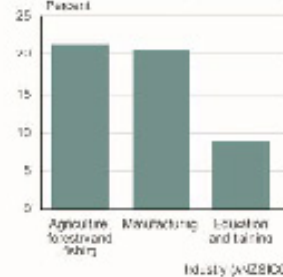
Age and sex of people
Waitomo District
2013 Census



Age and sex of Māori
Waitomo District
2013 Census



Top two industries in Waitomo District
by employee count
For year ended February



Median age (years)

How Waitomo District compares with the national average

Individuals

Major ethnic groups

European	65.0%	vs	74.0%
Māori	41.8%	vs	14.9%
Pacific peoples	4.3%	vs	7.4%
Asian	2.5%	vs	11.3%
Middle Eastern/Latin American/African	0.2%	vs	1.2%
Other	1.5%	vs	1.7%

Percent born overseas

9.3% vs 25.2%

Percent of people with a formal qualification*

66.1% vs 79.1%

Median income*

\$25,600 vs \$28,500

*For people aged 15 years and over.

Households

Percent of households that "live alone"

58.0% vs

Median weekly rent

\$160 vs

Percent of households with a family trust

50.0% vs

*For households with a family trust.

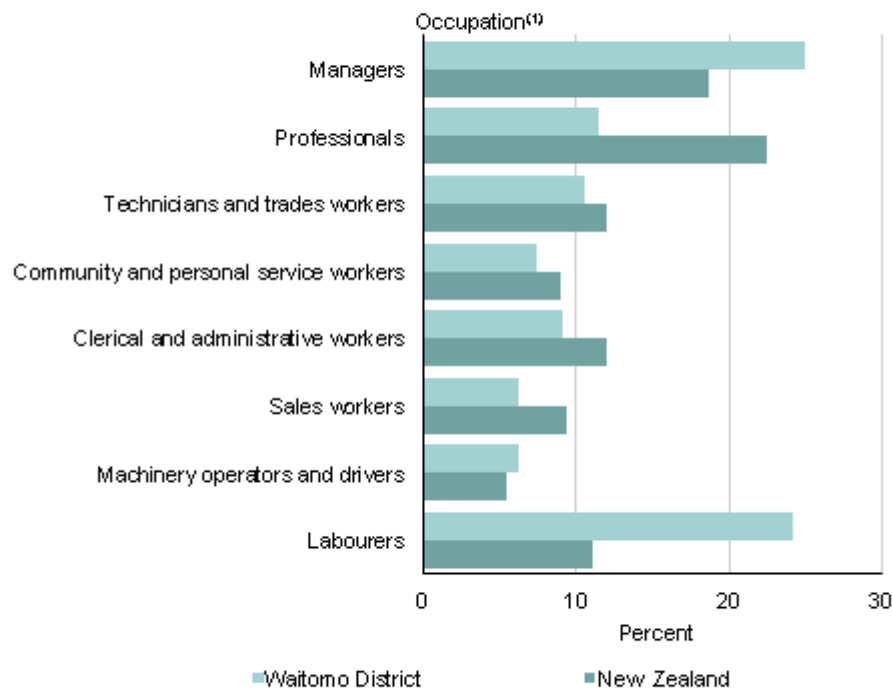
This data summary is based on the 2013 Census. It is not intended to be used for any other purpose. The data is for information only and is not intended to be used for any other purpose.

Source: Statistics New Zealand

Visit our website for more information

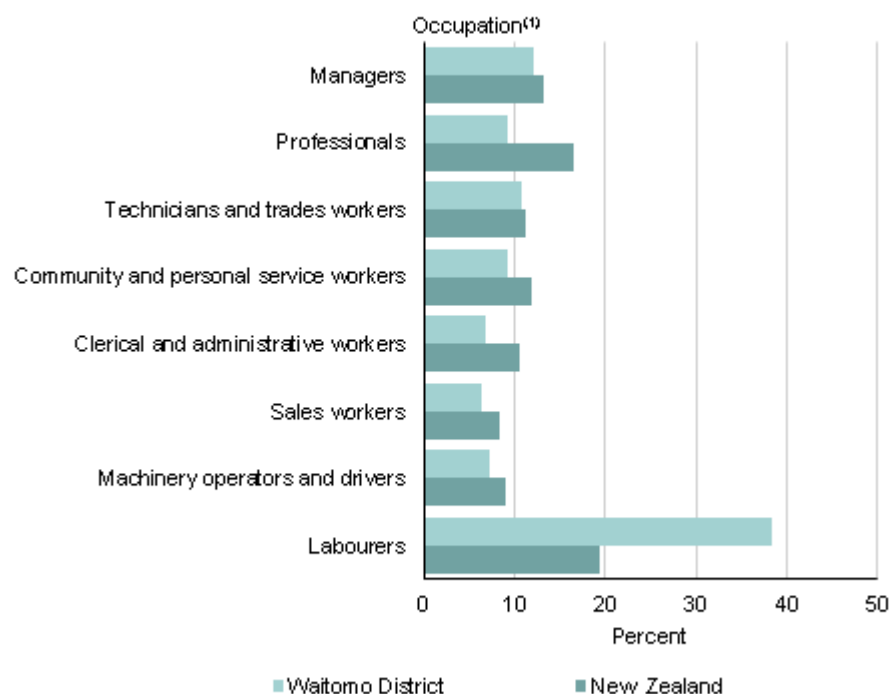
www.stats.govt.nz/2013Census

Occupation for employed people aged 15 years and over
Waitomo District and New Zealand
2013 Census



1. Australian and New Zealand Standard Classification of Occupations (ANZSCO V1.1)
Source: Statistics New Zealand

Occupation for employed Māori aged 15 years and over
Waitomo District and New Zealand
2013 Census



1. Australian and New Zealand Standard Classification of Occupations (ANZSCO V1.1).
Source: Statistics New Zealand

COMMENTARY ON POPULATION AND DEMOGRAPHY STATISTICS

It is worth noting the large geographical area in comparison to the number of residents within the District.

With 41.8% of people identifying as Māori, Te Kūiti has a greater percentage representation of Māori within the population than many other areas in New Zealand. The figure is almost four times the national average while the number of all other major ethnic groups living in the District sits below the national average. This helps to make the District unique, not just in physicality but in cultural make up.

As with many rural areas of New Zealand there is a downward trend in population growth overall.

The hour glass shape of the population graphs is suggestive of fewer people of working age than the older and younger age groups.

An aging population is a trend seen across New Zealand and in most OECD countries as improvements in education, nutrition and health care continue to increase life expectancy. The decrease in population between the ages of 20 to 50 indicates migration out of the District by people of tertiary education and working age.

The census data from 2013 outlines the unemployment rate for those over 15 years of age for the District was 6% compared to 7.1% for the whole of New Zealand.

The most common occupational group in the Waitomo District was Managers closely followed by Labourers which is not surprising given that the area has farming, forestry, meat works, sawmills and quarries, with their associated support industries as major employers in the area. By contrast professional and Managers are the most common occupations in NZ.

Looking at the employment statistics for Māori in the District, the unemployment rate of Māori aged 15 years and over is 11.8 percent, compared with 15.6 percent for New Zealand's Māori population.

Another notable difference is the most common occupational group for Māori is 'labourers', and 'labourers' is the most common occupational group for Māori in New Zealand. However in the Waitomo District, Māori percentage rates are lower for all other occupational rates compared to nationally.

The percentage rate for Māori categorised as labourer is substantially higher than the national rate.

INDUSTRY

The District has a wide cross section of small and medium- sized enterprises ('SMEs') and larger industry.

Sheep and beef farming is the largest agricultural industry and is supported by a local meat works industry, livestock transport and wool buyers. Dairy farming has grown as an industry in the District over the last 10 years.

Forestry and sawmilling remain a feature of the District industry landscape. There are two sawmills in Te Kūiti and commercial tree plantations throughout the District.

Due to the superior quality of limestone within the District, there are multiple quarries that mine the limestone for agricultural, industrial and medicinal purposes.

There is also a large iron sand mining operation based at Taharoa on the west coast that has been in production since 1972.

The District has a long history in tourism and hospitality, with the first tourist attraction in Waitomo Village opening to intrepid Victorians in 1889 and the first accommodation for tourists (now the Waitomo Hotel) opening in 1910.

Currently the District hosts over half a million tourists a year with the majority being overseas tourists rather than domestic.

Tourism has continued to develop in the Waitomo District, with an expanding range of experiences on offer to visitors throughout the District from mountain biking trails to movie set tours.

Tourism is supported in the area with some excellent hospitality businesses from a wide range of accommodation options to award winning restaurants and cafes.

Not all tourists will stay within the District, with many using the area as a day trip location on their itinerary.

For the year ending January 2019, tourism expenditure in the District was estimated to be just over \$74 million.

Nationally tourism expenditure for 2018 grew to \$39.1 billion according to the Tourism Satellite Account for 2018.

According to current tourism data (year ending January 2019) provided by MBIE, tourism spend in the District has continued to increase over the last five years. Anecdotally tourism attraction operators are recording ever growing numbers and shorter off season periods over the last five years. This has given rise to an interest in providing more accommodation and currently there is a feasibility study for a large, quality Hotel in the vicinity of Waitomo Caves.

EDUCATION

Within the District there are 13 Early Childhood Education Centres, eight of which are in or around Te Kūiti, three in Piopio, one in Aria and one in Taharoa. There are 14 primary schools across the District, two high schools (Te Kūiti and Piopio) and one composite school (Te Wharekura o Maniapoto) allowing children to start and finish their education through one learning centre with all lessons delivered in Te Reo Māori.

Career training opportunities and further education is provided for through Te Wananga o Aotearoa in Te Kūiti as well as apprenticeship and training programmes provided through workplaces and industry such as Industry Training Organisation (ITO).

Further vocational training is offered through Waikato Trades Academy. Tertiary education is further supported by a daily bus from Te Kūiti to Waikato University campus.

Youth is a key focus for WDC and there are opportunities for youth to develop and grow transferable skill sets through participation in sporting teams, clubs and organisations as well as a voice at Council level through the Waitomo District Youth Council. All of which aim to encourage aspirations and promote movement into leadership roles for the youth of the District.

RECREATION

The District has a wide range of organised team and individual sports on offer. These include rugby, hockey, cricket, golf, squash and mini ball.

Sport Waikato promote sport, health and fitness through support of team sports and groups and their own delivery of programmes.

In addition to organised sports the environment offers some less traditional sporting options from caving (wild/unguided), climbing, tramping and mountain biking, BMX biking, surfing and fishing.

There is also a range of alternative recreational pursuits available in the District. These include a Bridge club, Book clubs, Museum societies and a thriving Theatre society. Add to this the wealth of lifestyle groups such as line dancing, Scottish country dancing and Up and Active - there is something for everyone.

There are also opportunities for people to get involved in the community through local business groups and area development and conservation groups.

WAITOMO DISTRICT HISTORICAL BACKGROUND

THE PLACE

Although the Waitomo District lies within the Waikato Region it is widely described as part of the King Country.

The King Country gets its name from a period in the 1870's when the Māori King Tawhiao spent time in the area after being exiled from his homeland in the Waikato.

This area is also known as “Te Rohe Pōtae” which loosely translated means the area of the hat. The explanation behind the name refers to an incident that happened around the 1860's when King Tawhiao placed his hat on to a map to show where the boundaries would be, and claimed sovereignty over the area under the hat.

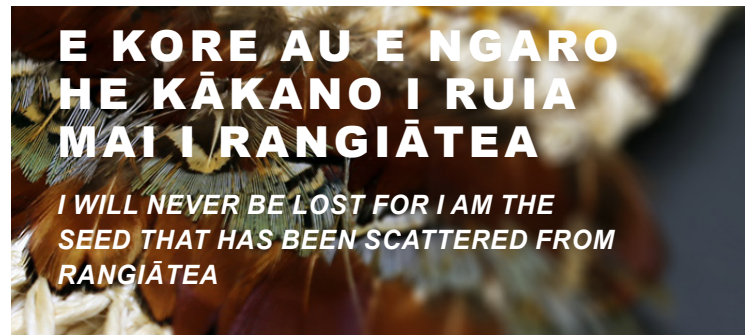
The placement of the hat would seem like a casual gesture, but in reality it was a well thought out move. The hat was placed to include some of the areas prized resources including Kawhia for Kaimoana and some key agricultural areas. It was also an area that could be defended well. King Tawhiao declared that boundary aukati – a boundary not to be crossed and a breach of that boundary would be considered an act of war.

It was this act of foresight that showed great guardianship of the land and the people.

THE PEOPLE

Māori were the first people to settle within the area, their history can be traced back to the Tainui Waka that brought the ancestors of Māori to New Zealand from Polynesia.

Ngatai Maniapoto is the main Iwi of the King Country. The Iwi are named after the ancestor Maniapoto descendent of Hoturoa who was the Captain of the Tainui Waka when it landed



at Mōkau and where some of the crew disembarked.

Maniapoto's great-grandfather Tūrongo was given land south of the Puniu River, which later became the Iwi's northern boundary. The Mōkau River formed the southern boundary. Maniapoto inherited mana over these lands on the death of his father Rereahu, Tūrongo's grandson.

The area had rich resources such as fertile land and access to seafood which Māori settlers took full advantage of. Early Māori were also known to trade internationally from ports and harbours.

THE CONFLICTS

The early 19th Century was a time of conflict that was precipitated by the arrival of Europeans and access to guns. Ngāti Maniapoto joined their traditional Waikato allies to fight battles in Waikato against Ngāti Toa and the invading Ngāpuhi, and against Ngāti Tama in Taranaki.

In 1820 thousands of Waikato and Ngāti Maniapoto warriors attacked Kāwhia. They defeated Ngāti Toa, led by Te Rauparaha, during a major battle near Lake Taharoa, south of Kāwhia Harbour. Waikato and Ngāti Maniapoto were not immune from attack. In 1822 Waikato and Ngāti Maniapoto forces were routed by musket-bearing Ngāpuhi in a battle near Pirongia.

In the late 1820s and early 1830s, now armed with muskets, Waikato and Ngāti Maniapoto raided Taranaki. These raids devastated the northern Taranaki communities and the people

joined Ngāti Toa in Kapiti. Their final raid occurred in 1837; by this time European traders and missionaries had arrived in the region.

The land of Ngāti Maniapoto was for the most part off limits to the early European settlers and the Government up until the early 1880s.

Although Europeans were not welcome up until then, Māori were not cut off from the outside world and trade was established with the northern town of Alexandra (Pirongia). Occasionally Government officials and envoys visited.

In the 1870's Native Minister John Sheehan worked on a settlement with Ngāti Maniapoto to lease their land to settlers rather than sell it.

Ngāti Maniapoto were interested in the idea of gaining economic advantage from their lands but not forfeiting their customary rights and interests in case any rival claimants challenged title through the Native Land Court. This agreement to lease land led to a small number of European settlers moving into the area from 1874¹.

Ngāti Maniapoto have a legacy of leadership and self-determination that saw them negotiate what should have been a fair process with the Government and Crown Entities of the time.

Sadly the experience was not a positive one for Ngāti Maniapoto, through legislative process and raupatu there were historical breaches.

Alcohol consumption proved to be a problem for many people within New Zealand during the late 1800's and early 1900's. This was a problem that affected Pakeha and Māori. In an effort to prevent the spread of harm that alcohol consumption was causing to King Country communities, Maniapoto Chief Wahanui Huatere presented a petition to Parliament to prohibit the sale of liquor in the King Country in 1884. Prohibition was only lifted in the King Country on 13th November 1954.

Another example of strong and positive

leadership within the King Country that focused on reducing harm and keeping people and communities well.

THE FUTURE

According to the 2013 census 35,358 people identified themselves as Ngāti Maniapoto, which made it the sixth-largest Iwi in New Zealand. The majority living outside the King Country.

The redress for breaches around land and customary rights are currently being negotiated through the Treaty Settlement process.

Positive progress has been made through the Maniapoto Māori Trust Board who were mandated to lead the negotiations following consultation with Ngāti Maniapoto Iwi.

Ngāti Maniapoto has signed an agreement in principle with the government to settle Treaty breaches. The historical treaty claims of Maniapoto me ona hapū maha took the settlement negotiations team eight months. It is a step in what is hoped to be a positive journey.

PRIORITY SETTING



COMMUNITY SAFETY VIEWED THROUGH DIFFERENT LENSES

To be able to set priorities for VSW a stocktake of what issues around safety or harm exist and for whom is required. It is possible to view safety in our community through a variety of lenses. It can be viewed with a settings based or an issue based perspective with age, gender and ethnicity also being part of the picture. Not all safety issues and settings will be relevant to all sectors of the community.

Establishing what is meant by the word safety for the purpose of VSW is also a key starting point.

For different people and different situations it will be a fluid notion. Safety can be a very physical thing for example wearing a seatbelt to decrease harm in the event of a car accident. This has a known benefit to a person's safety while on the road. It can also be perception or attitude based, for example feeling safe walking home by yourself late in the evening.

VSW's vision is "To Create safe and vibrant communities where people want to live and do business." Underlying this is the assumption that people will want to live in communities that are perceived as and feel safe.

It is implied that safety (real and perceived) would give residents freedom to enjoy their environments which in turn means people are comfortable to engage within their community, building relationships and therefore creating stronger more resilient communities.

Achieving the vision of creating a safe environment through community is the top priority for VSW. An important step to creating a safe community is consulting with a range of community group representatives on what makes them feel safe and unsafe.

Statistics will be able to inform decision making only to a point. For example if a female lived in a low crime area but through media was conscious that lone females are portrayed as more vulnerable she may feel unsafe walking alone in a relatively safe environment. What could make the difference could be better lighting and footpaths cleared of high/thick vegetation along the sides. These changes would make a difference to the environmental factors and go toward helping make someone feel safe but would have a smaller impact on the statistics surrounding the situation.

To illustrate this further, it has been noticed that many new fences of above shoulder height have been erected over recent times. It is interesting what people feel, think and assume when they see a high fence around a property suddenly erected.

Recently a tall fence went up on one property after there was known trouble with a neighbour.

Another fence went up around another property and the presumption was that again it was about keeping unwanted people out. In fact it turned out that the family had a new cat and lived on a busy road so built a high impenetrable fence to keep their kitten safe and had nothing to do with their own safety.

It is important to know that we as individuals will project our own experiences and knowledge on to an issue or situation to help us make sense of it.

People have their own experiences and perceptions which should be taken into account if our community members are going to support VSW into the future and the approach reflects what is wanted by the community.

SOURCES OF STATISTICS

It is now easier than ever before to gather information and datasets from a wide range of sources. Listed below are the agencies and government departments and other establishments data was collected from to inform this document. In the appendix web links and where possible copies of spreadsheets and graphs will be available.

- Statistics NZ
- Police Data service
- Fire and Emergency
- ACC
- Injury Prevention Research Unit (IPRU)
- Coronial Services, Ministry of Justice
- Ministry of Health
- Research Report: The New Zealand Drug Harm Index 2016
- Alcohol.org.nz
- Healthspace.ac.nz
- A framework of outcomes for young people - Bethia McNeil, Neil Reeder and Julia Rich
- Waitomo Social Sector Trials- Youth Action Plan 2014/15

HANDLING THE DATA

To gain a comprehensive overview it has proved necessary to look at issues and settings across age, gender and ethnicity where possible. By cross referencing the information and putting it in to a simple summary form it has been possible to identify what issues effect most people and when in their lives. By identifying who, where and when people are most at risk a strong preventative approach can be created. It will also aid in identifying who the most vulnerable are in our community.

Where data sets for the Waitomo District exist they have been used. If District data is unavailable or incomplete then the data set has been expanded to use the next level up which is regional data for Waikato and finally national data if nothing else has been found.

When figures from various sources are viewed it is important to give them context for that particular area. If an ethnicity appears to be over represented in a particular injury setting it is important to then view which ethnicities are employed within that industry predominantly to assist in making well informed conclusions.

For example if there is a particular ethnicity over represented in accidents in a particular work place it could be due to that ethnicity being employed in greater numbers than other ethnicities in that industry.

The Course of Life Safety Matrix is a simplified way of viewing a wide range of information that has been cross referenced wherever possible to give context. This will enable quick and easy identification of which age groups of people within our communities are most vulnerable to different types of harm and where they are at most risk. Using age and gender demographics where possible will aid in establishing the most vulnerable groups within priority areas.

When looking at the data it is possible to split it out into the setting, the outcome and the issue.

Setting- where the harm or incident takes place

The Outcome - the end result of the harm incident – injury (physical and mental), failure to thrive, death

The Issue -underlying issues that may be contributing factors to the incidence of harm

To look at any one of these factors alone would only give part of the picture and could lead to an approach that is well meaning but through lack of rounded vision fixes one issue but causes other issues that have different negative outcomes.

Ongoing feedback and anecdotal evidence from service providers currently working within the community will assist us in ensuring that correct priorities are set and the chance of unintended harm will be decreased.

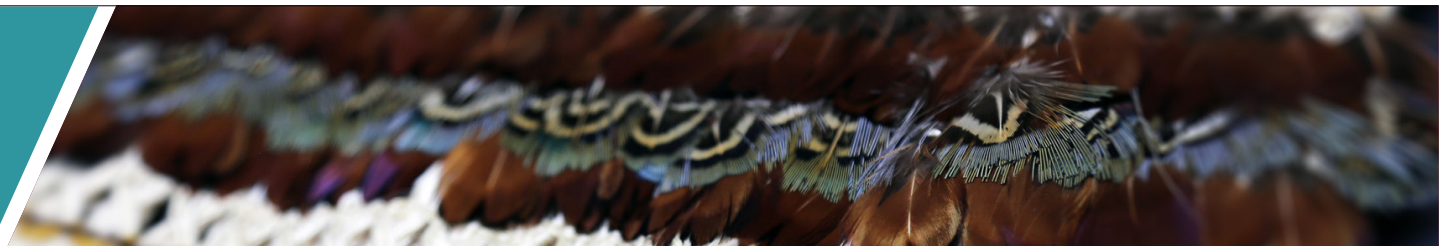
During the research phase a wide range of settings, outcomes and issue based statistics and reports were viewed, analysed and cross referenced with national and local demographic data from the 2013 Census supplied through Statistics New Zealand website. This information is the most recent available and is now over five years old. Since 2013 there has been some movement in the demographics.

AREAS OF RESEARCH

- Crime
- Reported accidents
- Injury data
- Injury fatality data
- Suicide data
- Fire and Emergency
- Obesity
- Drug and Alcohol related Harm
- Youth outcomes



Course of Life Safety Matrix - General



Age		00-04 years	05-09 years	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-79 years	80-84 years	85+ years
Issue/setting																			
Falls		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Cut /pierce		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Struckby/against		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
MVT	Occupant	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Adverse effects	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Diagnosis	Dislocation	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Fracture	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Open wound	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Superficial contusion	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Non-fatal injury occurrence 2012-2016 by hospital discharge		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Non-fatal injury occurrence 2017 by hospital discharge		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Fatal injury occurrence 2015		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Injury as leading cause of hospitalisation - Nationally		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Injury as leading cause of death - Nationally		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Industrial place		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
School		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Road or street		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Other		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Commercial/service location		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Farm		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Place of recreation		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Home		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Accident frequency within age group		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Family harm victimisations Waikato		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Victimisations Waikato		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Offender proceedings Waikato		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Suicide rate (2017-18) national		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Obesity - national 2017/18		▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Hazardous drinking - national 2017/18					▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Smoking rates in adults - national 15+ 2017/18					▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Cannabis use in adults 15+ 2016/17					▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Amphetamine use in adults 15+ 2016/17					▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲

Key for Life Course Matrix General/ ethnicity/gender

- ▲

 - Of low concern
 - Representation below or at representation level for that population/age group

▲

 - Of moderate concern
 - Increased above baseline
 - Slightly over represented for population/age group
- ▲

 - Of high concern
 - Peak in numbers
 - Over representation for that population/age group

▲

 - Of Extreme concern
 - Significant peak well above all other numbers

- Data from Injury Prevention Research Unit

Data from ACC used using Waitomo district data

Data from Health survey national figures

Data from NZ Police

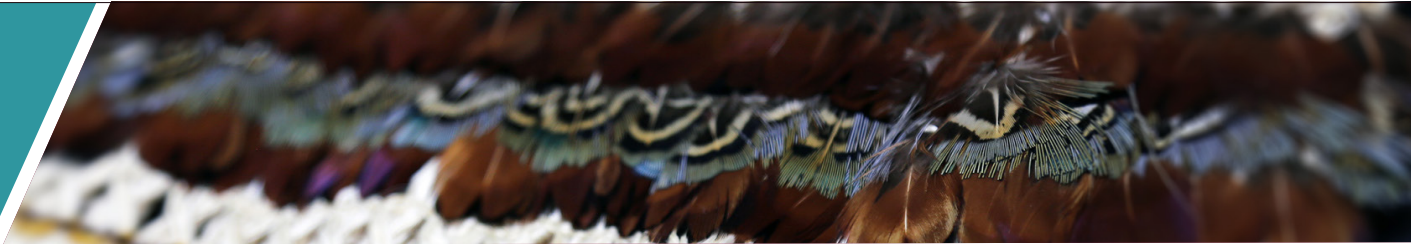
- Data Coronial services Ministry of Justice

No pattern denotes figures used are for Waitomo District

Denotes national figures used

Denotes Waikato region or District figures used

Course of Life Safety Matrix - Gender



Age	Gender	00-04 years	05-09 years	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-79 years	80-84 years	85+ years
Victimisations																			
Asian	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
European	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Maori	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Pacific Island	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Offenders																			
Asian	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
European	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Maori	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Pacific Island	Overview	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Non-fatal injury occurrence 2012-16 by hospital discharge	Male 281	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female 181	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Non-fatal injury occurrence 2017 by hospital discharge	Male 95																		
	Female 52																		
	Undisclosed 1																		
Injury as leading cause of death 2015	Male 3																		
	Female 3																		
Suicide rates June 2017 - July 2018 national	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Suicide rates June 2017 - July 2018 Maori national	Male	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
	Female	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲

Key for Life Course Matrix General/ ethnicity/gender

- ▲ Of low concern

▲ Representation below or at representation level for that population/age group

▲ Of moderate concern

▲ Increased above baseline

▲ Slightly over represented for population/age group
- ▲ Of high concern

▲ Peak in numbers

▲ Over representation for that population/age group

▲ Of Extreme concern

▲ Significant peak well above all other numbers

- Data from Injury prevention research unit

■ Data from ACC used using Waitomo district data

■ Data from Health survey national figures

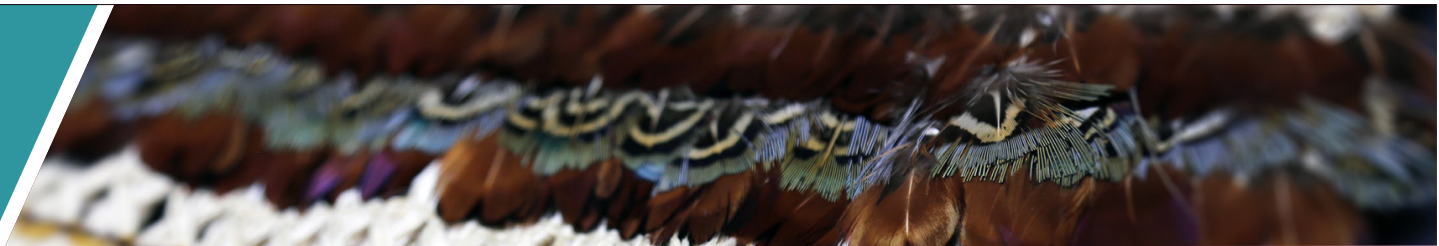
■ Data from NZ Police
- Data Coronial services Ministry of Justice

No pattern denotes figures used are for Waitomo District

■ Denotes national figures used

■ Denotes Waikato region or District figures used

Course of Life Safety Matrix - Ethnicity



Age	00-04 years	05-09 years	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years	50-54 years	55-59 years	60-64 years	65-69 years	70-74 years	75-79 years	80-84 years	85+ years
Proportional representation comparing number of accidents for each ethnicity by age group using Waitomo District statistics																		
Asian	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
European	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Maori	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Middle Eastern/Latin American/African	Sample size too small with population for accuracy																	
Other Ethnicity	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Pacific Peoples	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Residual Categories	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Accident rate within age group total	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Suicide rates by ethnicity across age																		
Maori	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲

Suicide rates by ethnicity	
Asian	▲
European	▲
Maori	▲
Pacific	▲

Non-fatal injury occurrence 2017 by hospital discharge	
Asian	▲
European	▲
Maori	▲
Other Ethnicity	▲
Middle Eastern/Latin American/African	▲
Pacific Peoples	▲
Residual Categories	▲

Accident location by Ethnicity										
	Commercial/ service	Farm	Home	Industrial	Not obtain	Other	Place of medical treatment	Place of recreation	Road or street	School
Asian	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
European	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Maori	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Middle Eastern/Latin American/African	Sample size too small with population for accuracy									
Other Ethnicity	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Pacific Peoples	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
Residual Categories	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲

Key for Life Course Matrix General/ ethnicity/gender

- ▲

 - Of low concern
 - Representation below or at representation level for that population/age group
- ▲

 - Of moderate concern
 - Increased above baseline
 - Slightly over represented for population/age group
- ▲

 - Of high concern
 - Peak in numbers
 - Over representation for that population/age group
- ▲

 - Of Extreme concern
 - Significant peak well above all other numbers

- Data from Injury prevention research unit
- Data from ACC used using Waitomo district data
- Data from Health survey national figures
- Data from NZ Police
- Data Coronial services Ministry of Justice
- No pattern denotes figures used are for Waitomo District
- Denotes national figures used
- Denotes Waikato region or District figures used

INJURY RATES AND OCCURRENCES

For further information on where the statistics came from and how the data was analysed please refer to appendix II i.

Although Waitomo's average rate/100,000 for non-fatal injuries sits above the national rate for 2017 (and for years 2012-2016), the numbers involved are small so it was necessary to use amalgamated years to be able to see trends. This included looking at injury numbers for each age group.

Non-fatal injury occurrence 2012-2016 were plotted on the matrix after calculating the number of injuries at a rate of occurrence for that age group in the Waitomo population. 0 - 0.03 green, 0.04- 0.05 orange 0.06 and above red. The young (under 40) and the elderly members of the community showed the highest occurrence of injury.

The top injury cause for each age group was plotted in red on the matrix (where more than one top value, then more than one cause was coded red). The next four top causes were plotted in orange as long as the value was above one, everything else was coded green for each age group.

From the matrix it is clear that the leading cause for non-fatal injury discharged from hospital is falls. It is the top cause for most age groups and within the top four for all other age groups.

It also appears that consistently it is the very youngest (under 10's) and the elderly (75 and above) members of the population that are most prone to falls. This could be that these are the areas of life where bodies go through the most change and mobility can be difficult.

Other causes of injury that have some prevalence are

- Being struck by/ against,
- Cut/pierce,
- Adverse medical treatment,
- Occupant of motor vehicle and other land transport

None of the above feature to a similar degree as falls.

Fractures are the most common injury type in almost all age groups. Open wounds, dislocations and other specified injuries were also common.

It has been cited in a 2014 document contributed by the Health Quality & Safety Commission called "Responding to the challenge of falls in older people" that hip fracture can be life-changing for older people. Between 10 – 20% of older people will be admitted to residential care as a result of hip fracture; 27% will die within a year, and, of those people, almost two-thirds would not have died had they not fractured their hip.

As seen on the Course of Life Safety Matrix, Injury is a leading cause for hospitalisation and death for most under the age of 45.

Males are more likely to be injured than females when we look at the gender split numbers from 2017 and the amalgamated figures of 2012-2016 appendix II i – Injury Data

INJURY SETTING

Using ACC claim figures it can be seen clearly from the matrix that for all age groups in Waitomo District the home is the place where most people in most age groups are getting injured, followed by injuries associated with recreation. These are not unusual findings and are repeated in the national ACC statistics.

Waitomo District claims are overall under the national rate per 100,000 of population.

What is different is the third largest area where members of the community are claiming for injuries, which is on farms. Statistically Waitomo District claims for this area are tracking above the national figures per 100,000 of population.

This is not unexpected as according to the 2013 Census agriculture, forestry and fishing is the largest industry in the area.

Accidents are likely to be proportional to the work force employed or involved in the industry.

The Life Course Safety Matrix shows that those most at risk of having a farm based accidents are between the ages of 20-74 with Europeans as the ethnic group claiming most often. This is most of a working life for a farm manager/ worker. Further information that would be useful in the future would be type of farm accident for example machinery, vehicle (including ATVs) or livestock related accidents.

The commercial and industrial setting claims are from working age people. The highest incidence of claims are from people between the ages of 20-44 and 20-30 respectively. These are most likely to be work place injuries as that is the biggest reason most people will be in these settings. Add that to farm based injury claims and it is possible to see that work place claims are a large area of concern.

To look into a little more detail around ethnicities, claims in the commercial and industrial setting are predominately made by Māori and Pacific peoples. If we then cross reference this to the census data regarding working population, the majority of the Māori workforce is employed as labourers and within commercial/ service industry.

School is where children five to 18 spend around 25% of their time so it would fit that this setting has a high incidence of accident claims for this age group and doesn't feature for other age groups. The time children spend at school is all active time as opposed to sleeping/resting time.

Childhood and teen age years are the most important years of learning and development. It is when minds and bodies go through the most change.

Schools in general encourage active time around structured lesson time. School is a place where children are learning new skills in the social and educational spheres and testing them out including skills in cooking, sports, chemistry and just being a person. A learning environment

means not all the outcomes will be positive. Allowing for failure within a learning environment is necessary to help build risk management skills and resilience. Managing the risks to avoid permanent harm is key.

Injury claims for road related accident claims are concentrated in a small age range, that of 15-30 year olds with the peak being for 20-24 year olds. This would reflect the age when individuals are learning and then growing their skills as a driver and experiencing a new level of independence. It is the time of life when they are more likely to be driving either alone or with peers rather than family members. All of these are factors to driving competence.

Overall it is clear that there are three settings where most accident claims arise, the home, work/ school and the recreational/sporting environments. These are the areas where we spend the majority of our lives, these are the places where we are nurtured, grow up, grow in skill and confidence and mature.

If there was one age group that has high incidence of claims across most settings it is the 20-24 year olds. Broadening out the view from there we see that 20-35 year olds are another notably large claim group.

CRIME

Using publically available data it was possible to find figures for the Waikato policing District which encompasses the Waitomo District for three categories, proceedings (offender demographics), victimisation demographics and family harm incidence. It was not possible to drill down beyond basic data for the Waikato policing District. The information that was available for the Waikato Region can be found in appendix II i - Crime.

For the Waikato Region and the Waikato District the ethnicity split between Māori and European was similar with Europeans making up just over 70% of the population and Māori just over 20% of the population. This differs from the national

make up of 70 % European and only 14% identifying as Māori. Even with this difference when Waikato crime data is compared to national data it follows national trends.

As seen on the matrix most crimes in the Waikato policing District are committed against people between the ages of 15 and 50.

Victimisations start to rise from the age of 10 and from 15 that rise is sharp, peaking in the age group 20-24. Victimisations start to fall after peaking but remains high until 45 years of age and does not fall away substantially until 55 years of age plus.

The only gender and ethnicity information available for the Waikato policing District (see appendix II i - Crime) shows that across it as a whole male and female victims are of a similar percentage proportion with male victimisations 42.8% and female 43.7%. Europeans are underrepresented in overall victimisation profile for the area and Māori are representatively proportional. Other ethnicities were not heavily over or under represented. With the balance of victimisations made up of "ethnicity not stated".

Gender and ethnicity split of victimisation within each age group is only available at a national level.

Family harm victimisations figures supplied for the Waikato Policing District show when the offender was a family member this included boyfriends, girlfriends and partners. Significant increases in family harm victimisation starts earlier in life but still peaks at 20-24 years of age. What is also of note was that females make up 72% of the victimisations and Māori were heavily over represented making up 52% of all victimisations in this category. The data could not be drilled down any further to gain better insight into gender and ethnicity representation across age groups.

Offender proceedings follow a similar pattern as the victimisations and have the same peak age range of 20-24 years of age. Most crimes are committed by those under 40 years of age. What was a notable difference was that

the majority of offenders were male (75.9%) and Māori were heavily over represented as offenders making up 48%.

On the Police data website it is also possible to see figures that indicate that nationally the top seven areas of offending are (in order)

- Traffic and vehicle regulatory offences,
- Acts intended to cause injury,
- Theft and related offences,
- Public order offences,
- Offences against justice procedure government sector and government operations,
- Dangerous or negligent acts endangering persons
- Illicit drug offences.

For the Waikato Police District the same top six offences in the same order are noticed over the last four years. This is another indicator that Waikato follows national trends.

It was not possible to drill down any further using Waikato Police District statistics. As Waikato crime trends reflect major trends nationally it is likely that the major trends for the Waikato Region reflect Waitomo trends in a similar way.

Waitomo District demographics are slightly different to Waikato's and national figures, with much higher Māori representation (41.8%) and lower European representation (65%). It would therefore be helpful in future to be able to analyse data for the Waitomo District that could show nuances and trends that reflect any differences to the wider regional and national demographic.

The only way to view victimisations and offender proceedings through either an ethnicity or gender filter was to view national data. The following information is an overview of national victimisations and offender proceedings through ethnicity and gender lenses.

The figures show most crimes are committed against people between the ages of 15 and 40 across all ethnicities.

It is possible to see that victims identifying as Māori are over represented as a whole. Māori are heavily over represented in victims of crime in the youngest age groups 0-14. Māori males in the 15 to 39 age group as a percentage are over represented for population size but not to the same degree as for the early years.

Māori female victims however are heavily over represented in every age group from 0-44 years of age.

Māori males are heavily over represented in the offender demographics from 10-70 years of age especially in the 10- 44 age bracket.

The age group of Māori males with the highest over representation was for 10-14 year olds accounting for 68% of offender proceedings.

Although the number of female offenders is overall fewer than male Māori offenders for each age group they are often over represented as an ethnicity to a great degree than the Māori male offenders. Especially through the 0-40 age groups. After this the over representation of Māori males and females is similar.

Europeans are roughly under proportional representation throughout the main years of victimisations 15-40 even though these are the year's most victimisations occur. This changes after the ages of 50 and proportional representation grows for Europeans. This could be due to the fact that Europeans are more likely to have better health outcomes and are likely to live longer and demographically there are a greater number of older Europeans than any other ethnicity in NZ. Although the percentage of victimisation grows in the European population as it ages it is important to remember that the number of crimes committed against people overall decreases from the age of 35.

Pacific people's statistics follow a remarkably similar pattern to the Māori victims, including over representation as victims in the earliest years. For both male and female there is an increase in victimisation between the ages 10 to 40 with more female victims than male through these age ranges. The main difference is that

Pacific males are only slightly over represented in the offender proceedings demographic for the ages of 15-45 with the peak at 20-25 years of age.

Although these figures are derived from the national police data we have seen before that Waikato crime statistics follow national trends and there is a good possibility that Waitomo District will follow similar trends in the absence of better data.

In summary the majority of victimisations happen to persons aged between 15-45 with the peak being for those aged 20-24. Female Māori are the most at risk of victimisations overall. Females in general and Māori females specifically are most at risk of family harm victimisations.

The majority of offending occurs in persons aged 15-40 with the peak firmly sitting at the 20-24 age bracket. Males are more likely to offend overall. Māori are heavily over represented in the offending demographics between the ages of 15-39 years. This drops for Māori over 40 years.

This could be due to poorer Māori health outcomes and shorter life expectancy being a factor.

Youth are the most at risk of being victims and perpetrators of crime especially for those in their early 20's.

Local anecdotal evidence bears out the main themes of the research data. Each week in the local paper there is a section that documents the police call outs. These are mostly made up of thefts and traffic/driving infringements, most notably alcohol related. The ages of offenders when given are generally below 30 years of age.

Each week there is also a tally of the number of family harm incidence that the Police are called to, the figure varies but there are always some. This connects with Maniapoto Family Violence Intervention Network (MFVIN) concerns raised via the submission process around WDC's LTP 2018-28.

The Waitomo District Youth Council survey of secondary school pupils also identified that the areas that they felt were of the most concern to them were gangs, drugs, alcohol and violence.

All four of these areas are crime related. It is also notable that this comes from the youth sector and this is what they feel most concerns them and the research shows that youth are most likely to be the victims and the perpetrators of criminal acts.

Police in the area have a Māori Action Plan which would indicate that they believe that Māori are over represented in crime statistics and have a targeted approach to work towards change.

SUICIDE

Suicide is on the increase nationally. The most recent figures from the Coroner's Office from 2017 to July 2018 are the highest for 10 years, with a year on year increase over the last 4 years. Age groups most at risk are youth 15-29 and those aged 45-64. To give some extra context New Zealand has the highest teenage suicide rate in the OECD per 100,000 of population.

Looking at suicide figures by ethnicity the number of Māori suicides for June 2017 to July 2018 is 142. As a percentage that would be 21.25% of all suicides. The course of Life Safety Matrix shows that Māori have the highest rate of suicide per 100,000 of population. Given that nationally Māori make up 14 % of the population Māori are heavily over represented.

The gender split within suicide rates show male suicides far outweigh female suicides. Viewing a gender split specifically for Māori suicides, males between 15 and 44 are most at risk with the 20-24 age group showing the highest rate of suicide. For Māori females suicide rates overall are much lower than for Māori males. For Māori females the highest rate of suicide is displayed in the 15-29 year old age range.

This is a rural community and there have been studies and instances in the past to suggest farmers are more susceptible to suicide.

Provisional data from the Ministry of Justice released under the Official Information Act and quoted in a media article dated October 2018 reveals 20 farmers took their own lives in the year ending 30 June 2018.

Eighteen of these deaths were male and five were in the Waikato, the highest of any region, and six were aged 15-24.

Figures showing suicide numbers from the Coroner's Office place Waikato District Health Board as the fifth highest DHB for suicides overall behind Canterbury, Auckland, Southern and Waitemata DHBs.

In short the matrix shows that suicide is most likely in males especially around 45-49. Māori as a group are over represented and young Māori males aged 20-24 are heavily over represented.

Farmers are also a vulnerable group for suicides for this area.

OBESITY

A healthy body size is important for good health and well-being.

Using public health survey 2018 figures for the nation it is possible that obesity has a hold in every age group. It is important to note that in the survey results the first age category was two to four not zero to four as the matrix age band would suggest. There were no age groups that had less than 10% obesity rate.

The lowest rates were seen in two to 19 year olds where obesity rates sat between 10% and 20% of the population in each age group.

From 20 to 75+ years of age over 20% of the population in those age groups were classed as obese. The report on the survey sites that one in eight children (two to 14 years old) and one in three adults is obese, this would suggest that no matter where you are in the country obesity will be a factor in the community.

The survey report also outlined ethnicity as a factor in obesity with Pacific children 3.1 times

as likely as non-Pacific children to be obese and Māori children 1.6 times as likely to be obese than non-Māori children after adjusting for age and sex differences. It was also noted that 19% of children living in the most socioeconomically deprived areas were obese, compared with 6.9% living in the least deprived areas.

When it came to adults (aged 15 upwards), after adjusting for age and gender differences, Pacific and Māori adults were 2.3 and 1.6 times as likely to be obese as non-Pacific and non-Māori adults respectively. After adjusting for age, gender and ethnic differences, adults living in the most deprived areas were 1.6 times as likely to be obese as adults living in the least deprived areas.

Obesity is an issue that has far reaching consequences. Overweight and obese children are more likely to be obese when they are adults. In addition, they are more likely to have abnormal cholesterol and blood pressure levels at a younger age than children who are within a normal weight range. Being overweight or obese in childhood is also associated with social and mental health problems, including low self-esteem. This could lead to a failure to reach their potential and thrive.

For adults obesity and excess weight has been linked to a number of serious health conditions including type 2 diabetes, cardiovascular diseases, many types of cancer (e.g., colorectal, post-menopausal breast, kidney and endometrial), osteoarthritis, gout, sleep apnoea, some reproductive disorders and gallstones. This does not take into account any mental health and well-being issues that being obese may bring on for some.

According to the socioeconomic indicators from the 2013 Census the areas within the Waitomo District range from decile 6 to decile 10 (the most deprived). The Waitomo District population is made up of 41.8% who identify as Māori. With these figures in mind and the increased prevalence of obesity in Māori and low socioeconomic areas this is an issue that is likely to have a significant health and well-being impact on many adults and children in the area.

Potentially this would also put pressure on local health care and support services.

Obesity has been identified as an issue in this area by the Waikato DHB and lifestyle programmes are in place to assist people in their journey to a healthier lifestyle. These programmes are well subscribed and are making a positive difference.

ALCOHOL HARM

There is a lot of easily available statistics around alcohol and drug harm at a national level but very little at a local level. To gain the best picture possible firstly an analysis of national trends has been viewed and then we will add local anecdotal evidence around this topic to see if the Waitomo District follows national trends.

The information in the Course of Life Safety Matrix is at a national level and has been derived from the yearly New Zealand Health Surveys for the years 2016/17 and 2017/18.

The New Zealand Health Survey 2017/18 showed that 78.7% of all adults (aged 15 upwards) have had at least one drink containing alcohol in the previous 12 months. For those 15-17 the rate was just over 50% and for those 18-74 and over the rate was over 70% and for those 75+ years old the rate was between 60% and 70%.

If we then study the hazardous drinking level in the Course of Life Safety Matrix what is clear is that not everyone who drinks is doing so in a hazardous way. The biggest proportion of hazardous drinkers is around the start of the legal drinking age with over 30% of 17-24 years old hazardously drinking. There is small decline after age 25 but the rate of hazardous drinking for those aged 25-54 is still above 20% prevalence through to 55 years of age.

The pattern suggests that early formed drinking habits for some become lifelong. There is a decline in the hazardous drinking rate in ages 55-74. After age 75 the hazardous drinking level drops again to below 10% of the age group.

According to the survey there is a difference in hazardous drinking between genders with men (27%) at least twice as likely as women (13%) to be hazardous drinkers.

Ethnicity is a factor to be considered as the survey showed 32% percent of Māori adults were hazardous drinkers in 2017/2018. Māori adults were 1.6 times as likely as non-Māori adults to be hazardous drinkers. In contrast, 6.5% of Asian adults were hazardous drinkers.

Asian adults were less likely than non-Asian adults to be hazardous drinkers.

Deprivation was also a factor, despite there being more non-drinkers in the most socioeconomically deprived areas adults in the most deprived areas were 1.3 times as likely to be hazardous drinkers as adults in the least deprived areas, after adjusting for age, gender and ethnic differences.

Alcohol effects many aspects of community and society as a whole. Alcohol consumption is indicated in 60 different disorders according to the World Health Organisation (WHO) including seven different types of cancer. Drinking alcohol during pregnancy can harm unborn children.

Youth drinking can impede development and cause bodily damage as well as increasing, vulnerability to bodily harm, sexual harm, antisocial behaviours and harmful effects on social life, work/study and finances. These are the same harms that adult drinkers are exposed to but are magnified for youth as their bodies and minds are still developing.

Alcohol has been indicated in increased hospital Emergency Department presentations with between 18% and 35% of injury-based Emergency Department presentations estimated to be alcohol-related, rising to between 60% and 70% during the weekend (Jones et al., 2009; Humphrey et al., 2003).

Alcohol is also indicated as a factor in crime rates. According to Alcohol New Zealand, alcohol is a factor in

- 1 in 5 traffic crashes
- 1 in 3 violent offences
- 1 in 2 drug and antisocial offences
- 1 in 4 traffic offences
- 1 in 5 cases of sexual offending
- 1 in 2 serious violence offences
- 1 in 4 property offences

Relating the national information and evidence to a local level is important. The statistics derived from the National Health Survey and Alcohol New Zealand paint a picture that is worse for those that are living in socioeconomically deprived areas and for Māori. With youth drinking habits also a strong factor to lifelong habits. According to the socioeconomic indicators from the 2013 Census the areas within the Waitomo District range from decile 6 to decile 9. Overall the area is classed as decile 10. From the same Census we also know that Waitomo has a higher Māori population percentage than nationally. This potentially puts Waitomo District at a higher risk for alcohol harm with a focus on males, youth, and Māori.

Alcohol harm is a national concern and a national problem. Being able to view statistics around alcohol consumption, alcohol related crime incidents and alcohol related illness for the Waitomo District would give a better understanding of the size and scale of the problem in this area and how best to target resources.

DRUG HARM

According to the National Health Survey the prevalence rate for people who have used cannabis for recreational or non-medical purposes, or to get high, in the previous 12 months was 11.6%

Looking at the Course of Life Safety Matrix it is 15-24 year olds that reflect the biggest percentage of age groups using cannabis, followed by the 25-44 year olds. The percentage range across the age groups was 22.2% (15-24 year olds) down to 0.4% (75+ age group).

Cannabis use is higher in 15 to 24 year olds than smoking even though smoking is legalised for those 16 and over.

Hazardous drinking becomes prevalent in teenagers from 17 upwards but cannabis use is prevalent in teenagers from age 15. This would suggest that although there is a problem with youth and alcohol it is delayed by the licencing laws. When it comes to cannabis it is an illegal substance for all ages and for those choosing to supply it no rules or responsibilities exist and supplying to teenagers carries the same risk as supplying anyone, therefore it may be an easier substance for the youth of our communities to acquire.

According to the National Health Survey males are almost twice as likely to use cannabis as females. Māori are more than twice as likely to use cannabis as non-Māori. Those living in more deprived areas are 1.86 times more likely to use cannabis than those in least deprived areas.

The prevalence of amphetamine users, defined as anyone who has used amphetamine for recreational or non-medical purposes, or to get high, in the last 12 months is 0.8%. The percentages of those within any age group using amphetamines was 2% or less hence the different scale to show usage trend. Those in the age group 20-34 are the largest percentage of the population group using amphetamine followed by 35-44 year olds.

Again drilling down into the survey there is a trend that amphetamine use is slightly more common in men, Māori and those living in the most deprived areas.

Drug harm is a nationwide problem with a reach far beyond those that use illicit drugs. In 2016 the Ministry of Health published the New Zealand Drug Harm Index (DHI). This was a way of allocating dollar figures to the problem that takes into account the cost of:

- Personal harm. This will comprise physical health, psychological well-being and personal wealth.
- Community harm, that is, the cost of crime attributable to drug use, injury to others, the

various harms to family and friends and a reduced tax base.

- The cost to society through interventions by agencies that occur as a result of attempts to address the harms associated with illicit drug use and include health, education and law enforcement.

Overall, the social cost of drug use is estimated at NZ\$33,800 per year per dependent user and NZ\$2,300 per year per casual user.

The cost estimate of the pain and suffering endured by family and friends is \$438 million. This is the single largest cost estimate in the 2016 DHI model.

The DHI estimates that the Government is spending at least \$230 million each year to address a \$1.8 billion problem. Government agencies vary in their ability to report their expenditure on drug-related matters so it is likely that the figure is an underestimate of real expenditure.

An estimate of the true cost of drug-related crime was included for the first time in any DHI. The new classification identifies three types of drug-related crime:

- Acquisitive crime by users to support their drug use (NZ\$140 million)
- Funding of non-drug related crime types from the proceeds of drug trafficking as part of the diversification of organised crime's business interest (NZ\$70 million)
- Tax avoidance on the revenue raised from the sale of illegal drugs (NZ\$254 million).

As a nationwide problem drug harm will be an issue for the Waitomo District too, including the impacts on the community, families and overall crime rates. From the health survey it is shown that those who live in lower socioeconomic area and those identifying as Māori are most at risk of drug harm. We can expect Waitomo to have an above average drug harm prevalence keeping in mind that the Waitomo District is of lower socioeconomic status and has a larger representation of Māori within the community.

With that in mind we can expect the drug issues described in the DHI will be identifiable in our area.

SMOKING HARM

Smoking was one of the leading modifiable risks to health in New Zealand in 2017, accounting for about 9% of all illness, disability and premature mortality (IHME 2018). Smoking harms nearly every organ and system in the body. It is the main cause of lung cancer and chronic obstructive pulmonary disease (COPD). It is also a major cause of heart disease, stroke and many other cancers.

The overall prevalence of smoking across the country sits at 14.9% of the population. This is a statistic describing current smokers – those aged 15+ years who smoke at least monthly, and have smoked more than 100 cigarettes in their whole life.

Looking at age groups smoking is most prevalent in the 25-34 age group. The 15-17 years olds have a very low prevalence which suggests that fewer people are starting smoking or starting smoking at a later age.

The 2017/2018 Health Survey states:

- Māori women were 3.5 times as likely to be current smokers as non-Māori women, after adjusting for age differences. Māori men were 1.9 times as likely to be current smokers as non-Māori men, after adjusting for age differences.
- Adults living in the most socioeconomically deprived areas were 3.0 times as likely to be current smokers as adults living in the least deprived areas, after adjusting for age, gender and ethnic differences.
- Current cigarette smoking rates have decreased since 2006/07, when 20% of adults were current smokers.
- The most substantial reduction in the current smoking rate since 2006/2007 was for 15-17 year-olds, with 3.6% smoking in 2017/2018, compared with 16% in 2006/2007.

In the absence of local data we have to rely on national statistics which suggest that Māori and those living in low socioeconomic areas are most vulnerable to either becoming smokers or continuing as smokers. As Waitomo District is a lower socioeconomic area, with a high proportion of Māori, smoking is likely to be an issue that is over represented in this area.

The cost of smoking on the health of the person cannot be over stated. The cost of a smoker's poor health on their family, community, work and local health system has not been calculated as part of the survey results however those impacts should be acknowledged.

EDUCATION

Education is a lifelong process although formal education is something that not everyone participates in for the same length of time or to the same level. There are some measures that do exist around education levels achieved. What was hard to determine was what proportion of people in the Waitomo District that go back to some kind of formal education later in life to upskill or retrain.

The profile for Waitomo District school leavers of 2016 shows that out of those who left with below level 1 qualifications just over 80% were Māori and just under 20% were Pacific peoples. Those leaving with level 1 qualifications were around 35% European and 65% Māori.

Those leaving with level 2 qualifications were around 35% European, 7% Pacific Peoples, 57% Māori and the remainder being Asian.

Those leaving school with level 3 or above were around 5% Asian, 40% European, 45% Māori and 5% Middle Eastern, Latin American and African (MELAA).

Those leaving with University Entrance were around 10% Asian, 61% European and 29% Māori.

For those that selected to go on to tertiary education the most popular fields of study in 2016 were, Mixed Field Programmes, Agriculture then Environmental and Related studies, followed equally by Society and Cultural studies, Management and Commerce and Engineering and Related Technologies.

As at 2017 the Not Employed or in Education or Training (NEET) rate for Waitomo District was on an upward trend sitting at 20%. The national NEET rate for 2017 was 12% with a trend of slight increase. The employment figures supplied through the MoE also showed the unemployment rate for the Waitomo District in 2017 was sitting at 4.1% which was lower than the National rate of 5%.

The qualifications most in demand in 2017 was Engineering and Related Technologies with 19% of positions requiring this field of study. The proportion of jobs filled in area were 23.3% Agriculture, 15.6% Manufacturing and 7.4% Construction. Those three fields create just over 46% of all jobs in the area. This does not leave much space for other career choices. The projected growth in the job market in the area (up to 2022) shows very few new jobs being created and most new employment coming from replacement jobs.

In summary Māori make up the largest proportion of school leavers with lower attainment levels. Lower educational attainment levels could potentially be limiting to future employment and career choices. This in turn could limit ability to earn and therefore provide adequately for themselves and their family leading to a downward spiral of outcomes both physically and mentally.

For those who want to remain in the area job prospects are limited to a few big industries and then the support and community network jobs that wrap around that. However with the advent of fast broadband and reasonable house prices Waitomo District could become a destination for those that want a more relaxed lifestyle and are not obliged to be in a traditional office all the time.

Anecdotally house prices and demand for housing is on the rise in many places throughout the Waitomo area which does suggest growth.

FIRE AND EMERGENCY

The information available around fires and who is at risk was not in a format that could be translated into the life course matrix. There is a table in appendix II i - Fire and Emergency data, displaying the information received.

Amalgamated data from 1 January 2016 to 31 December 2018 data for local brigades working within the Waitomo District shows that the majority of call outs are for road traffic accidents.

Looking at the injury and accident data areas on the matrix for these areas they do not reflect the number of call outs attended. A possible reasons for this could be that the car occupants not being local or do not need always require medical treatment. False alarms and medical assistance and special service calls were also common reasons for call outs as was the reason "not recorded." Out of just over 100 false alarm call outs only 2 were malicious.

There were 38 structural fires across the time period (involving homes, buildings) out of those 10 (just over a quarter of the total) were caused by unattended cooking. Short Circuit, earth fault and other electrical failures account for another 9 fires. Of the 38 structural fires 30 of them were in Te Kūiti.

Te Kūiti Brigade are active within the community attending 76 home fire safety visits they were also the brigade with the most calls outs although as Te Kūiti is the most populated centre and covers a wide rural area that is not a surprising statistic.

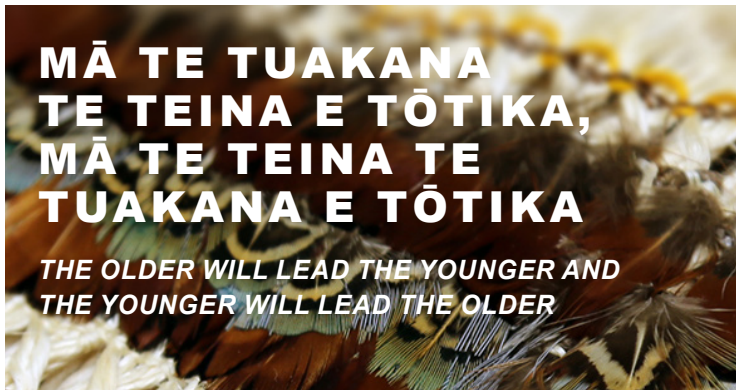
Overall the statistics from the Fire Service paint a picture of assisting a lot of accidents. When dealing with structural fires the biggest reason they occur is cooking while unattended. What could be helpful in future would be the reason or action taken for the home visit e.g. Fire alarm

installation, advice on fire safety in their home, escape route planning.

YOUTH OUTCOMES

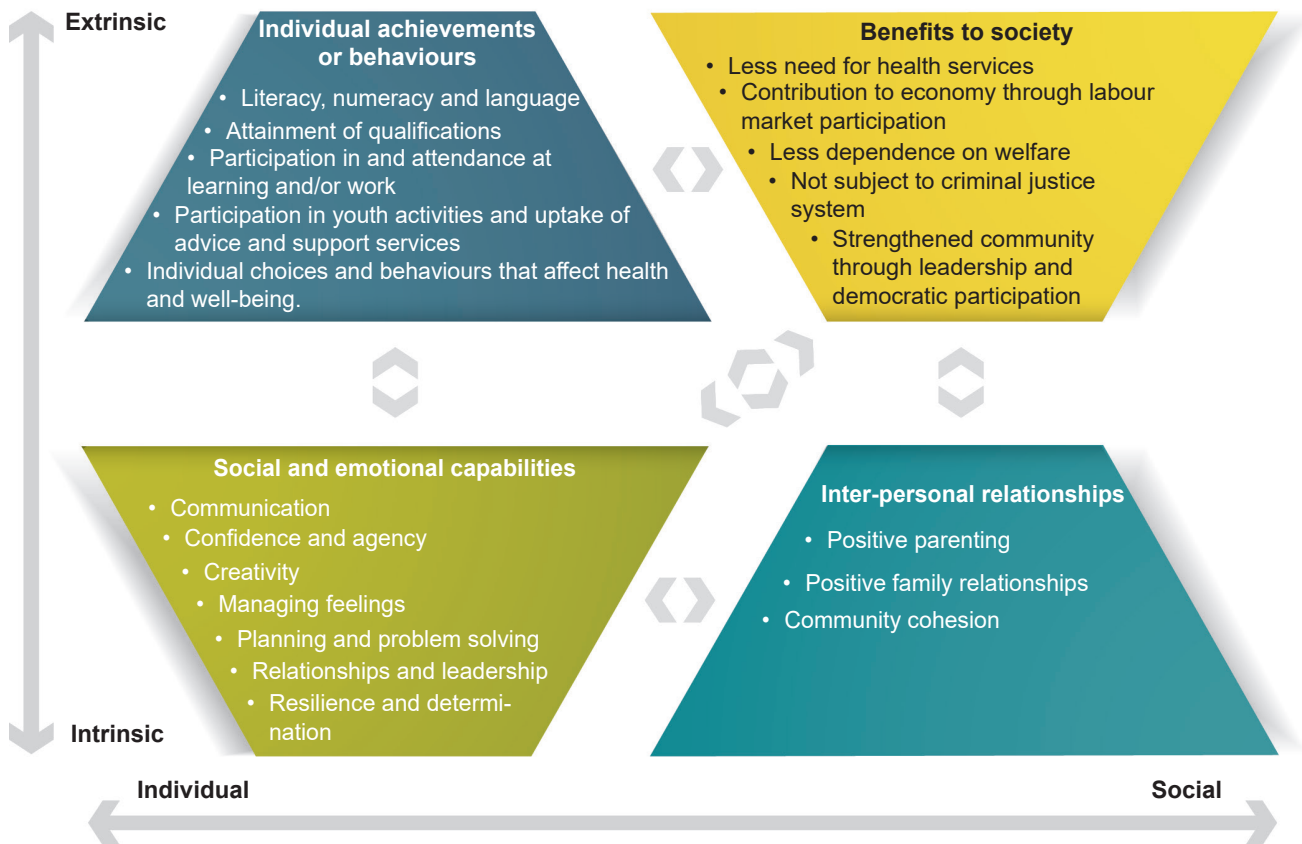
Based on the 2013 Census data, the Waitomo District has been classed as a decile 10 (most deprived) area. Evidence from health surveys and Census data as well as other sources relate lower socioeconomic status to poorer outcomes in life.

It has been asserted through various studies, agencies and publications that what happens in a person's youth directly effects their future outcomes, how they fit into society, their own health and well-being and achievements throughout the course of their life. For those youth that are most vulnerable due to emotional, social and educational growth needs that are not met adequately, the future path can be set on a negative course at an early stage.



In the report “A framework of outcomes for young people” by Bethia McNeil, Neil Reeder and Julia Rich there is a model that concisely shows how all outcomes for young people can be mapped into a framework defined by two dimensions – the distinction between individual and social outcomes and between intrinsic and extrinsic outcomes is replicated in the

Youth Outcomes



Youth Outcome Framework along with some commentary.

The model outlines several important features of outcomes for young people:

- There are potential links between all four outcome areas.
- The top right quadrant identifies those outcomes that have most direct impact on public spending.
- The bottom left quadrant identifies the intrinsic, individual social and emotional capabilities that result from the process of personal and social development such as communication skills, resilience and a sense of setting your own agenda. This framework of outcomes focuses most strongly on the 'clusters of capabilities' within this quadrant and their crucial significance to the achievement of other outcomes – particularly those that impact the public purse (the top-right quadrant).
- The four quadrants cannot easily be aligned to timescale. All outcomes could occur in the short, medium, or longer-term.
- Some of the outcomes are more reflective of true value than others. Although there is consensus on the value of extrinsic outcomes around education and career success, health and relationships, the difficulty in evidencing immediate and direct impact on these outcomes means that many providers and commissioners focus impact assessment on 'interim indicators' (in particular, those in the top-left quadrant) which are easier to measure.

This information is not new to many working with youth in the Waitomo District. Youth have previously been identified as a group that needs support in the Waitomo area through the Social Sector Trials (SST) which commenced in the Waitomo District in March 2011 and ran through to 2015.

Through the SST certain areas were identified as being most likely to improve the outcomes of Waitomo District youth. Areas that were identified as needing focus were:

- reduced truancy
- reduced offending
- reduced alcohol and other drug abuse
- increased participation in education, training and employment

Using the available figures from the 2014/15 SST Action Plan it is evident that the Trials had successes with apprehensions of 12-18 years olds reducing by over 50%.

The number of students taking NCEA level 1 and 2 increased between 2010 and 2013.

This was achieved through a variety of programme including activating a Youth Council that has since taken a very prominent role in leadership by taking on substantial projects and being included in the solution building process and implementation.

The Course of Life Safety Matrix shows that youth are vulnerable to many of the areas of harm that exist in society. In fact the 20-24 year old age group has the greatest amount of red boxes than any other age group closely followed by 15-19 year olds and 25-29 year olds. For some this is the start of a journey that doesn't always improve. Early intervention is key to success as waiting for the problem to identify itself means it is already too late for some.

SAFETY PERCEPTION IN THE COMMUNITY

There is minimal hard evidence on how the Waitomo District communities perceive the safeness of the area. It would be of benefit to establish a baseline for this through surveys and guided discussion forums. The areas to discuss would be how safe people feel in their own homes, their neighbourhoods, their work places, on the local roads and in the places that they use for socialising and recreation. Other key areas to discuss would be around what makes people feel unsafe and what makes them feel

safer. As previously outlined for different people with different experiences the answers could be diverse and illuminating.

A survey has been undertaken by the Waitomo District Youth Council of 286 students across the three High Schools within the Waitomo District (for full survey see appendix I i). It was through this survey that the four top areas of concern for youth were identified:

- Drugs
- Violence
- Gangs
- Alcohol

All four areas have some connections with crime, crime rates and all can at times be interrelated. A follow up question asked who they would go to for assistance when dealing with these issues. The top four answers were:

- Parents
- Other Whanau
- Peers
- Teachers

This is telling that parents came out first and other whanau second. This suggests that support for parents and wider whanau to be able to assist their children/ youth through tricky situations should be prioritised.

The perception on how safe people feel is going to be influenced not just on what has been experienced directly but on what is reflected back to the communities through local newspapers, social media, national media and through the “local grapevine.”

As an example in September 2018 there was increased gang activity in Te Kūiti including an increase in gang presence within the Te Kūiti township. As part of this increased activity some local businesses were threatened and some demands were made with menaces of individual and clubs.

Te Kūiti was in the national news for negative reasons. The increased activity was reported in the local paper and it was also discussed/ mentioned on social media. Some people started to feel apprehensive about going into Te

Kūiti township. Friends from outside the area commented on the crime and safety issues in Te Kūiti. Judging by what was in the local papers and on social media, and what was travelling around the local “grapevine”, the perception was the majority of residents within Te Kūiti were a lot less safe. As were those visiting the township.

In reality, for the majority of people in the town little had changed apart from a stronger visual gang presence and everyone was talking about gang activity. For some (the minority) the risks to safety had increased. Some months on and the situation has changed. Gang presence in the streets of Te Kūiti has lessened. Those that were allegedly responsible for these events were identified and dealt with by the Police.

So is Te Kūiti as safe as it was before August/ September 2018? For most it will feel as though it has gone back to “normal” but the feelings around what was being seen, reported and talked about will give some residents a lasting feeling of unease that may surface. Damage to people’s perception of how safe Te Kūiti is has been done but quantifying the damage will be almost impossible.

Perceptions around safety are going to be fluid and should be something that is surveyed each year and discussion forums run every three years. Baselines can be achieved and residents can have an input into the process and the opportunity to discuss what they feel are safety issues that concern them and those they love.

PRIORITY AREAS FOR VIBRANT SAFE WAITOMO

The definition of a priority is something that is very important and must be dealt with before other things.

There is a lot of information held within the Course of Life Safety Matrix and throughout the commentary. Distilling down all that information into manageable work areas, with priorities within those work areas, is key.

Too many areas and priorities to work on would spread the focus too thin and achieving any gains would be a struggle. If too few priority areas are identified the risk is that not enough progress will be made and community, stakeholders and other parties will lose confidence in the delivery model and support will fall away.

Going back to the vision of VSW which is "To create safe and vibrant communities where people want to live and do business", the next step is to look at what would be the foundations of a vibrant safe community. A strong community is one where the people are thriving, where there are work opportunities and where there are opportunities to extend yourself beyond work and family through recreation.

This would give three 'work streams' to create a strong base for a safe and vibrant community.

Those three areas are where most people spend the majority of their time - with family, at work/school or engaged in a sport or recreational activity.

Identified in the matrix and the commentary was that the top three settings for accidents was at home, at a work place or during a recreational or sporting activity.

If we put all of that together there are three clear work stream areas.

Whanau/Family - if you are at home you are most likely with your family. These are the people who you spend time with and potentially are the ones most influential on your choices and behaviours.



Mahi/Work – a place to use different skills, gain knowledge and earn to support yourself and others.

Hakinakina/ Recreation – activities that extend your body and mind and feed your soul.

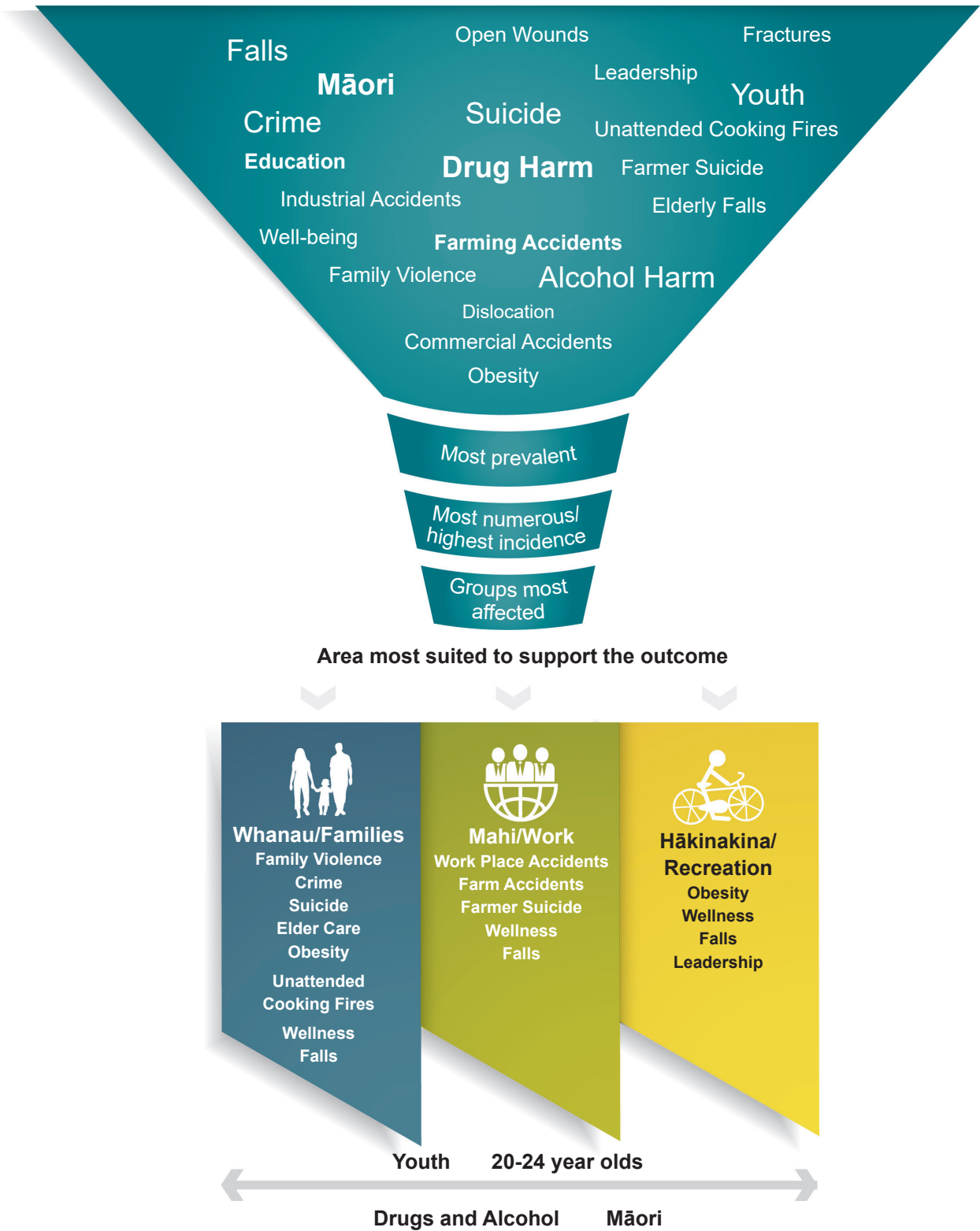
The Course of Life Safety Matrix has identified age groups at risk of different types of harm. From the Course of Life Safety Matrix we can identify those ages, issues and outcomes that display the most red (of high concern) and orange (of moderate concern) and then put them through filters and sort them into the settings headings. Any settings, outcomes or issues that are mostly green (of low concern) will be filtered out.

Through the research and within the anecdotal feedback four areas have been identified as needing extra focus and support across all three settings. As a demographic Youth have been identified as a group requiring specific support with additional focus on those aged 20-24.

Drugs and alcohol harm has been identified as an issue that needs to be addressed across all three settings to create a unified approach.

Throughout the research associated with this report Māori have been identified as experiencing poor economic, health, and education outcomes therefore impacting negatively on their overall wellbeing. A unilateral approach of targeted support across all settings will be required if life equity for all Māori is to be obtained.

Priority areas for Vibrant Safe Waitomo



In the above diagram the priority areas for VSW are set out under the setting which is most suited to where the issue or outcome can be addressed. This does not mean that there won't be crossover. The priorities are also interspersed with holistic goals that will support best outcomes for the priorities.

EFFECTIVE STRATEGIES

It is only through proper identification and acknowledgement of issues and groups most at risk of harm within a community that adequate and appropriate programmes and strategies can be put in place to support better outcomes and a higher degree of safety.

With the priority areas and most vulnerable groups identified, establishing which strategies have been successful in the past, what strategies or programmes are currently in place, and what strategies could be planned to achieve positive outcomes needs to be assessed.

An important step is to assess the range and reach of programmes that are currently being delivered within the District. To achieve this all Regional Coalition members were asked to provide a comprehensive overview of their contracted service delivery in the area, either directly or indirectly.

**HE MAHI KAI HŌAKA,
HE MAHI KAI
TĀNGATA TIPĀ**

*JUST AS WORK CONSUMES SANDSTONE,
SO IT CONSUMES PEOPLE/EVERYTHING
WORTHWHILE TAKES CONSIDERABLE
EFFORT*



Below is a table of programmes and services that were identified from this exercise.

Programme	Regional Agency	Name of service/programme/activity	Target population and timeframe for delivery
Drugs and Alcohol	WDHB	Waikato DHB/Community Alcohol and Other Drug Service (CADS) - Rural South	
Drugs and Alcohol	WDHB	Youth INTact Service, Waikato DHB, CADS	Youth
Drugs and Alcohol	WDHB	Taumarunui Kokiri Trust: Adult CADS	Adult
Drugs and Alcohol	NZ Police	Liquor Licencing - 3H's and Controlled Purchase Operations (CPO) Liason with Council	Licencees
Drugs and Alcohol	WDHB - Public Health Unit	Health Improvement Team	Works with any workplace or community group who identify alcohol harm as a barrier to well-being
Drugs and Alcohol	WDHB - Public Health Unit	Health Improvement Team	Works with any workplace or community group who identify drug harm as a barrier to well-being
Crime Prevention	NZ Police	Holiday Programmes/ anti-cyber bullying with Journey Church	
Crime Prevention	NZ Police	It's not ok in Te Kuiti	Whole Population
Crime Prevention	NZ Police	Loves me not Piopio, Te Kuiti	Year 12 Students
Crime Prevention	NZ Police	Blue Light - Rainbows End, road patrol, reward days, discos.	
Crime Prevention	NZ Police	Club Champs - Te Kuiti	
Crime Prevention	NZ Police	National Blue Light - NZDF 5 day course	14-17 yr olds
Crime Prevention	NZ Police	Number 12 Te Kuiti Youth Hub	
Crime Prevention	NZ Police	Keeping Ourselves Safe	Primary school aged children
Crime Prevention	NZ Police	Kia Kaha	Primary and secondary aged children
Education Employment	MoE	Positive Behaviour for Learning: Piopio College, Piopio Primary, Pukenui School, Te Kuiti High School, Te Kuiti Primary School, Te Wharekura o Maniapoto, Benneydale School	All students and staff at the named schools. 2018 and beyond depending on the needs of each school
Education Employment	MoE	Attendance Service	All schools in the Waitomo TLA. Ongoing contract
Education Employment	MoE	Alternative Education for Piopio College, Te Kuiti High School (and Otorohanga College).	13-15 year olds from Piopio College, Te Kuiti High School (and Otorohanga College). Eleven contracted places
Education Employment	MoE	Mentoring/partnering with Iwi to accelerate Māori Educational Achievement	In Waitomo, the priority group is Māori. 40 Year 1-8 Māori students at risk of not making sufficient progress in literacy and numeracy. Supporting 60 secondary students (in both Te Kuiti and Taumarunui) that are at risk of not succeeding within the educational system, to support attendance and completion of required assessments and to start developing relevant vocational pathways. 2016-mid 2019
Transport and Roads	NZ Police	Driver Licencing Te Kuiti GDL and Learner	
Transport and Roads	ACC	Ride Forever	All motorbike riders. Ongoing delivery
Transport and Roads	ACC	Drive	Young drivers

Programme	Regional Agency	Name of service/programme/activity	Target population and timeframe for delivery
Transport and Roads	WDC	Novice Driver Training Programme	16-24yrs - 30 full, 50 restricted, 30 learners. Driving Lessons
Home Safety	ACC	Live Stronger for Longer https://www.livestronger.org.nz/	Over 65's
Public Health	WDHB - Public Health Unit	Working within three schools in the Waitomo area to support health and well-being improvements for rangatahi and tamariki	Youth Safety and Health 2019/20
Public Health	WDHB - Public Health Unit	Family Safety and health priority work	Pacific and Māori Whanau
Public Health	WDHB - Public Health Unit	Health Protection Team	Assist TA with compliance and monitoring of events
Public Health	WDHB - Public Health Unit	Health Improvement Team	Works with any workplace or community group who identify mental health factors as barriers to well-being
Public Health	WDHB - Public Health Unit	Health Improvement Team	Works closely with Te Ahurei Rangatahi to provide support in communities re sexual health on request
Fire and Emergency	Fire and Emergency	Fire safety information for businesses and landlords	
Fire and Emergency	Fire and Emergency	Kitchen fire demo, escape my house programmes	Local populations at events
Fire and Emergency	Fire and Emergency	Home Fire Safety	NZ wide
Fire and Emergency	Fire and Emergency	Marae Fire Safety Surveys	Local Iwi
Fire and Emergency	Fire and Emergency	Fire awareness intervention programme	Offered to children 3-17 who have a fascination with fire
Fire and Emergency	Fire and Emergency	Firewise	Year 1 and year 6
Fire and Emergency	Fire and Emergency	Safe Schools Programme	School communities and Board of Trustees
Positive Early Intervention	Waitomo District Council	Tuia - Mayor's Taskforce for Jobs	Provide mentoring to one young Māori person within the Waitomo District/year. targeting 18-25yrs

Key:

	Drug and Alcohol programme		Programmes targeting Māori
	Programmes targeting Youth		Programmes targeting 20-24 year olds
Writing	Programmes targeting Māori and Youth		

LOCAL PROGRAMME ALIGNMENT

There are limited programmes in the services snapshot table that operate in the areas of workplace safety. There are limited programmes or activities reported as operating from a regional level in the areas of urban safety, early positive intervention and environment safety-built and natural.

If we assess the number and type of programmes in the services snapshot table that target those that we have identified as most vulnerable or high risk, there are areas that are not specifically catered for yet. Although Youth are a focus for many programmes there is only one listed that is targeted at 20-24 year olds which is one of VSW's most vulnerable groups.

There are also limited programmes that target the Māori community.

There are currently six separate programmes around Drugs and Alcohol with some overlap on target groups. Information around their success is limited at this stage.

Creating a snapshot of services by requesting it from formal service providers is key to assessing what programmes are currently running, it is however worth noting some limitations of this approach.

Firstly it assumes that each Agency or Ministry involved has resources available to collate all the information across multiple departments. There may be programmes operating that should be in the snapshot for which we have not received information.

Secondly it is possible that not all programmes and activities that are benefitting the communities of the Waitomo District and reducing harm and/or promoting safety are instigated, led or resourced by the Agencies around the table.

As an example there is a choir for senior ladies in Te Kūiti which is run by volunteers.

The choir perform at community functions such as Christmas in the Park. Those involved are keeping active mentally and to a degree physically. They are staying connected with peers and the wider community through performance. As well as protection from loneliness and isolation the activity offers protection by way of someone noticing if a member fails to turn up, therefore resulting in a check on their wellbeing.

Federated Farmers are a group that work in our community to support better industry practices and have been known to promote Farmer wellbeing.

To gain a wider picture of programmes and activities across the District that promote safety in different ways it will be necessary to engage with industry, service providers and community groups, run forums and possibly add questions about activity and programme participation to Council surveys.

NATIONAL AND REGIONAL PROGRAMME ALIGNMENT

Below is a dashboard representation of some key national and regional organisations priorities in their simplest form. The information was extracted from literature on the website including Strategic and Action Plans

Organisation/ Priority	Youth Safety and Health	Aged Safety and Health	Family Safety and Health	Alcohol Harm Reduction	Driver and Road Safety	Drug Harm Reduction	Mental Health	Sexual Harm Reduction	Crime and Organised Crime	Driver Distraction/ Safety	Vehicle Safety	Harm Prevention	Strengthen Community Connectivity	Home Environment Safety
NZTA	✓	✓		✓	✓	✓				✓	✓	✓		
WDHB	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓	✓
Health Improvement	✓	✓	✓										✓	
ACC	✓	✓	✓							✓	✓	✓		
MoE	✓												✓	
MoJ			✓					✓	✓			✓	✓	
Youth Justice (part of Oranga Tamariki)	✓		✓	✓		✓	✓	✓	✓			✓	✓	
Oranga Tamariki (under MoJ)	✓		✓	✓		✓		✓				✓	✓	
Police	✓		✓	✓	✓	✓	✓		✓			✓	✓	✓
Integrated Safety Response	✓	✓	✓	✓		✓	✓	✓				✓		
Ministry of Social Development	✓		✓										✓	✓
Fire and Emergency			✓	✓	✓						✓	✓	✓	✓
Civil Defence and Emergency			✓									✓	✓	✓

From the dashboard we can see that the top six priorities in order are family safety and health, youth safety and health, strengthen community or their link to it, harm prevention, alcohol harm reduction and drug harm reduction.

Each of these priorities feature strongly in the priority areas identified through VSW research. On closer inspection of the full table we see that collaboration was a message that came through in the more extensive information. This is a positive sign that VSW is responsive to need.

Again in the more extensive table it is possible to drill down and see for the WDHB in particular, equitable Māori outcomes was part of their long term goals, which is important to VSW as well. Overall the major areas of priority and concern for Waitomo are reflected in the Regional and National Agencies priorities.

SUCCESSFUL STRATEGIES

To be able to plan into the future it is worth looking at any successful strategies that have worked in the Waitomo District in the past, that are currently working and learn what made them successful and use that to inform future planning.

Youth has been identified through the priority setting process as a group that requires support and some extra focus. Youth have previously been identified by Government Agencies as a group at risk and traditional approaches were not yielding the desired level of results. To address this the Social Sector Trials began in 2011.

SOCIAL SECTOR TRIALS - A CASE STUDY

In 2011 the Government of the day set up the Social Sector Trials. Initially it was a two year trial based in six communities including the Waitomo District. The target demographic being 12-18 year olds initially. After the initial two years the trial period was extended for Waitomo through to 2015/16. As the Trial continued the age group being targeted broadened to include children from 5 years old, after consultation with those running the Trial.

The Trial was set up to test a new approach of service delivery through a collaborative approach across the social sector with ultimate control shifted to local levels. This shift gave flexibility to find local solutions to local problems. This hinged on the ability of a lead individual to use cross-agency resources and knowledge to effect change in a community.

The Trials were a partnership between the Ministries of Social Development, Justice, Health, Education and New Zealand Police.

One of the aims was to support decision making at the local level, build on existing networks and strengthen coordination at every level of Government and within the community.

The intention of the Trial was to improve outcomes for young people overall by focusing on five key outcome areas

- Reducing truancy
- Reducing offending by young people
- Reducing young people's use of alcohol and other drugs
- Increasing the number of young people in education, training and employment
- Collaboration, communication and coordination

As part of the Trials a Governance Group was established which gave support and guidance to the Lead Coordinator. Included in the Governance Group was Waitomo District Mayor, Brian Hanna as Chairperson. Youth Focus Groups were also established to help identify the issues more clearly and assist with building solutions.

Through the Trial gains were made in all four focus areas with 100% case closure rate for non-enrolled truants and a decrease of youth offending over the period of the Trial. Also programmes were put in place to support young drivers through the driver training and driver licence attainment to reduce youth driving offences and fines.

Improvements were made across the education, training and employment field with Māori achievement rates increasing and celebrating youth achievement through exposure in a Young Achievers Calendar which is still produced.

Youth leadership flourished with the Youth Council organising events for their peers and undertaking projects. A Youth Hub was set up and a group of young people participated in a Cyber Bullying Campaign.

All stakeholders involved in an evaluation after the initial two years commented on the significance of the Trials in creating a tangible opportunity for agencies, services, and individuals in local communities to work collaboratively, share resources, and facilitate better outcomes for young people. Governance Group structures worked effectively and facilitated collaboration and coordination of services, and as a result stakeholders reported that young people experienced a more seamless and responsive delivery of services.

After the Trials finished for the Waitomo area the work that was started through the Social Sector Trials continued and is delivered out of Number 12 Youth Hub.

The feedback from those involved in the Trials for the District was positive, citing that the five key outcome areas were easy for perspective youth participants to understand what the Trail was offering and whether they wished to participate. The key outcomes were broad enough to allow for innovative solutions that achieved the overall outcomes by less traditional pathways. This meant the programme could be tailored to the community's needs.

This confirms a collaborative, cross agency approach to finding solutions locally has worked before and produces benefits, which would suggest that it is an approach that could work again. With the lessons learnt from the Social Sector Trials, members will have a greater understanding of how to get the most out of the model.

TUIA AND THE MAYORS TASKFORCE FOR JOBS (MTFJ) RANGATAHI - A CASE STUDY

Through the priority setting process a specific demographic emerged as highly vulnerable, those who are 20 -24 years old. This age group was most at risk of harm across most settings and issues. Through the same research Māori were also identified as a community that needed dedicated support to raise positive outcomes to an equitable level.

Tuia and the MTFJ Rangatahi Programme is directed to address these higher risk groups.

Waitomo District has been a part of this programme for 9 years, since its inception in 2010 via the Mayor's Office.

It is a programme that has been developed to promote and grow leadership capacity in young Māori throughout New Zealand using a long term, intergenerational approach. With the goal of enhancing the way Rangatahi Māori contribute to communities across New Zealand and build a network of support for Rangatahi to assist them in serving their communities to the best of their abilities.

The programme requires the Mayor to select a young (18-25 year old) Māori from their District to mentor on a one-to-one basis over a year, encouraging and enhancing leadership skills. Through the partnership the Rangatahi will be mentored in various formal and inform settings that assist in their development as a local leader.

The partnership offers both parties the opportunity to gain an insight into inter-generational strengths and issues, cultivate values and to gain perspective on each other's cultural background and values.

The positive outcomes for the individual have been documented through interviews and individual testimonies. The long term positive effects on a community will be hard to evaluate

as it is likely to be a cumulative effect that will in time reach a tipping point when there is a better understanding of cross cultural values and with a prevalence of strong intergenerational leadership being noted within Māori sectors of the District and Iwi.

This is a long term collaborative approach that is working across many Districts and more than one agency. It encompasses Iwi from the top of the North Island to the tip of the South Island.

The programme works to give focused support and solutions to a specific identified group.

The Tuia Programme provides different learning outcomes to each participant but most are stretched and supported to develop skills to navigate the challenges they face as they enter into adulthood as a young Māori leader.

Through the mentoring process with the Mayor the Rangatahi gain further understanding of influence and governance. This relationship and learning provides increased development, and skill sets are strengthened. The Rangatahi become self-determined about their contribution to their Iwi, Community and Whanau as a young Māori person. It will be that resilience that will help the community support and guide others in need.

A resilient community is one that can thrive.

In 2019 the first Wananga of the year Tuia I Runga was hosted at Te Tokanganui-a-Noho Pā in Te Kūiti within the bounds of Ngāti Maniapoto and WDC.



THE GREAT NEW ZEALAND MUSTER – A CASE STUDY

Each year Te Kūiti hosts a family event that attracts large numbers of locals and visitors. The Great New Zealand Muster was initially a companion event to the New Zealand Shearing Championships which culminate on the Saturday of the Muster.

It has evolved overtime to include live music, local craft and produce stalls, a Running of the Sheep event, children's attractions, rides and food stalls. To keep the event fresh it is important that it changes overtime and continues to develop to showcase the District.

Being a popular local event it is also an opportunity to add value and assist people in connecting with their community in new ways. Much work this year has gone into finding different aspects of community life that can be showcased and enjoyed. This is reflected in the inclusion of the word 'Festival' in the promotional material about the event.

This year, as in previous year's, young talented musicians showcased their skills on the Main Stage, the same stage that a nationally recognised band also played at the same event.

**TUIA I RUNGA,
TUIA I RARO, TUIA
I WAHO, TUIA I
ROTO, TUIA I TE
HERE TANGATA**

**THAT IT BE WOVEN ABOVE AS IT IS
BELOW, WOVEN WITHOUT AS IT IS
WITHIN AND INTERWOVEN WITH THE
THREADS OF HUMANITY**

This should help the young musicians feel that any aspirations they have towards music as a career are valid. Also the main act will not only entertain people but inspire other musicians to continue to work towards their musical goals.

This year there was an emphasis on family with free children's attractions so that everyone could enjoy what was on offer. There was family seating areas so that those with more mature legs could rest and still enjoy being part of the festival and young families could sit and enjoy food together.

The Emergency Services were represented at the event. For all Emergency Services it is a good chance to connect and promote safety messages and continue to build trust in the Community.

Ngāti Maniapoto is renowned for its arts heritage, and to reflect that there was an Arts and Crafts Alley (a street that was dedicated to engaging market goers in the arts) with chalk painting along the road, wool spinning, colouring in, loom weaving and a Wearable Art Competition that locals were encouraged to be a part of.

Also positioned in the Street was a Graffiti Artist and a local student creating four Graffiti Boards representing the four words she believed described her community chosen from entries to a competition with the District's Schools.



The competition winner was given the opportunity to assist with the creation of the artwork during the day of the Great New Zealand Muster. Being able to bring out and highlight diversity of skills and interests will potentially allow more people to connect with the event and others in the community that have similar interests to them.

There was also a Health and Wellness area where Zumba, Line Dancing and Taekwon-Do displays took place. This was enhanced with free games provided for families to participate in and the dissemination of information and resourcing by the Maniapoto Family Violence Intervention Network.

Three First Responders were present, engaging with people throughout the day. The Local Fire and Emergency Team demonstrated a burning kitchen display and our local Police officers provided a Police Car for photo opportunities along with St John being available for questions from the public.

An introduction of a site fee waiver was introduced where not for profit local community organisations holding stalls were not charged if, in the view of the Events Team, the stalls linked to safety or health promotions to benefit the community.

Overall the event is a reflection on the positive diversity of interests and lifestyles in the District. To keep the event thriving it is important to showcase it to a wider audience and engage

locals to support and attract new people and business to the area. To assist in showcasing the District a vintage diesel train carrying 300 passengers from Auckland were provided with the Great New Zealand Muster promotional bags and flyers that had vouchers to discount entry to local attractions exclusive to the train passengers.

Having the train pull into Te Kūiti Station is an extraordinary opportunity. This showcased Te Kūiti and the event to a wider audience, it also gave local businesses a boost with some reporting record sales for the day compared to other years.

Another group that was engaged and made a first time appearance at the community event was the New Zealand Motor Caravan Association. 120 motor caravans visited Te Kuiti for the weekend receiving a powhiri welcome from Te Kūiti Primary School students, the Mayor and the Events Team.

The Great New Zealand Muster has become a festival where the area as a whole is promoted to a wider audience and the community can connect with the event and see themselves, their interests and their skills reflected back at them.

An inclusive event of this scale that enables community members to be part of the event and connects them to other people and what's around them, increases links and therefore provides resilience to the community.



FUTURE STRATEGIES

ADDING VALUE

Finding opportunities to add value to events (big and small) that are already part of the communities landscape will be an easy way to connect people to services and ideas around safety. For example Marakopa has a Sports Day that is well attended by locals who are geographically isolated. This would be a great opportunity to engage with community members easily.

PROGRAMME DIRECTORY

It will be important to continue to establish what programmes and activities, formal and informal are being delivered within the District by agencies, community groups, industry and individuals and create a living directory.

It will also be important to facilitate meetings and introductions for all groups/agencies that have identified a priority area so that they can learn from one another and use each other's connections and knowledge. This could reduce over delivery in some areas and under delivery in others.

ECONOMIC DEVELOPMENT

Many of the issues that have been identified and discussed through the priority setting section are most prevalent in low socio-economic areas and areas of higher deprivation.

Underpinning all programmes to support those that need it most should be a broad programme to raise economic prospects for the District. This would raise the number and range of jobs in the area. Benefits of this would be to give those in the District more job choice and opportunity and encourage those in the working age bracket to remain in the area, especially those with high or specific skill bases.



More jobs can also mean that people may move back to the area or choose to move into the area to gain a job and a lifestyle balance. A thriving job market would give more opportunities for workplace training and those in education can see the benefit of gaining qualifications as they can more easily see beyond traditional job prospects that the area used to offer to more varied employment.

Although these outcomes are possibilities it is important that those in the lowest skilled jobs and the lowest paid work are not left behind as new opportunities arise. It will be important that economic development incorporates a strategy for upskilling the current work force or improving pay and conditions for those in the lowest paid jobs. Otherwise there could be a point where some people and communities are thriving and the situation for others would not have improved. A large disparity between two groups does not make for a cohesive community.

If the Waitomo District communities were to grow significantly it would mean that economies of scale would start to work. The more people available to contribute toward traditional services and amenities means costs could be minimised and spread more widely. Reducing the costs associated with living in isolated areas could reduce pressure on those with limited incomes. With less pressure on income more choices become available. Without good information it does not always follow that positive choices are taken up.

There has been an Economic Action Plan that has been reported on publically in a media article (See appendix III) which suggests that millions of dollars' worth of investment is imminent in the District to grow non-traditional industries. Of interest, it is proposed this will be achieved through partnerships and Provincial Growth Fund investment. There is also evidence of proposed collaboration in areas from industry to education.

Consultation with parties that have a vested interest in areas of community well-being will be part of the process.

At this point much of the information is classified and is yet to be released, however, it is a positive sign that one of the most exciting economic development plans is taking a more holistic approach to economic development within the District. If the Action Plan proceeds then VSW will have a part to play, which without more concrete detail is hard to articulate exactly how at this time.

SUPPORTING SUCCESS & REMOVING ROADBLOCKS

Through an interview process with contract holders and service providers in the District an insight in to what has been working well for them and the community members that they target and what barriers to achieving best possible outcomes was established. Although the feedback did touch on a wide range of topics there were two areas identified that either helped or hindered current strategies and programmes being delivered, these were, the connection with the community and administrative roadblocks.

Through the interview process a common theme was that what worked was local service delivery to local communities. The local knowledge, compassion and ability to connect clients to other services, support people and even just help clients embed in the community itself gave the best outcomes. A fully integrated local service provider could personalise a programme, support or service to a person and a situation through local knowledge and expertise.

There was a common thread to the feedback that when services were provided either out of the area (centralised to regional sites), or by contractors that dropped in to the area to deliver the service, it was less effective as the service was provided in isolation from the natural support network of the community and Whanau.

Also people were more likely to slip through the cracks without local intelligence that connects a service provider to the community.

It was also noted there were challenges supporting males as there were far fewer men working in the social services sector and fewer programmes and support services solely for men and their issues.

Any work that VSW can do to assist in connecting services and giving opportunities for services to come together either to work on specific issues or for promotional drives would be beneficial.

The other major theme of the feedback was administrative roadblocks. This was a large area of concern for service providers and contractors. It was identified that for some services there was a high demand but no more contracts were being offered or no more resources available to offer the service to more people. Cuts have also led to a lack of certain services and providers and people are missing out.

Service providers mentioned that the administrative systems for referral, statistical feedback and auditing were very time and labour intensive and often impeded the process of actually delivering the service to those that needed it.

The rules, regulations and systems can at times mean those in need have missed out on support and help. It was also noted that there is little room for innovation by the service provider, innovations that could improve the system for others.

Regional boundaries were identified as an administrative roadblock as clients that are in isolated places can be in different regional areas for different services that they are trying to connect to, for example, Police, DHB or ISR. This makes it challenging to connect these clients to the right people first time creating barriers to accessing appropriate services due to location criteria.

Restructures make it hard to build and maintain relationships within regional and national services which has provided limitations to services on the ground. Knowing who to talk to, to get what is required is essential for providing an efficient service on the ground.

VSW is uniquely placed to help local service providers channel feedback through to the Regional Coalition and work to assist in the removal of as many administrative roadblocks as possible.



SHARED LEARNINGS

KEY ACHIEVEMENTS IN THE SAFE COMMUNITY JOURNEY

Community Mandate - Every resident in the Waitomo District was able to choose whether WDC should start the journey to work towards becoming part of the Safe Communities Network. They were also able to offer feedback on the proposal and put forward submissions. This was achieved through the Council's LTP 2018-2028 consultation process.

The feedback received was overwhelmingly positive and Council took that as mandate to proceed.

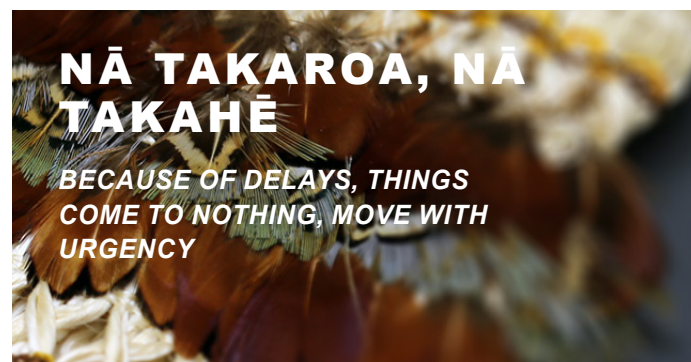
Naming our Safe Community – The right name for our Safe Community model is vital. It began as Safe Community Waitomo. It was a strong clear name. It did not however incorporate the total vision for what the model will achieve over time for the Waitomo District.

The name was changed to Vibrant Safe Waitomo to better reflect the established vision for the approach which is, "To Create safe and vibrant communities where people want to live and do business."

It also incorporates Council's overarching vision for the Waitomo District.

VSW Sustainability – It was identified within Council that VSW would be delivered via the Community Development portfolio. The Community Development Coordinator was identified as being best placed to facilitate the implementation and ongoing delivery of VSW.

Seed Funding – WDC established seed funding to co fund VSW projects through the Community Development Fund Policy.



Regional Support - A strong and diverse Regional Coalition has been drawn together from agencies and groups with a vested interest in encouraging improved social, educational, health and well-being outcomes for Waitomo District Communities through direct or indirect service delivery. There have been two full meetings with the Regional Coalition and further engagement through group emails, informal meetings, email and phone contact.

Terms of Reference – A comprehensive Terms of Reference has been developed and ratified by the Regional Coalition and Council. Regional Coalition members have signed the TOR indicating their ongoing support of VSW.

Priority Work Areas Established – Through the application process research on issues that affect Waitomo District residents' safety were undertaken both in the field, talking to service delivery providers and through desktop research. This has led to clear settings, priorities and highly vulnerable groups being identified.

A Living Directory of Service Delivery – A directory of the range and reach of programmes and providers that promote safety and well-being in the Waitomo District has commenced. This will be a living directory as programmes and projects will change overtime and any programmes that have not been identified to date will need to be added.

Areas of Further Work Identified – Through research and analysis it has been possible to identify where more support could be placed to better assist those at risk of harm. It has also been possible to identify where more information would be beneficial to better understand the issues faced by residents in the Waitomo District.

The District has a distinct makeup and issues compared to that of Waikato and the nation as a whole. Also more work is needed to engage with local groups to gain better understanding of their perception of safety and what alternative programmes are being delivered but not through traditional delivery channels. Gaining better local based information whether it is statistical or from the communities themselves will aid in creating better baselines and better buy-in to VSW as they feel they have a part to play in it.

Extending Reach and Diversity Within VSW

– To aid VSW to grow and gain a different perspective within the Regional Coalition a further two agencies have been identified as desirable to join the Coalition which are Civil Defence and Emergency and a Regional Tourism representative.

Regional Safe Community Network – Waitomo representatives participated in the inaugural Regional Network meeting in Hawera. This was a successful meeting that allowed for idea sharing and informal assessment of strategies currently in use. Future meetings have been planned.

National Forum Participation – The forum was a solid way to gain better understanding around the Safe Communities model, new approaches and to make connections.

Community Group Participation and Engagement - Identified pre-established links to service delivery providers, community groups and forums in the area. VSW has been introduced as a participant in collaborative service delivery at recently held meetings. More will be done as meetings and other opportunities to engage become available.



COMMUNITY ENGAGEMENT

Although VSW has been established for less than a year there are already established relationships in place within the community. These relationships will be invaluable as VSW develops to ensure that VSW stays connected through projected engagement and received engagement.

As part of the research for this application, relationships with service delivery agents were strengthened via face to face meetings.

During the meetings a series of questions were tabled around the programmes and services being provided. Anecdotal evidence was shared and noted. These links will continue to be vital to VSW if it is going to successfully facilitate a wide collaborative approach to service delivery. Annual planning meetings that assess any changes from the baseline established, whether through evidence from the programme or anecdotally, will be useful feedback for VSW.

It will be useful to engage with groups active in the area. This will increase the diversity of information feeding into VSW and the groups can act as a conduit for information to the community, for example Grey Power, Federated Farmers, Clubs and Hobby Groups to name a few.

There is also the possibility that volunteer organisations are delivering programmes and benefits that fit within the priority areas of VSW so making sure that those are noted and understood helps planning and implementation of further support.

To strengthen relationships with leaders of community groups, clubs and federations will be time consuming. As a starting point it will be important to invite representatives from groups and clubs to attend organised forums that introduces VSW and offer a structured way to share information and ideas. The forums should be held a few times a year. This would also give opportunity for surveys to be distributed to gain



feedback around safety perception and strategies in place to improve safety.

Open forums with a presentation on VSW in each community, at least once a year and open to all will be part of the community engagement process. This could be run as a series of organised meetings or simple drop in clinics that allows people to discuss concerns in an informal way.

There is a strong relationship in place with the Waitomo District Youth Council (WDYC). This relationship has already proved to be a huge asset, during the LTP 2018-28 consultation phase the WDYC chose to organise a submission on the Safe Community proposal. This took the form of a simple and effective survey of Secondary School pupils around perceptions of safety. Youth as a demographic have been identified as a particularly vulnerable group that would benefit from targeted support across all three settings.

The relationship and mana that the WDYC hold with their peers and throughout the wider community will be invaluable to VSW.

EVALUATION STRATEGIES

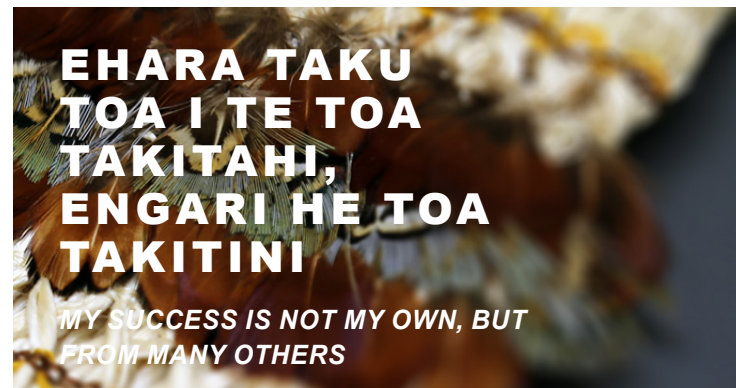
It will be advantageous to use a range of evaluation methods when assessing effectiveness of any strategy used to improve safety and reduce harm through VSW. There will be a range of strategies working over different time periods, demographics and across different settings. Assessing them and their effectiveness won't be a one size fits all process.

What will also need to be considered is the availability of baseline information to assist in the evaluation process. Through the research undertaken regarding the issues affecting Waitomo District residents it has been hard, and sometimes impossible to get information drilled down to Territorial Authority level. In some instances, due to the small sample size, figures could not be released except as amalgamated years, if at all. In some cases information was only available at a regional level or sometimes national level. There will be instances that the information pertinent to Waitomo District can be obtained by using as yet unfound channels.

The lack of local baseline data for certain priorities will mean that any gains made through an approach could be hard to see using national or regional data. In these instances either establishing a local baseline prior to the commencement of an approach or using more than one evaluation method will be helpful. Listed below are a range of evaluation tools that could be employed to assess effectiveness of strategies.

Results Based Accountability (RBA) is a simple framework that allows agencies to focus on outcomes to make positive change for communities. It is widely used by organisations and agencies funded by the Ministry of Social Development as a reporting format. As this tool becomes more widespread it will be a great way to share evaluation outcomes across agencies working within VSW.

RBA takes into account information from



other evaluation strategies to answer simple questions. As such it would be a useful tool for evaluating the progress VSW makes in the community. The basic premise of RBA is to be able to answer how much did we do? How well did we do it? Is anyone better off? A good resource for a more in depth explanation of RBA has been developed by the MSD and has been included in Appendix III.

Surveys are a good tool to gain standardised information around a topic or issue from a small or large group. There are many ways to approach surveying, anonymous or identifiable, standardised survey form to be completed individually or a question and answer session with groups or individuals where information given can be discussed and contextualised.

Surveys are a good tool in conjunction with other evaluation strategies as they offer a mood or feeling about a subject and are subjective. They are useful in assisting to form a baseline and would be a good starting point for further discussion.

Surveys can also be useful for relationship building as they are a way Agencies can work together to find out common information and feedback. Information gained from surveys can be used within the Results Based Accountability framework.

Story Telling This is a sound way of capturing unique experiences in a way that can be easily shared. Story telling has a strong history in almost all cultures as a way of imparting



information and sharing experience and learnings with others. Story telling is still an important part of Māori culture and as such it is valuable and experience (results) shared in this way are likely to resonate strongly within the community. Story telling can also be used within RBA.

Benchmarking is when results or outcomes are used as a comparison tool, either against other groups, areas, regions etc. This can be a useful tool to see where your results sit within a wider sphere but it should also be viewed in conjunction with a range of other information including area demography to aid in understanding the possible reasons behind the results.

Counts is a basic and useful way to measure a programme or project output. An almost inexhaustible range of aspects can be counted – number, age, ethnicity of participants, nature of participation, frequency and so forth. This can be a standalone evaluation strategy. Counts could also be fed in to RBA or used with other evaluation tools to create a wider evaluative view.

COMMUNICATION PLAN AND STRATEGIES

There are 3 communication streams to consider, each with different communication needs.

- The Waitomo District communities
- The Waitomo District Councillors and Council Staff
- VSW Regional Coalition



VSW Communication Overview



COMMUNICATION: WAITOMO DISTRICT COMMUNITIES

Outlined below are some key communication areas that will take priority for community communication.

- Introducing the concept of VSW and creating interest in it with the community
- Creating long term buy in from the community and keeping them updated
- Acknowledging assistance that we get on the way from community members and groups (where appropriate).

Key messages

This is a long term Council led project as part of a commitment through the LTP to work on place shaping and place making.

Increasing safety, especially for those most at risk and reducing fear of harm will be one of the foundations that VSW will lay in making the Waitomo District a safe and vibrant area to live, work and play in.

A safe community is one in which all sectors of the community work together to promote safety. This includes forming partnerships, managing risks, educating and informing and increasing overall safety in the community.

VSW will initiate valued and meaningful partnerships with those that have a vested interest in our communities and increased positive outcomes for those that live and work within its bounds.

Values for VSW to communicate externally:

- Transparency of systems
- Strong leadership
- Joined up collaborative approach
- People focused – respectful and holistic
- Community focused
- Sustainable approach to delivery

Getting the initial communication right will set the scene for ongoing communication and community engagement with VSW.

Through the launch of VSW and for the first year communication will need to be across a wide range of mediums and at regular intervals to establish VSW. Over time and with regular communication VSW will become well known and well regarded. At that point the communication plan can be further developed to be more targeted with new avenues of communication explored.

With this in mind it would be prudent for VSW to have its own identity so that any communication from VSW is instantly recognisable and makes it easy for people to stay connected and know where the messages/ information is coming from. This would also give quick recognition back to VSW if a social media post were to be shared or if a media article mentions VSW.

Community members will be able to link what they read and hear with something that they have seen and recognised locally. As VSW is looking to connect and support youth in particular, a social media presence will be required on Facebook, Twitter and Instagram.

Having a separate page on the WDC website would also mean that those not engaging with social media can still engage online. Establishing relationships with administrators of community group pages on Facebook would extend the reach of VSW posts.



Due to the number of homes without easy access to the internet, especially rurally, it will be important to continue with more traditional methods of communication such as regular updates in the local paper, the Waitomo News. Possibly using part of the pre-organised Waitomo Way page in the Waitomo News shows that having specific branding will help identify information that is different to Councils other business.

Holding a number of annual VSW “clinics” in each community will give those that cannot engage with other forms of communication through a language, literacy or health barrier a way to connect. It will also give VSW a pathway for direct community engagement. This allows a vital way for community members to communicate to VSW rather than just the other way round.

Communication should not be a one way street. Establishing efficient and effective communication channels need to be developed over the long term. Having someone available on the phone to talk about VSW at any given time is not going to be something that can be offered easily. Creating an online safety hub that forms part of VSW's webpage would act as a channel where people can raise safety concerns and offer feedback on any VSW associated programme or project using an Online form. People could volunteer to help, or leave ideas of how to make the District safer or feel safer. This gives a voice in real time to those who want to make a difference. It gives people a connection to VSW.

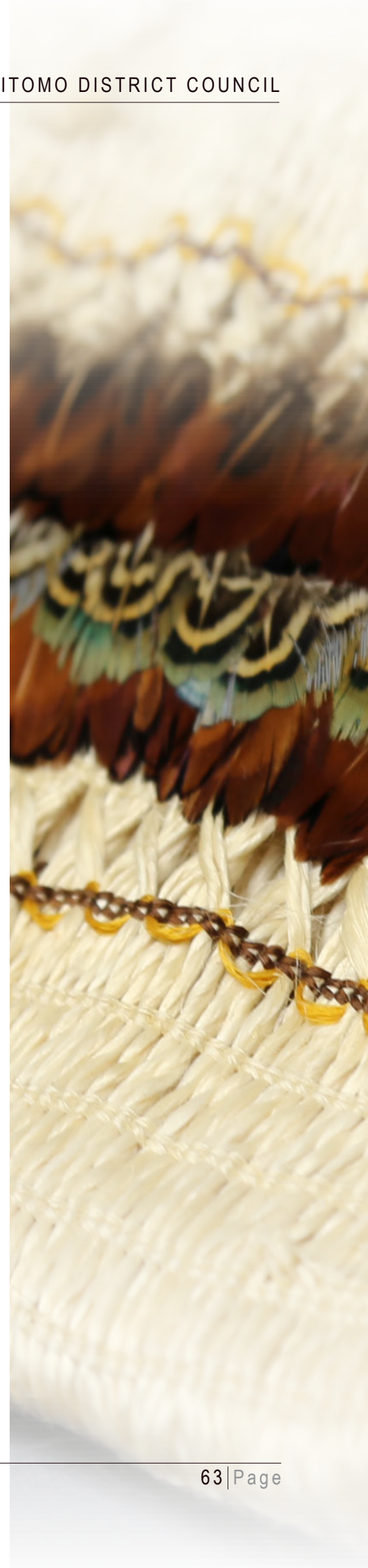
As part of the Hub an Activities Notice Board could be added. This would give people a reason to regularly visit the site.

Other avenues of communication, especially when targeting a certain demographic, would be school, early childhood centre and aged care facility newsletters.

Communication is a fluid notion and as such the plan and strategies around that plan need to develop and change with VSW. Getting the initial communication right is a high priority.

COMMUNICATION: WAITOMO DISTRICT COUNCIL AND COUNCIL STAFF

WDC have been the driving force behind implementing VSW, it is therefore important that Councillors are kept up to date of progress and made to feel part of the journey. It would be preferable that the bimonthly information that is shared with the Regional Coalition be adapted and presented to Council at Council meetings.



It is also important that Councillors and Council staff have the opportunity to be well informed about this Council initiative, ahead of any information being made public. This would aid staff buy in. Informing WDC staff prior to the external release of information gives time for anyone interested to ask questions and feel positive about VSW before it is officially launched to the wider community.

By drawing in WDC staff at the beginning a positive atmosphere around VSW can be nurtured, with possible natural VSW advocates created. It would be worth considering inviting staff to a rolling morning tea in a communal area that has information displayed about VSW.

Ongoing updates on VSW progress, media releases and so forth can be distributed using the staff Intranet.

Communication: The Regional Coalition

The Regional Coalition will meet approximately four times a year for a formal meeting. This will be a good opportunity to share VSW progress and discuss solutions to any roadblocks. On top of this it will be important to keep the Coalition up to date with projects being launched and to request any specific assistance around a member's particular field or area of expertise.

A bimonthly group email to keep the coalition updated and connected to VSW is advisable. This will allow for members to be fully informed before the formal meetings and keep them feeling as though they are an important part of VSW and that their time and input is bringing about action.

A group that is connected to the project is more likely to ask questions, offer assistance and bring more to the table as they will be able to see opportunities to add value.

On top of bimonthly group emails, the meeting agendas and minutes will also be distributed through the Regional Coalition and can be referenced in the future as required. If there are any significant developments, these should be emailed through to the Coalition.

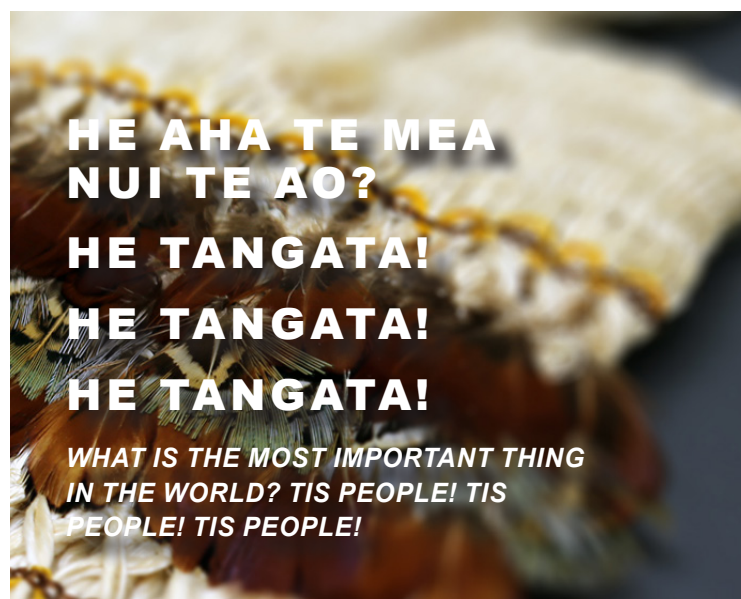
Communication on an individual basis from Coalition members will be encouraged as strong relationships at the Governance level will have a trickle down affect.

SHARED EXPERIENCE

Currently there are no other Safe Community Networks locally to connect with. However VSW has connected with a number of southern Safe Community Networks and a Regional Network has formed from that. The inaugural meeting was in November 2018 in Hawera with further meetings scheduled. It was a successful first meeting that allowed for idea sharing and informal assessment of strategies currently in use.

The 2018 Safe Communities Foundation National Forum was attended by the Community Development Coordinator. This proved to be a good way of making new connections and gaining a wider view of the Safe Community model.

VSW is in its infancy and as such has not yet benefitted from sharing experiences internationally. This is something that would be desirable to establish within the first 24 months of VSW as it could bring fresh perspective to our local safe community.



APPENDIX

APPENDIX I i



Waitomo District Youth Council 2018/19

Submission to the LTP

Thank you



- Not current rate payers
- Possible future in WDC
- Submissions – our voice
- Young People in OUR communities
- Proposals 1 and 2 - prioritised

To tātou reo ki tua



- Peers Voices
- Secondary Schools and Wharekura
- Option one of both proposal 1 & 2
- Three questions – inform WDYC position

Piopia College



- Principal, senior management support
- Full school assembly information.
- Lunch time survey with a sausage sizzle as an incentive
- WDYC supported students
- 70 students surveyed

Te Kuiti High School



- Principal, senior management support
- Meeting with TKHS student council
- Inform years 9, 10 and senior cohort separately.
- 207 students surveyed

Te Wharekura o Maniapoto



- Agreed plan with principal to engage senior taura
- Class room discussions on LTP process
- Class room discussion on the questions asked.
- 9 Students surveyed

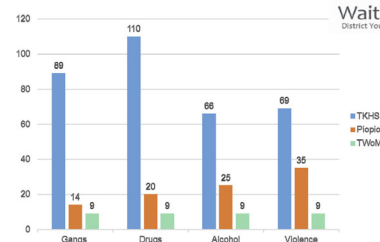
Proposal one - tick list



What are some of the concerns you have for yourself and other young people living in and around your rohe?

*Students were able to tick more than one

Feedback - 286 students



APPENDIX I i

Summary



- Drugs -140
- Violence -114
- Gangs - 112
- Alcohol 101

Peer pressure - 75 , Tagging 68, Money - 67, Mental health - 59, School exams - 47, Food insecurity - 41, Finding work - 40, Family expectations - 40, Housing - 36, Relationships - 35, Transport - 33.

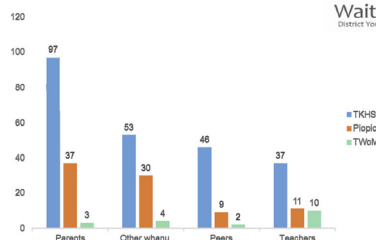
Proposal one - tick list



Where would you go to get support when dealing with issues

*Students were able to tick more than one

Feedback



Summary



- Parents - 137
- Other whānau - 87
- Peers - 57
- Teachers - 50

Proposal two - yes or no?



Council provide funding for Double court indoor gymnasium, multipurpose indoor space with a commercial fitness center

286 - Yes or No ?



Yes

No

- Piopio – 69
- TKHS – 194
- TWoM – 8

- Piopio – 1
- TKHS – 13
- TwoM – 1

Total = 271

Total = 15

Summary



Yes vote - 271

No vote - 15

"Visiting teams have laughed at our gym – we need a new one"

"Spend the \$ on cleaning our water & swimming holes"

"We could host regional tournaments – less travel"

"Address homelessness instead"

"I don't actually mind either way"

"Our gym is perfectly fine the way it is"

To tātou reo – ki Tua



The Waitomo District Youth Council advocates for better Safety Measures for young people with a focus on improved facilities and outcomes

Our voice - your future

APPENDIX I ii

Vibrant Safe Waitomo Regional Coalition

Terms of Reference

Purpose

Achieving community safety involves building strong, cohesive, vibrant and participating communities. A safe community is one in which all sectors of the community work together to promote safety. This includes forming partnerships, managing risks, educating and informing and increasing overall safety in the community.

Vibrant Safe Waitomo aims to improve the quality of life of the Waitomo community and visitors to the district through its actions.

The purpose of the Regional Coalition is to enable a cross disciplinary approach to delivering increased positive safety outcomes for those that live and work within our communities.

The Regional Coalition will achieve this through ongoing leadership and governance of Vibrant Safe Waitomo to ensure a coordinated approach is taken in the delivery of services and contracts within our communities.

Vision

To create safe and vibrant communities where people want to live, work and do business.

Mission

To initiate valued and meaningful partnerships with those that have a vested interest in our communities and increase positive outcomes for those that live and work within its bounds.

Values

- 1) Transparency of systems and processes
- 2) Strong leadership
- 3) Joined up - collaborative approach
- 4) People focused - respectful and holistic
- 5) Community focused
- 6) Sustainable approach to delivery

Scope

Priority sectors that support the promotion of safety in order to reduce harm and injury include, but are not limited to:

- 1) Drug and Alcohol Programmes
- 2) Workplace Safety
- 3) Crime Prevention
- 4) Education and Employment
- 5) Transport and Roads
- 6) Urban Safety
- 7) Positive Early Intervention
- 8) Environment - Built and Natural
- 9) Home Safety
- 10) Public Health

Membership

The Vibrant Safe Waitomo Regional Coalition will comprise, but not be limited to:

- 1) Waikato District Health Board
- 2) Accident Compensation Corporation
- 3) New Zealand Police
- 4) Ministry of Education
- 5) Fire and Emergency New Zealand
- 6) Maniapoto Maori Trust Board
- 7) Ministry of Social Development
- 8) Oranga Tamariki Ministry for Children
- 9) Health Promotion Agency
- 10) Waikato Regional Council
- 11) Integrated Safety Response
- 12) Representative for MP for Taranaki-King Country
- 13) Waitomo District Council

Coalition Roles and Responsibilities

The Vibrant Safe Waitomo Regional Coalition is responsible for:

- 1) Providing regional political support
- 2) Provide sector knowledge and be able to make decisions on behalf of the agency they represent
- 3) Providing sector knowledge to support the positive implementation of Vibrant Safe Waitomo
- 4) Contribute to local, regional and national discussions about Waitomo community safety, injury and crime prevention needs
- 5) Providing feedback on issues, concerns and data collection
- 6) Providing feedback on reports including the Accreditation Report
- 7) Supporting stakeholders and local contractors to enable successful delivery of programmes
- 8) Maintaining at all times the focus of the Coalition on the agreed scope, outcomes and benefits
- 9) Implementing and measuring the objectives and strategies of the strategic plan
- 10) To advocate and support those organisations operating in the field, at a local level, providing a range of support services

The membership of the Vibrant Safe Waitomo Regional Coalition will commit to:

- 1) Fostering collaboration
- 2) Having a sound understanding of the Vibrant Safe Waitomo work plan
- 3) Attending all scheduled Coalition meetings (approximately four per year). In the event a member is unavailable to attend a scheduled meeting, the member will arrange for a Proxy to attend
- 4) Wholeheartedly championing the Vibrant Safe Waitomo approach
- 5) Sharing all communications and information across all Coalition members
- 6) Notifying members of the Coalition, as soon as practical, if any matters arise which may be deemed to affect the delivery of the Vibrant Safe Waitomo approach
- 7) Be available to attend and participate in accreditation process and ceremony
- 8) Treating sensitive material discussed in meetings with respect and confidence

Responsibilities - Operational

Waitomo District Council is responsible for:

- 1) Building on existing services and networks in a manner that meets local needs
- 2) Promotion of Vibrant Safe Waitomo activities at a national level
- 3) Contributing to the development of opportunities for collaborative projects under the umbrella of Vibrant Safe Waitomo

Coalition Meetings

The Vibrant Safe Waitomo Regional Coalition will meet quarterly. If required, additional meetings will be arranged outside of these times.

- 1) Meetings will be held in the Waitomo District Council Chamber
- 2) Waitomo District Council will provide secretariat support
- 3) The quorum for the Coalition meetings is 6 members
- 4) Meetings will be chaired by Mayor Brian Hanna

Decision Making

All decisions must be proposed for approval by a member of the Coalition and seconded by another. Once a decision has been proposed the Coalition will reach final decision by way of verbal consensus.

Where there is no decision by consensus the Chairperson may call for a show of hands or other such method to count votes for and against. In such cases the Chairperson should consider what changes could be made to the recommendations to ensure a consensus decision, including deferring the decision to allow for further considerations at a later meeting.

Conflicts of Interest

A conflict of interest could arise if a member's duties or responsibilities to the Vibrant Safe Waitomo Regional Coalition were affected by some other entity or duty which the member may have.

On an on-going basis, each member must disclose any conflict or potential conflict of interest to the Chairperson and follow directions of the Chairperson to manage the relevant conflict.

Review of Terms of Reference

This Terms of Reference will be reviewed annually. The first review is due in March 2020.

Once adopted this Terms of Reference may only be amended, varied or modified after consultation and in agreement with the Vibrant Safe Waitomo Regional Coalition members.

As a member of the Vibrant Safe Waitomo Regional Coalition I have read, understood and agree to the Terms of Reference above.

Name: _____

Position: _____

Date: _____

APPENDIX II i

Appendix II i Priority Setting Analysis and Trends

Crime – was split into three categories offenders, victimisations and family violence. Publicly available police data was analysed using amalgamated data for time period of July 2014 – November 2018. Where available Waikato data was used and was analysed against regional Waikato and Waikato District data as the Waikato Police District is bigger than the region and smaller than the District. Where possible Waikato data was compared to national data to see if the Waikato followed national trends which it did. Population demographic figures were sourced from the 2013 census.

Key:

For general victimisations/offender numbers within an age range

0-1300 Green

1300-3400 orange

3400 and above red

Dark red shows the highest number within across the age range.

For family harm incidents

0-149 incidents green

150-349 orange

400 and above is shaded red.

When looking at age, gender and ethnicity of victims and offenders it was only possible to do this at a national level. Data in that instance was contextualised using national demographic data using 2013 Census figures. Having analysed the data to see if Waikato followed national trends it is possible to suggest that it would follow similar trends for the ethnicity and gender across the ages.

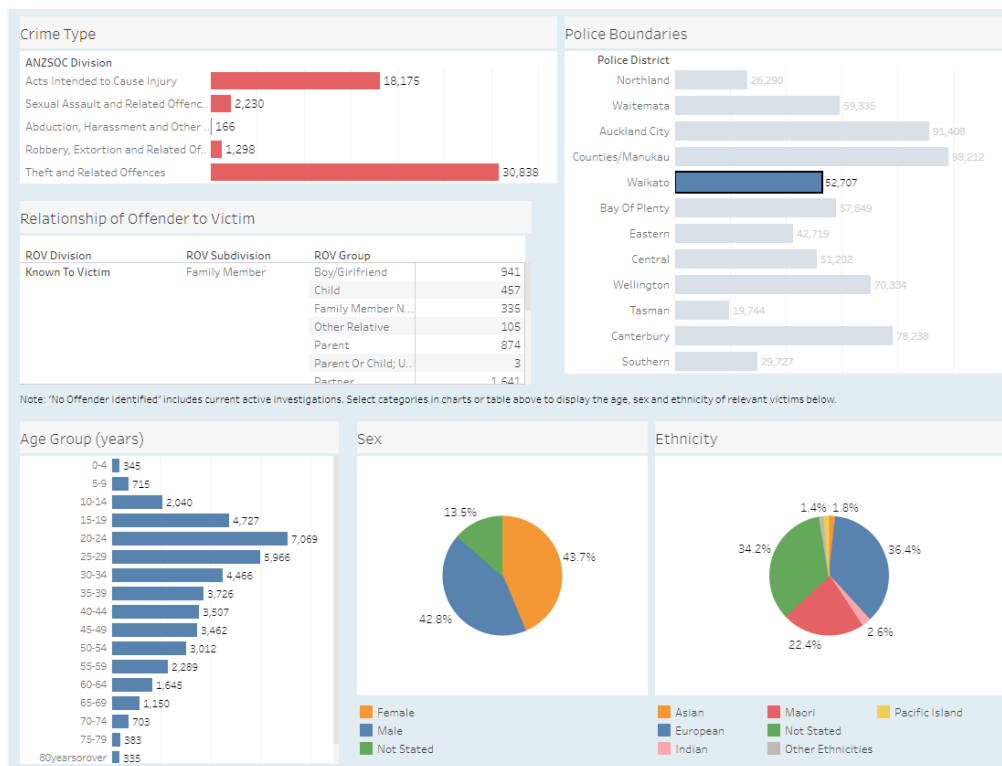
When viewing the ethnicity section for victims and offenders there is an overview for each ethnicity that plots the volume of incidents. From that it is possible to see at what ages there are most victims or offenders and the gender/age breakdown shows whether that age and ethnicity is over represented using national statistics from the 2013 census.

- Green is under represented – proportional representation,
- Orange- slightly over represented for ethnicity population size,
- Red- highly over represented.

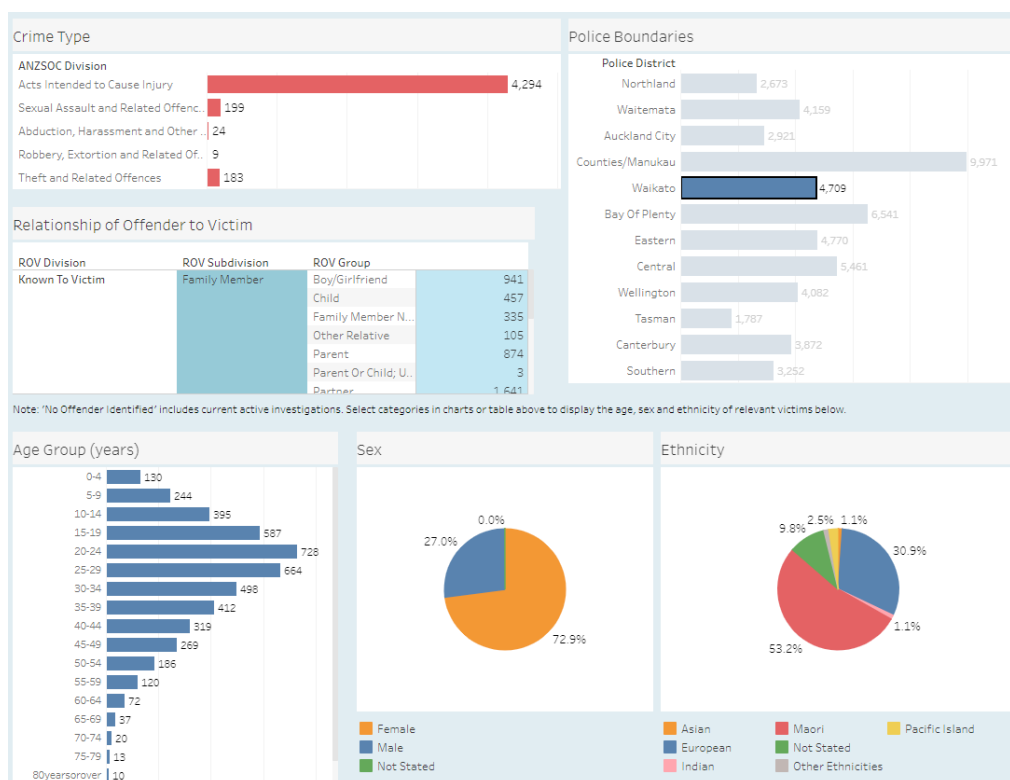
Each ethnicity has been treated in isolation. Volume of victims and offenders are a reflection on that ethnicity only and its proportional size.

For National victimisations - <http://www.police.govt.nz/about-us/publications-statistics/data-and-statistics/policedatanz/victimisations-demographics> tab demographics

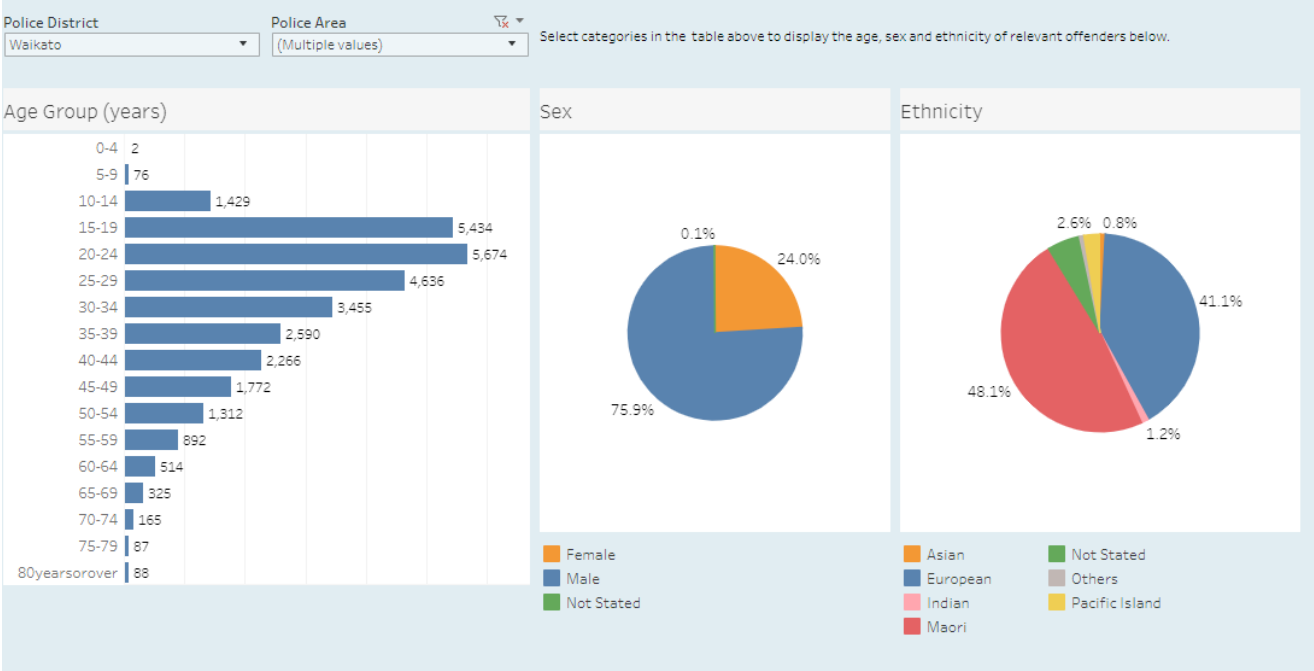
For national proceedings (offender demographics) - <http://www.police.govt.nz/about-us/publications-statistics/data-and-statistics/policedatanz/proceedings-offender-demographics> tab demographics.



Victimisation data filtered for Waikato policing District <http://www.police.govt.nz/about-us/publications-statistics/data-and-statistics/policedatanz/victimisations-demographics>



Family Harm victimisations filtered for the Waikato Policing boundaries <http://www.police.govt.nz/about-us/publications-statistics/data-and-statistics/policedatanz/victimisations-demographics>



Offender proceedings filtered for the Waikato Policing boundaries. <http://www.police.govt.nz/about-us/publications-statistics/data-and-statistics/policedatanz/proceedings-offender-demographics>

Reported accident claims -this data was combined for the Waitomo District for the years 1st July 2013 to 1st June 2015. The population of the Waitomo District is relatively small, by using amalgamated data trends were easier to pick up on and any unusual events in any particular year were softened by the use of other data around it. It also meant the data had less gaps in as there were less groups that had less than three accidents. The data was supplied by ACC and was contextualised against Waitomo population and workforce data from the 2013 census.

Rate of injury per person of population (ppp) within each age group for each setting was calculated. Green was a rate/ppp of 0- 0.13, orange was 0.14- 0.21 red was 0.22 and above.
Scale used so that trends in other setting apart from home and recreation could be seen as injury rates for the red areas for home didn't drop below a rate of 1.08. For recreation the red areas were 0.46- 0.24.

For claim frequency rate within an age group per head of population using census 2013 figures and plotted on the matrix as up to 1.49 green 1.5-1.99 orange, 2 and above red.

For comparison data ACC figures per 100k of population for the whole of NZ and for Waitomo were used.

Injury Data - Non fatal injuries discharged from hospital data was supplied by Injury Prevention Research Unit (IPRU) and was for the Waitomo District. Although Waitomo average rate/100,000 for non-fatal injuries sits above the national rate for 2017 (and for years 2012-2016), the numbers involved are small it was again necessary to use amalgamated years to be able to see trends.

Non-fatal injury occurrence 2012-2016 plotted after calculating the number of injuries at a rate of occurrence for that age group of the Waitomo population. 0- 0.03 green, 0.04- 0.05 Orange 0.06 and above red.

Non-fatal Injuries by ethnicity for Waitomo 2012-16

0-1.4% of population green,

1.5-2% of population orange

2.1% and above of population red

Non-fatal Injuries by gender for Waitomo 2012-16

0-4.99 % of population within age group

5- 9.99 % of population within age group

10% and above of population within age group

The top injury cause for each age group was plotted in red on the matrix (where more than one cause had the same top value then more than one cause was coded red). The next four top causes were plotted in orange as long as the value was above 1, everything else was coded green for each age group

Injury as a leading cause of hospitalisation and death nationally was plotted using red when injury was the within the top 2 causes of death or hospitalisation and orange used when injury was the third – fifth cause of death or hospitalisation. Information from data from Injury prevention research unit fact sheet 43 (1 July 2010-30 June 2015) <https://psm-dm.otago.ac.nz/ipru/FactSheets/FactSheet43.pdf>

Falls <https://bpac.org.nz/BPJ/2014/March/docs/BPJ59-upfront.pdf>

Fatalities Data – the number of fatalities due to injury was 6 using the most up to date year available. This puts the Waitomo District above the national average per 100,000 of population. Cause of death was 2 from falls, 2 from firearm usage, 1 struck by or against and 1 suffocation. These have been plotted on the matrix but with so few numbers a trend is hard to see.

Injury data was provided by:

de Graaf B. Customised Enquiry: ipru.statsenquiry@otago.ac.nz. Injury Prevention Research Unit, Department of Preventive and Social Medicine, University of Otago, New Zealand; 2018.

Suicide data - Sourced from Ministry of Justice Coronial Services, annual provisional suicide statistics for deaths reported to the coroner between 1 July 2007 and 30 June 2018. <https://coronialservices.justice.govt.nz/assets/Documents/Publications/2017-2018-Annual-Provisional-Suicide-Statistics-Final.pdf>

Secondary source media article quoting information from an OIA request. <https://www.stuff.co.nz/business/farming/107671865/call-for-new-approach-to-rural-mental-health-in-wake-of-latest-rural-suicide-statistics>

National suicide rate and gender rate key used in matrix

10/100k population green, 11-16 / 100k of population orange, above 16/ 100k of population red. Over 30/100k is dark red.

Ethnicities figures as a rate /110k under 10/ 100k green 11-16/100k orange above 16/110k red.

For Māori figures by age was in numbers not rate key for matrix

0-4 green, 5-10 orange, 11 and above red. Number of Māori suicides for June 17 to July 2018 is 142. Total for year 668.

The split showing Māori male and female are again in numbers rather than rate with 0-4 green, 5-10 orange, 11 and above red. Above 18 is dark red

As a percentage 21.25% nationally Māori 14 % of population so over represented. If split male female, male almost double female.

5th highest region = Waikato District health board.

Obesity- the information around obesity was sourced from the New Zealand Health survey 2017/2018 by the ministry of health.

Obesity definition for children aged 2–14 years - a BMI equivalent to an adult BMI of 30 (or greater).

Obesity definition for 15 and above - BMI of 30.0 or greater (or International Obesity Task Force equivalent for 15-17 years)

https://minhealthnz.shinyapps.io/nz-health-survey-2017-18-annual-data-explorer/_w_4fcf5764/#!/explore-indicators

Green 0-10 % of population in age group Obese

Orange 10-20 % of population in age group Obese

Red above 20% of population in age group obese

Drug and Alcohol related harm – When researching these areas most statistics and papers were written at a national level. For the purpose of this research I have used information from alcohol.org.nz and The New Zealand drug harm index 2016. Due to their formats it was not possible to transpose all the information into the matrix.

Statistics used in the life course matrix were sourced from the New Zealand Health survey 2017/2018 by the ministry of health for smoking and hazardous drinking. Results for illicit drug use were not available for 2017/18 so 2016/17 was used...

- Green 0-10 % of population in age group hazardous drinkers/ smokers/cannabis users
- Orange 10-20 % of population in age group hazardous drinkers/smokers/cannabis users
- Red above 20% of population in age group hazardous drinkers/smokers/cannabis users
- Dark red above 30% of population in age group hazardous drinkers/smokers/ cannabis users

The percentages of population using amphetamines was 2% or less for all age groups hence the different scale to show usage trend

- Green 0 - 0.5% of population in age group use amphetamines
- Orange 0.6 – 1.5% of population in age group use amphetamines
- Red 1.6% and above of population in age group use amphetamine

Education

Statistics used were derived from the Waitomo TLA Pathways and Employment Plan supplied by the Ministry of Education. The document was dated October 2018.

Fire and Emergency data – Supplied through the Regional Fire and Emergency Office

Count of Incident Type Group Name				
	Column Labels			
	2016	2017	2018	Grand Total
Row Labels				
Benneydale	22	28	32	82
Assist Public	2	3	1	6
False Alarm	1	2	2	5
Heat/Pressure	1			1
Medical	4	1	3	8
Not Recorded			1	1
Other Fire	2	2		4
Rescue	2			2
Special Service Calls	4	6	3	13
Structure Fire		1	1	2
Vegetation Fire	1	4	2	7
Vehicle Accident	5	9	19	33
Mokau	25	27	22	74
Assist Public		1	3	4
False Alarm		1		1
HAZMAT		1		1
Medical		2	7	9
Not Recorded	9	3		12
Other Fire	1	3	1	5
Rescue	6	6	1	13
Structure Fire		2	2	4
Vegetation Fire	4	1	1	6
Vehicle Accident	5	7	7	19
Piopio	40	37	54	131
Assist Public		2		2
False Alarm	4	2	4	10
Medical	5	3	6	14
Not Recorded	1	1	1	3
Other Fire	1	2	3	6
Rescue	2			2
Special Service Calls	6	4	4	14
Structure Fire	1	1		2
Vegetation Fire		1		1
Vehicle Accident	20	21	36	77
Te Kūiti	106	112	99	317
Assist Public	3	2	3	8
False Alarm	31	35	22	88
HAZMAT	3	2	2	7
Heat/Pressure	1	1	1	3
Medical	19	20	22	61
Not Recorded			1	1
Other Fire	14	12	14	40
Rescue	3	2	1	6
Special Service Calls	13	13	2	28
Structure Fire	9	11	10	30

Count of Incident Type Group Name				
	Column Labels			
	2016	2017	2018	Grand Total
Vegetation Fire	7	10	2	19
Vehicle Accident	3	4	19	26
Grand Total	193	204	207	604
Count of Fire Cause Group Name	Column Labels			
Row Labels	Benneydale	Mokau	Piopio	Te Kuiti
Unattended cooking				10
Short circuit, earth fault			1	4
Unlawful			1	3
Lawful				4
Undetermined		1		3
Other electrical failure		1		2
Exposure fire				1
Installation deficiency	1			
Unable to classify		1		
Information not recorded				1
Rekindled from previous fire, Re-ignition			1	1
Lightning	1			
Combustible placed too close to heat source	1			1
Mechanical failure, malfunction - Other				1
Grand Total	2	4	2	30

APPENDIX III

EFFECTIVE STRATEGIES

Smallman, E (2019, March 10). Plan to unleash 'thousands of jobs', millions in investment in Southern Waikato. Retrieved from Stuff article
<https://www.stuff.co.nz/national/110924886/plan-to-unleash-thousands-of-jobs-millions-in-investment-in-southern-waikato>

Shared Learnings

Ministry of Social Development (2017) Results Based Accountability: Guidelines and resources-updated 2017. Retrieved from
<https://www.msd.govt.nz/documents/what-we-can-do/providers/rba-guidelines-updated-2017.pdf>