



New Plymouth District

*Application for Re-Designation as an International Safe Community
of the World Health Organisation Collaborating Centre on Community Safety*



Table of Contents

Dedication to Dr Alan Parsons	7
Message from the Mayor	8
Message from the Chair of New Plymouth injurySafe Trust.....	9
Acknowledgements.....	10
Welcome to our Safe Community.....	11
About New Plymouth.....	12
Our Journey	14
Criteria One	16
Leadership and Coordination in New Plymouth District	16
Safe Community Coordination	17
New Plymouth's Safety Networks.....	19
INJURY PREVENTION.....	20
Falls Prevention.....	20
Taranaki Falls Prevention Strategy Group.....	20
Suicide Prevention.....	20
Taranaki Suicide Prevention Coordination Group	20
Child Injury Prevention	21
Kidsafe Taranaki Trust	21
Water Safety	21
Taranaki Regional Water Safety Group.....	21
Workplace Injury Prevention.....	21
Taranaki Construction Safety Group.....	22
Taranaki Health & Safety Leadership Forum.....	22
Family Violence	22
Taranaki Safe Families Collaborative	22
Alcohol.....	23
New Plymouth District Alcohol Strategy Group.....	23
Youth Access To Alcohol (YATA).....	23

Road Safety	23
Roadsafe Taranaki.....	23
Road Safety Action Planning (RSAP) Group.....	24
Crime Prevention.....	24
Police Liaison Working Party	24
Community Development Team (Crime Prevention Portfolio).....	24
North Taranaki Neighbourhood Support.....	25
Emergency Management.....	25
Civil Defence Emergency Management (CDEM) Group.....	25
Criteria Two.....	26
Main environments, safety issues and population groups that are covered by our safe community programme.	26
Falls Prevention.....	28
Case Study 1 – Child Falls Prevention Project.....	33
Case Study 2 – Community Tai Chi Classes.....	34
General Home Safety	34
Home Safety	35
Case Study 3 – Paracetamol Poisoning Prevention Project.....	39
Case Study 4 – Taranaki Business House Safety Challenge	40
Workplace Safety	41
Case Study 5 – Trades Apprentice Safety Challenge.....	45
Case Study 6 – Taranaki HSE Centre	46
Leisure Safety	47
Case Study 7 – AWE & NPDC Water Safety in Schools Programme.....	50
Case Study 8 – District Council Playground Audits.....	51
Road Safety	52
Case Study 9 – Grim Reaper Intersection Campaign	59
Case Study 10 – Kids Involved in Driving Down Speed (KIDDS).....	60
Crime Prevention	61
Case Study 11 – Community Mural Project	67
Case Study 12 – CPTED analysis and re-design of Sir Victor Davies Park.....	68
Alcohol	69
Case Study 13 – New Plymouth District Alcohol Strategy.....	73
Case Study 14 – Professional Training for Licensed Premises.....	74
Suicide Prevention.....	75
Case Study 15 – Applied Suicide Intervention Skills Training (ASIST).....	80
Case Study 16 – Touched By Suicide Support Group	81

Family Violence.....	82
Case Study 17 – Family Violence is not OK Campaign	85
Case Study 18 – Family Challenge Fun Days	86
Criteria Three	87
High Risk Environments:	87
High Risk Population Groups:	88
Home Safety	89
Case Study 1: Preventing Falls in Older People – Kaumatua Wellbeing Days.....	89
Case Study 2: Preventing Child Falls in Lower Socio-Economic Groups – Better Homes Safer Children & Marfell Home Safety Project.....	90
Workplace Safety	91
Case Study 3: Taranaki Secondary Schools Agricultural Safety Challenge.....	91
Case Study 4: Construction Managers Breakfast Forum.....	92
Road Safety	93
Case Study 5: Ferndene Off-Road Project	93
Case Study 6: Ready2Drive Road Safety Expo.....	94
Recreational Safety.....	95
Case Study 7: When The Wheels Fall Off	95
Case Study 8: Parent Pack – Tools for the Teenage Years.....	96
Case Study 9: WAVES Creative Youth Holiday Programme.....	97
Criteria 4.....	98
Community Injury Prevention Needs Assessment.....	99
Injury Statistics for New Plymouth District.....	100
Deaths from Injury.....	101
Hospitalisations for Injury.....	101
Emergency Department Attendances for Injury	101
ACC Injury Claim Statistics	102
Coroner’s Suicide Data	102
Police Statistics.....	102
Family Violence Statistics for New Plymouth.....	102
Road Traffic Crash Statistics	103
Criteria 5.....	104
Measuring our Effectiveness	104
Limitations of Injury Data	105
Summary of Evaluation Findings.....	106
Case Study 1 – Programmes to Reduce Falls in Older Adults	107
Figure 1 - Public Hospitalisation for Falls by People Aged 60 and Over	107

Figure 2 - ACC New Entitlement Claims for Falls by People Aged 65 and Over	108
Case Study 2 – Programmes to Reduce Falls among Children aged 0-4 years	110
Figure 3 - Public Hospitalisation for Falls by Children Aged 0–4.....	110
Case Study 3 – Programmes to Reduce Unintentional Poisoning in Children	112
Figure 4 - Hospitalisations for Unintentional Poisoning of Children Aged 0–4 as a percentage of total unintentional injury hospitalisations	112
Case Study 4 – Programmes to Reduce Transport Injuries	114
Figure 5 - Public Hospitalisation for Transport Injuries.....	114
Case Study 5 - Reducing Workplace Injuries	117
Figure 6 – ACC New Entitlement Claims for Workplace Injuries (people aged 10+ years)	117
Figure 7 – Total Number of ACC Claims (all claims) for Workplace Injuries by high risk industry	118
Case Study 6 – Programmes to Reduce Suicide	121
Figure 8 - Public Hospitalisation for Suicide / Self Harm	121
Case Study 7 – Programmes to Reduce Crime & Violence.....	123
Figure 9 – Annual Recorded Offences in New Plymouth District, five year trend: 2005-2009	123
Figure 10 – Graffiti Vandalism offences reported to New Plymouth District Council (2004-2008)	125
Figure 11 – Graffiti Vandalism offences reported to New Plymouth District Council (2007/08) linked to GV related projects	127
Case Study 8 – Programmes to Reduce Family Violence	129
Figure 12 - Protection Orders Filed.....	129
Figure 13 - Police Apprehensions for Minor Common Domestic Assaults.....	130
Figure 14 – Findings of telephone survey to determine public awareness of family violence prevention initiatives.....	131
CRITERIA 6	133
Contribution to national and international newsletters and publications.....	133
Attendance at Safe Community Networking Events	134
Involvement in Safety Conferences	134
Support and Informal Mentoring for other Safe Communities	135
Sharing Information.....	135
National Awards	136
International Recognition.....	137
International Recognition – and time to say Goodbye.....	138
Looking to the Future.....	139
New Plymouth District Safe and Secure Community Strategy 2010-2020	139
Community Safety Strategy Action Plan and Goals.....	140
Evaluating the Strategy	140
Appendix One – NPIS Strategic Plan 2008-2011.....	141
Appendix Two – Selection of Media Articles	143

Dedication to Dr Alan Parsons

The members of New Plymouth injurySafe Trust have dedicated this re-accreditation application to the memory of Dr Alan Parsons, who died on 9 February 2010



Alan's contribution and commitment to child injury prevention has spanned many decades through his involvement as a Trustee with New Plymouth injurySafe (NPIS) and Chair of Kidsafe Taranaki Trust, as well as his contributions to strategic safety policy development at a national level. Alan was often visible at national meetings, conferences and events as well as supporting local Kidsafe Taranaki and NPIS projects and activities.

Despite Alan's busy role as Head of Paediatrics for Taranaki District Health Board he had an incredible ability to utilise every hour in the day to best effect – as well as his relentless support of injury prevention at the local and national level, he travelled widely, played the saxophone, raised Highland cattle and pursued a keen interest in astronomy...not to mention regular trips to Vietnam where he played a vital role in training health workers and promoting child health.

Alan moved to New Zealand from the UK in 1983 to continue his career as a paediatrician at Taranaki Base Hospital. It was Alan's experience as a paediatrician that sparked his interest in reducing unintentional injury to children and which led to the formation of the Child Accident Prevention Group, now known as Kidsafe Taranaki Trust. However, Alan's commitment to injury prevention and community safety went far beyond his work with Kidsafe Taranaki. Alan was part of the original IPNANZ (Injury Prevention Network Aotearoa New Zealand) committee and sat on the NZIPS (New Zealand Injury Prevention Strategy) stakeholder reference group. Alan was also a Trustee with New Plymouth injurySafe Trust, supporting the coalition to gain accreditation for New Plymouth as an International Safe Community in 2005.

Alan received numerous professional awards during his career. One of those that he most cherished was the IPNANZ Te Manaia Leadership Award that he received in 2007 in recognition of his many years of service to child injury prevention in New Zealand.

Alan is remembered for his true leadership in the field of child health and injury prevention and for his integrity, passion, enthusiasm and humour. He was a humble and respectful man who was a pleasure to work with. He has been described as having the true mark of a Rangatira - a leader whose strength is weaving people together.

Many of the tributes that came in after Alan's death recognised the real difference that he made in individual people's lives. We would like to quote the words of Carolyn Coggan, Director of Safe Communities Foundation NZ:

"Alan gave so much to children; to improving health in New Zealand and Vietnam; to injury prevention, community safety, NZIPS ... and all with a wonderful sense of humour! I have truly appreciated all of his outstanding and amazing contributions. There are some people in this world who think they make a difference and then there are those who truly make a difference in the lives of so many people. Alan made a BIG difference in a respectful way to many of us. We will indeed miss this intelligent and caring man".

Alan has laid a solid foundation for us all to follow, and it is this foundation on which our application for re-accreditation is based.

Message from

Mayor Peter Tennent
New Plymouth District



I am extremely proud to support New Plymouth's application for re-accreditation as an International Safe Community.

Our community has identified "Secure and Healthy" as one of seven community outcomes at the heart of our Long Term Council Community Plan (LTCCP). This means our community values a district that provides a safe, healthy and friendly place to live, work or visit. We want our residents and visitors of all ages to feel safe, and we want to see crime reduced. We also want the environmental, physical and mental health of the people of Taranaki to be maintained, enhanced, promoted and protected. These community outcomes are important because they demonstrate what our community say is important for its wellbeing and its vision for the future, and consequently they influence every aspect of how our Council organises its resources and activities.

The philosophy and core values that underpin the Safe Community Foundation of New Zealand reflect our own. We believe that safety is a fundamental human right and that everybody has a responsibility to promote and maintain their safety, and the safety of others. We also believe that people are at the heart of making communities safer places in which to live, work, learn, travel and play. By working together, the whole community ensures that our district remains a safe and secure place to live.

Under the excellent leadership of the New Plymouth injurySafe coalition, our district continues to lead the development of creative and innovative community safety programmes. Many of these initiatives have been picked up and implemented across other regions within New Zealand and we remain committed to sharing our ideas and our learning with other communities around the world.

Since becoming accredited five years ago, we have continued to grow and develop as a Safe Community. We have celebrated some notable achievements, many of which are highlighted within this application.

As we prepare for re-accreditation, we acknowledge that the challenges we face as a community are somewhat different to those we faced five years ago. There are changes taking place throughout many public sector environments, notably police, councils and health, with considerable shifts in policy, structures and funding. This offers both opportunities and challenges for the local community. I am confident that our Council and our Community will embrace these and continue to develop a community safety programme that, as expected in Taranaki, is truly *Like No Other*.

A handwritten signature in black ink, appearing to read 'Peter T.', with a stylized flourish underneath.

Mayor Peter Tennent

Message from

Andrew Judd
Chair of New Plymouth injurySafe Trust



On behalf of the New Plymouth injurySafe Trust I would like to express our pride at reaching the milestone of our first International Safe Community re-accreditation.

As a Trust it has been a great pleasure to, once again, coordinate the application process for re-accreditation as an International Safe Community. This has provided a fantastic opportunity for us to learn even more about the valuable injury prevention and community safety activities that are happening around our district.

We have seen some significant achievements over the last five years, and many of these are presented in detail as case studies throughout our application. In preparation for our re-accreditation we have supported two initiatives that are directly linked to the re-accreditation process and which should be viewed in conjunction with this document.

The first of these is the launch of our new Safe Community website www.safetaranaki.org.nz which documents the range of safety groups and networks across our community, the activities that they are involved in and a variety of multi-media resources that support and promote their work.

We have also been working with the New Plymouth District Council and wider community representatives on the development of a broad, overarching Community Safety Strategy for New Plymouth District. The development of this strategy recognises how far the district has come since becoming accredited as a Safe Community in 2005. It provides a framework for the New Plymouth District's policies and activities relating to community wellbeing. It is based on extensive data, research and evidence of best practice and has incorporated feedback following consultation with key stakeholders to ensure that it aligns with strategic partners' plans and priorities.

The Safe and Secure Community Strategy 2010-2020 establishes the community's vision for maintaining and enhancing New Plymouth District as a safe place to live, work and visit. It brings together existing strategies and partnerships in a way that enhances their ability to be effective and reduces duplication and missed opportunities.

As we look forward, it is important to remember those before us who have been instrumental in our achievements to date. In particular, I would like to acknowledge Dr Alan Parsons who died early this year. As a founding member of New Plymouth injurySafe in 2001, Alan demonstrated immense passion and enthusiasm in his role as a trust member, and was instrumental in us achieving accreditation as an International Safe Community in 2005. I would also like to acknowledge the many years of support that our Trust, and our community, received from Inspector Fiona Prestidge who left her role as Area Commander of New Plymouth Police earlier this year to take up a new role in Wellington. Similarly we would like to thank previous District Councillor, Barry Finch, for his commitment and leadership on the Trust until the end of his term in 2007.

I would also like to thank current and past members of New Plymouth injurySafe Trust and the many others within our community who play an active role in ensuring our community remains a safer place to live, work and visit. This application serves as a reflection of the enthusiasm and commitment they share with our community.

Acknowledgements

New Plymouth injurySafe Trust would like to acknowledge the commitment, contribution, expertise and enthusiasm of our core partners towards our district's Safe Community programme...



- Accident Compensation Corporation
- Kidsafe Taranaki Trust
- New Plymouth District Council
- New Plymouth Police
- Taranaki District Health Board
- New Zealand Fire Service
- Department of Labour
- Tui Ora Limited
- Taranaki Primary Health Organisations (Peak Health Taranaki, Hauora Taranaki PHO, Te Tihi Hauora O Taranaki PHO)

We would like to extend further appreciation to those Trust partners who continue to support New Plymouth injurySafe with funding for our Safe Community programme. In particular, Accident Compensation Corporation , New Plymouth District Council and Taranaki District Health Board.

In addition we would like to thank those members of our wider safety coalitions and networks including the Taranaki Safe Families Trust, Roadsaf Taranaki, Youth Access to Alcohol (YATA), Taranaki Construction Safety Group and the many other local networks who play such an active role in developing and implementing safety promotion initiatives throughout our community.

We would like to acknowledge the many years of encouragement and practical support that we have received from the Safe Communities Foundation New Zealand (SCFNZ) team. Your wisdom and guidance is always welcomed and valued.

Finally, we would like to extend a special thanks to those in our local community who, on a daily basis, take responsibility for promoting and maintaining their own safety and the safety of others. These people are at the heart of making our community a safer place in which to live, work, learn, travel and play.

Welcome to our Safe Community

It is five years since New Plymouth injurySafe successfully co-ordinated the application for accreditation as an International Safe Community and began our journey to where we are today



New Plymouth District was proud to be designated an International Safe Community in 2005. We became the 95th designated International Safe Community in the world and the third community in New Zealand to be accredited. We were also the first community in New Zealand to be accredited by the Certifying Centre of the Safe Communities Foundation New Zealand (SCFNZ).

International Safe Communities is a World Health Organisation (WHO) concept that recognises safety as "a universal concern and a responsibility for all". This approach to community safety encourages greater cooperation and collaboration between non-government organisations, the business sector and local and government agencies. In order to be designated, communities are required to meet six criteria developed by the World Health Organisation (WHO) Collaborating Centre on Community Safety at the Karolinska Institute for Social Medicine in Stockholm Sweden.

Accreditation has been an important part of our Safe Community journey as it has provided recognition for our efforts in designing and developing strategies to promote safety and reduce the incidence and severity of injury in our community. The accreditation process has not only provided support for our community, but it has also given us an indication of our level of achievement within the field of safety promotion and injury prevention.

However, this formal recognition not only provided us with an endorsement of our past achievements but it also marked a starting point from which we could develop and strengthen in the future. In other words, it was not the end of the journey, but in fact the beginning!

Over the last five years our district has gone from strength to strength, building on the solid foundations put in place by the accreditation process as well as the consistent support of our collaborative partners. Our networks continue to grow and our safety programmes are continually developing. We can confidently say that our Safe Community is stronger and wider reaching than it was five years ago.

We recognise that the development of a positive safety culture within our community requires a range of long-term sustainable programmes covering all ages, environments and situations. Key to the successful implementation of these programmes is collaboration. It is the process of sharing our resources, skills expertise and enthusiasm. In short, it is our people...

He aha te mea nui o te ao?

He tangata! He tangata! He tangata!

What is the most important thing in the world?

It is people! It is people! It is people!



About New Plymouth District

Anyone who lives here, and anyone who comes to visit us, will know that New Plymouth District is a place that's positively teeming with pride and passion and has a can-do approach to every minute of every day



Taranaki, New Zealand



Our Place

New Plymouth District, based in the North Island of New Zealand, covers an area of 232,400 hectares (2,324.26 square kilometres), stretching from the Mohakatino River in the north to the Hangatahua (Stony) River in the south, and inland as far as Tariki. The district includes the city of New Plymouth, the towns of Waitara, Inglewood, Urenui, Okato, Bell Block and Oakura, and many other smaller rural communities.

Situated on the west coast of the North Island, New Plymouth is a modern city with wonderful urban amenities set against the backdrop of a stunning landscape that stretches from the Tasman Sea to Mt Taranaki. Our unique location means that it really is possible to snowboard, water ski and surf all in the same day!

Significant geographic features of our District include the coastline along its northwestern boundary and Mount Taranaki and Egmont National Park on the southern boundary. Our natural and built environment has many attributes. We are a coastal city, facing the Tasman Sea with Mount Taranaki at our back. We have two hundred and forty five Council-owned parks and reserves, and more than 80 per cent of our residents live within 400 metres of one. In addition, there are sixty walkways opening up the district to residents and visitors. We also have one hundred and fifty kilometres of coastline with 13 official beaches including Fitzroy, East End and Oakura beaches with Blue Flag accreditation.

About New Plymouth District

Our People

The 2006 census recorded that 68,901 people usually live in New Plymouth District. Between the 2001 and 2006 Census, the district's population rose by 2,298 people, or 3.5 per cent (Statistics New Zealand, 2008). The latest estimated population of the district is approximately 72,000. This is expected to grow over the next 10 years by 4.3 per cent. The demographics of New Plymouth District show that we have a slightly older age profile than the rest of New Zealand, in part due to lower than average numbers of 18 to 24 year olds. The proportion of our population over 65 years of age is expected to increase from 16 per cent to 19 per cent of the total population, over the next 10 years, meaning that an additional 2,500 people will be in this age group by 2020 (NPDC, 2009). This follows a long-term trend of an ageing population which is typical of New Zealand as a population predominantly made of Europeans.

Just over 77 per cent of our community identify themselves as European. The next largest group is Maori, with people of Pacific Island and Asian origins making up a relatively small proportion compared with other parts of New Zealand. Birth rates, while falling, are one third higher for Maori women than for European women. Depending on the size and ethnic make-up of migration into New Plymouth District, the Maori proportion of the district's population should increase over the long term. The ethnic make-up also varies considerably by location in the district, from three per cent Maori in Egmont Village to 34 per cent Maori in Waitara West.



Our Economy

The local economy is based mainly on agriculture, particularly the dairy industry, with other significant industries including horticulture, heavy and light engineering, manufacturing and tourism. The Council contracts with a Council-controlled organisation (Venture Taranaki Trust) to deliver our economic growth activities. Together they ensure that the industries that are important to our district are supported and assisted in their growth, through the creation of the Engineering Taranaki consortium and other such initiatives.

Energy and related industries are also important - onshore oil was discovered as early as 1865 from the Alpha well in the New Plymouth suburb of Moturoa, and in the late 1970s the offshore Maui A well began production of natural gas. All this encouraged overseas investment and a flourishing energy and petrochemical industry developed. As Maui A resources decline, new sites in Taranaki are being developed in an effort to find more commercial petrochemical reserves.

Taranaki topped year-on year growth in New Zealand, recording a growth rate of 2.6 per cent. Since 2004 Taranaki has regularly been above the national growth rate. This has largely been due to the key industries that drive the Taranaki economy - the oil and gas and agriculture sectors, and their associated secondary industries such as food processing and engineering. The latest data shows that whilst the growth rate is now declining during challenging economic times, the region is still performing above the national average for year on year growth.

Our Pride

Anyone who lives here, and anyone who comes to visit us, will know that New Plymouth District is a place that's positively teeming with pride, passion and a can-do approach to every minute of every day.

Indeed, it's these attributes that have seen us recognised as the best place to live, work and visit in New Zealand and the best small city in the world (Liveable Communities Awards, November 2008).

Our Journey

We approach our application for re-accreditation as an International Safe Community with a sense of pride and achievement. Our initial accreditation in 2005 was not the end of the journey, but the start.

Our Safe Community journey can be traced back to September 2000. Recognising the increasing evidence that a community based approach is effective in contributing to injury reduction, ACC invited communities throughout New Zealand to conduct feasibility studies to examine injury and injury prevention in their communities.

A small group of New Plymouth based health and community professionals joined in a successful bid for ACC funding to conduct an injury prevention needs assessment in the New Plymouth District. The original Community Injury Prevention Advisory Group, now known as New Plymouth injurySafe Trust (NPiS), consisted of Tui Ora Ltd., Taranaki District Health Board's Health Promotion Unit, Kidsafe Taranaki Trust, New Plymouth District Council and Plunket representatives.

The resulting document, Community Injury Prevention in the New Plymouth District – Assessing the Needs (McLellan, Maskill & Hodges, 2006) created a solid platform of information for NPiS to work towards its shared vision of 'a safe community without the burden of injury'. Injury prevention efforts were further supported by the development of the New Zealand Injury Prevention Strategy (NZIPS) in 2003 and the establishment of the Safe Communities Foundation of New Zealand (SCFNZ) in 2004.

In 2005, NPiS successfully co-coordinated the application for accreditation as an International Safe Community in line with criteria set by the World Health Organisation.

The application for accreditation was the catalyst for NPiS to develop their first 3-year Strategic Plan (2005-8), in line with the New Zealand Injury Prevention Strategy 2005-2015.

In 2006, the NPiS coalition recognised the need to formalise their structure by registering as a Charitable Trust. Funding from a number of Trust partners enabled the group to recruit a part-time Safe Community Programme Manager who was appointed in January 2007.



Since then, the membership of NPiS has expanded and the coalition now has 11 core partners. These partners are key players in the area of injury prevention, and a number of representatives who attend Trust meetings work at a senior level within their individual organisations. This contributes both to the perceived credibility of the Trust group, as well its influence in shaping the local injury prevention agenda. The District Council has also given its long term commitment to injury prevention and community safety by including safety as a core outcome in its long term community plan.

Along with the core partners of NPiS there are a number of other local organisations who contribute either directly, or indirectly, to injury prevention and safety promotion. NPiS's intersectoral network includes many organisations whose interest areas cover children, young people and older people's health and wellbeing, sport and recreation, industry (including farming) and road safety.

Most of the organisations represented in NPiS are also involved in service delivery activities or in networks of service providers. This enables NPiS to link directly with working groups and project teams to ensure that priorities are being addressed; duplication avoided and gaps in service delivery identified. Consequently NPiS has taken a lead role in the co-ordination of two main areas of injury prevention in the district where such gaps have been identified - falls prevention and suicide prevention.

Our district boasts a broad range of community safety programmes addressing issues such as injury (intentional and non-intentional), crime, family violence, alcohol misuse and road safety. Our programmes span across all age groups and across different settings. Many of these programmes have won awards at national level and have been used as best practice examples in the development of other safety projects around the country.

Our Journey

Our community has witnessed many achievements over the last five years which we are keen to share within this application. None of these achievements would have been possible without the high level of commitment and enthusiasm of our collaborative partners and wider networks. While funding for the development and implementation of safety initiatives within our community has always been a challenge, we have overcome this by sharing our resources and making best use of the skills and expertise of our partners.

In preparation for re-accreditation a number of key safety partners have been working together to identify opportunities for greater collaboration across the wider safety networks in our district. This process was also undertaken to encourage a broader sense of shared ownership and pride in the re-accreditation process. A stock-take of all existing safety activities was undertaken as well as consultation with key stakeholders.

The result is the development of a Safe and Secure Community Strategy 2010-2020 that is aligned with our strategic partners plans and priorities. The Strategy provides an overarching umbrella that brings together existing strategies and partnerships in a way that enhances their ability to be effective and reduces the potential for duplication, overlap and missed opportunities. In particular, the Strategy establishes the community's vision for maintaining and enhancing New Plymouth as a safe city.

A copy of the Draft Safe and Secure Community Strategy 2010-2010 can be viewed at <http://www.safetaranaki.org.nz/injury-prevention/npis/documents/NP%20Safe%20and%20Secure%20Community%20Strategy%20%202010-2020.pdf/view?>

We approach our application for re-accreditation as an International Safe Community with a sense of pride and achievement, and a clear sense of our direction in the future. Our initial accreditation in 2005 was not the end of the journey, but merely the start. Our community acknowledges that our application for re-accreditation in 2010 is another important step on our journey towards our shared vision of a New Plymouth District that is safe from injury.



Criteria One

An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community



Leadership and Coordination in New Plymouth District

Within New Plymouth district, leadership and coordination in the areas of injury prevention and safety promotion is undertaken by New Plymouth injurySafe (NPiS), a formal coalition group that aims to achieve a positive safety culture and create safer environments for all people within the New Plymouth District.

NPiS was established as an informal coalition in 2001 to improve coordination of local injury prevention efforts and the group formalised their structure by registering as a Charitable Trust in 2006. The Trust worked with New Plymouth District Council to coordinate the first application to become an accredited International Safe Community in 2005, and is overseeing this process once again in 2010 at the District prepares for re-accreditation.

The organisations represented in the NPiS group are each committed to achieving a shared vision of community safety—New Plymouth District, a safe community without the burden of injury – through the following objectives:

- Monitoring injury issues in New Plymouth District and providing information on needs, priorities and programmes
- Establishing effective partnerships with others working towards improving safety in New Plymouth District
- Raising awareness, commitment and motivation to improve injury prevention within organisations and throughout the community
- Guiding and supporting the development of plans for effective injury prevention interventions at a community level within the framework of the National Injury Prevention Strategy
- Assisting New Plymouth District to meet the WHO criteria for Safe Communities

Since becoming accredited as an International Safe Community in 2005 the coalition has gained five new partners. The current core partners of New Plymouth injurySafe are:

- Tui Ora Ltd.
- Taranaki District Health Board (Public Health Unit)
- New Plymouth District Council
- Kidsafe Taranaki Trust
- Accident Compensation Corporation (ACC)
- New Plymouth Police
- Department of Labour
- New Zealand Fire Service
- Peak Health Taranaki, Hauora Taranaki PHO and Te Tihi Hauora O Taranaki PHO (represented by the CEO of Peak Health Taranaki)



Most of the organisations represented in NPiS are also involved in service delivery activities or are members of other local safety networks. By this means, NPiS links directly with working groups and project teams and is able to ensure that priorities are being addressed; duplication avoided and gaps in service delivery identified.

Through the involvement of its constituent organisations in project delivery teams, NPiS maintains an overview of injury prevention interventions in the district and collaborates to encourage the development and implementation of plans that meet World Health Organisation criteria for Safe Communities as follows:

- Long term sustainable programmes covering both genders and all ages, environments and situations
- Programmes that target risk groups and environments and programmes that promote safety for vulnerable groups
- Programmes that document the frequency and causes of injury

Safe Community Coordination

Funding from three NPiS partners has enabled the trust to employ a part-time Safe Community Programme Manager (0.8FTE) since January 2007. Funding is provided by ACC, Taranaki DHB and New Plymouth District Council. Additional funding was also provided by Kidsafe Taranaki Trust and Tui Ora Ltd. during the first year of employment of the programme manager (2007).

Coordination is a vital aspect to any Safe Community programme, and the employment of a paid coordinator ensures commitment and continuity, particularly during periods of challenge and uncertainty. Collaboration is the basis for sustainability within Safe Communities, and the coordinator plays a central role in building and developing key relationships between agencies and across safety networks.

New Plymouth injurySafe operates differently from most Safe Community steering groups in New Zealand due to its charitable trust status. As opposed to other designated safe communities, where coordinators are usually employed by local councils, NPiS Trust have taken responsibility for employment of the safe community programme manager.

The advantage of this model is that the Trust has a perceived and actual independence within the community that is particularly useful when the programme manager assumes a leadership role in the development of new networks or working groups, or when managing local projects. It also allows the programme manager a high degree of flexibility and responsiveness (e.g. when dealing with the media or developing publications).

However, this model does have its disadvantages. Concerns about sustainability of funding are an emerging issue as is the case for many charitable organisations. NPiS Trust are reliant on grant funding and in some cases it is necessary to apply for this funding annually (although two of the current funders have made a commitment to fund for a further 3 years). This issue has become more marked over the last year in response to the economic downturn and a political shift that has seen many government agencies (including those funding NPiS) face their own funding reviews and cutbacks. Furthermore the economic review has also reduced the potential for the Trust to seek industry sponsorship as local businesses are feeling the impact of the recession.

Funding is now a challenge for the Trust and creative approaches to overcoming this will be needed over the next year. The need to identify an additional funding partner (or partners) has been recognised and Trust partners are considering the options available. Ideas have been put forward including seeking a major industry sponsor and providing them with naming rights for the Trust, as well as establishing a tiered funding sponsorship arrangement (i.e. gold, silver and bronze sponsors). Taking these ideas forward is a key focus for the Trust for 2010/11.

Strategic Leadership

The delivery of the Trust's strategic objectives are documented and monitored through an Annual Implementation Plan. The indicators and measures within the Annual Implementation Plan are closely aligned with the strategies outlined in the New Plymouth injurySafe Strategic Plan (2008-11). NPiS uses the New Zealand Injury Prevention Strategy (NZIPS) as a strategic framework by reflecting the Strategy's goals and objectives. The group recognises a shared responsibility with Government and the community for achieving these objectives through the NPiS Strategic Plan. NPiS also incorporates WHO criteria for Safe Communities as underpinning principles that guide its ongoing planning and development.

A copy of the NPiS Strategic Plan 2008-2011 and current implementation plan are available at <http://www.safetaranaki.org.nz/injury-prevention/npis/planning-and->

NPiS STRATEGIC PLAN OBJECTIVES	LINK TO WHO SAFE COMMUNITY CRITERIA	LINK TO NZIPS
1 Monitor injury issues in New Plymouth District and provide information on needs, priorities and programmes	Programmes that document the frequency and causes of injuries (Criteria 4) Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups. (Criteria 3)	Advance injury prevention knowledge and information (Objective 6)
2 Establish effective partnerships with others working towards improving safety in New Plymouth District	An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community (Criteria 1)	Integrate injury prevention activity through collaboration and coordination (Objective 5)
3 Raise awareness, commitment and motivation to improve injury prevention within organisations and throughout the community	Long-term, sustainable programmes covering both genders and all ages, environments, and situations. (Criteria 2)	Raise awareness and commitment to injury prevention (Objective 1)
4 Guide and support the development of plans for effective injury prevention interventions at a community level within the framework of the National Injury Prevention Strategy	Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups (Criteria 3)	Develop and implement effective injury prevention interventions (Objective 7)
5 Assist New Plymouth District to meet the WHO criteria for Safe Communities	Evaluation measures to assess programmes, processes and effects of changes (Criteria 5) Ongoing participation in national and international Safe Communities networks (Criteria 6)	Strengthen injury prevention capacity and capability (Objective 2) Foster leadership in injury prevention (Objective 10)

NEW PLYMOUTH'S SAFETY NETWORKS

Along with the core partners of NPIS there are a range of other local organisations that contribute either directly, or indirectly, to safety promotion across the district. NPIS's intersectoral network includes many other organisations whose interest areas cover the wellbeing of children, young people, older people and families as well as improving safety in the areas of sport and recreation, industry (including farming) and on the roads. Through our core partners, NPIS has representation on all of these safety networks ensuring that safety activities across our district are well coordinated.

New Plymouth injurySafe Trust links with key safety networks:



A number of safety networks operate across the district focusing on the following safety issues:

- Injury (intentional & unintentional)
- Alcohol
- Road Safety
- Crime Prevention
- Family Violence
- Emergency Management

Safety Areas	Local Partnerships and Collaborations
Injury Prevention	Falls Prevention Taranaki Falls Strategy Group Child Safety Kidsafe Taranaki Trust Suicide Prevention Taranaki Suicide Prevention Coordination Group Workplace Safety Taranaki HSE Strategy Group Taranaki HSE Leadership Forum Taranaki Construction Safety Focus Group Drowning Prevention Taranaki Regional Water Safety Group
Alcohol	New Plymouth District Alcohol Implementation and Monitoring Partnership YATA (Youth Access to Alcohol)
Road Safety	Road Safe Taranaki Road Safety Action Planning Group (RSAP)
Crime Prevention	North Taranaki Neighbourhood Support Police Liaison Working Party
Family Violence	Taranaki Safe Families Trust
Emergency Management	Taranaki CDEM Group Taranaki CDEM Coordinating Executive Group Hazardous Substances and Technical Liaison Committee Rural Advisory Group, Welfare Advisory Group, Lifelines Advisory Group, Taranaki Volcano and Seismic Advisory Group Health Advisory Group

INJURY PREVENTION

Falls Prevention

Taranaki Falls Prevention Strategy Group

The Taranaki Falls Prevention Strategy Group was formed in 2007 to improve coordination in the development and delivery of falls prevention services in Taranaki. The group originally focused on reducing falls in older people but is increasingly broadening its focus to include falls across all age groups. The group maintains strong links with New Plymouth Positive Ageing Trust.

The group is chaired by the NPiS Safe Community Programme Manager and includes representation from ACC, Taranaki DHB (Allied Health), Primary Health Organisations, Age Concern, Taranaki Disability Centre, AccessAbility, Sport Taranaki, Kidsafe Taranaki and older people/service users.

The group aims to promote a coordinated and collaborative approach towards the prevention of falls in Taranaki. The group has developed a Falls Prevention Strategy to guide this work. Objectives of this strategy include raising awareness of risks and consequences of falls and strategies for their prevention as well as the development of initiatives to improve access to and uptake of falls prevention programmes. One of the longer term visions of the Strategy is to develop a regional integrated falls service (for older adults) in Taranaki.

An initial Short Term Implementation Plan was developed by the Strategy Group in 2007 to improve co-ordination and communication between services in the short term and an initial consultation was undertaken with local older people between January and April 2008.

Following this, an Annual Plan was developed to assist delivery of the group's strategic objectives. The longer-term aim for the group is to develop a proposal for an integrated service with widely shared referral systems and strong links between prevention and care services. It is recognised that a long term, sustainable approach to falls prevention in Taranaki is required, and that this should be directly linked to, and guided by, the National Falls Prevention Strategy. To support this, the group's implementation plan has been developed within the framework of the national strategy.

This work was recognised when the Taranaki Falls Prevention Strategy won Category 3 of the New Zealand Community Safety & Injury Prevention Awards 2008. This category acknowledges excellence in the use of national strategy to guide local injury prevention planning and action.

A copy of the current Taranaki Falls Prevention Strategy & Action Plan is available at <http://www.safetaranaki.org.nz/injury-prevention/falls/documents/Taranaki%20Falls%20Strategy%202009-2010.pdf/view>

Suicide Prevention

Taranaki Suicide Prevention Coordination Group

This group was established on the recommendation of a suicide prevention needs assessment carried out by New Plymouth injurySafe in 2008. The group includes representatives from Taranaki DHB Mental Health & Addiction services, LikeMinds Taranaki, ACC and local contracted mental health service providers, including Maori health providers. Representatives from Federated Farmers, local secondary schools, Ministry of Social Development (MSD) and Primary Health Organisations (PHO) also attend the meetings.

The group meets quarterly and membership is open to anyone with an interest in improving coordination of suicide prevention services across Taranaki. The group has developed an action plan which largely focuses on raising awareness of suicide prevention and increasing the availability of suicide prevention training in our region. Since the group was established in 2008, they have overseen a number of suicide prevention projects aimed at increasing the awareness and capacity of local communities to play a role in suicide prevention. These projects include targeted delivery of ASIST (Applied Suicide Intervention Skills Training) training workshops and an extensive rural roadshow raising awareness of stress, depression and suicide prevention.

The group is now planning to launch a free community based training programme across Taranaki using QPR (Question, Persuade, Refer), an on-line suicide awareness and prevention training programme. This initiative is part funded by New Plymouth injurySafe Trust and the Otago University (as part of the national MISP - Multi-level Intervention Suicide Prevention research study).

Child Injury Prevention

Kidsafe Taranaki Trust

Kidsafe Taranaki Trust is a charitable trust formed in 1994 by a group of people concerned about preventable unintentional injuries experienced by children in Taranaki. Membership is open to groups or individuals who share this concern and currently includes organisations such as the Taranaki District Health Board's Health Promotion Unit and Paediatrics Department, ACC, Plunket and Maori health providers, amongst others. Kidsafe Taranaki is also one of the original partners of New Plymouth injurySafe.

Meetings are held four to six times a year, and are open to anyone who may be interested. Kidsafe also has an elected Board of Trustees, who meet bi-monthly to discuss governance matters.

Kidsafe Taranaki continues to develop a range of projects and resources, often shared with and adapted by other communities in New Zealand. Recognised with numerous national awards, Kidsafe Taranaki has gained credibility as a leading coalition in the field of child injury prevention. Kidsafe provides general advice and advocacy on child injury prevention issues, resources and support for local projects, access to current data and assistance with contacting other organisations.

Water Safety

Taranaki Regional Water Safety Group

The Regional Water Safety Group is coordinated by Water Safety New Zealand and involves a number of local organisations with an interest in water safety (e.g. Learn to Swim providers, Surf Lifesaving, Kidsafe Taranaki Trust, Swimming Taranaki and Sport Taranaki).

A Regional Water Safety Education Plan has been developed to lead and develop regional specific water safety education initiatives to reduce the incidence of drowning in Taranaki, and New Zealand wide. A copy of this Plan is available at http://www.watersafety.org.nz/assets/pdfs/regional/Taranaki_Strategy.pdf.

Regional water safety group meetings are held 1-2 times a year for those with an interest in water safety in the region to enable networking and encourage planning of new projects.

In addition to the Regional Water Safety Group, Taranaki has a regional swimming group (Swimming Taranaki) that is affiliated to Swimming New Zealand. The group provides support to swimming clubs across Taranaki (including four New Plymouth-based clubs) and exists to promote learn to swim, aquatic sports and practical water safety education across the region.

Workplace Injury Prevention

Safety in the workplace in Taranaki has benefited from the presence of the oil and gas industry for over 30 years and the leadership of a collaboration of CEOs from major industries in the area. This group of highly motivated managers were responsible for the health and safety expos that were an annual event for some years encouraging a range of industries to learn more about safety products and resources.

But a perceived need for consistent and affordable training for contractors working on a range of work sites led to the establishment of the HSE training centre. This was modelled on an induction centre delivering practical and relevant training for a specific worksite. The Taranaki CEO group had a vision of a centre offering both a venue and a range of hands-on training for the local community.

This was realised in 2005 with cash grants, materials and practical help from a number of local businesses. The collaboration of industry leaders has continued to support the development of common approaches to health and safety locally, to share the best practices, to raise the standard of H&S in the region and beyond.

A strategy group has led a number of projects in confined space training, drug and alcohol policy and process, common contractor approval systems. The centre itself has been used by various groups and training providers encompassing practical training sessions, safety challenges, meetings and demonstrations. In addition to the various modules and equipment initially installed, an emergency management training room and a home safety area have been added.

Coinciding with the reaccreditation of the district as a Safe Community the CEO group is preparing to launch 'Be Safe Taranaki' - this brand will identify the training centre and other strategies sponsored or approved by the forum that contribute to the vision of harm free workplaces and community. It is supposed that other forums and initiatives will wish to embrace the brand to publicise local effort.

Taranaki Construction Safety Group

The Taranaki Construction Safety Group aims to create, through education and leadership, a culture that puts safety to the fore with every person involved in all aspects of the Construction and building industry - EVERY DAY.

The Taranaki Construction Safety Group meets monthly and shares information and ideas relating to safety in the construction industry, as well as organising local seminars, training and other safety events. Members of the group include representatives from local construction and engineering companies, ACC, Department of Labour and local Health & Safety specialists. The group is open to anyone with an interest in making the construction industry a safer place to work.

The group has run a number of information sessions focusing on topics such as notifiable work, hazard identification, planning and health & safety leadership. In 2008 they organised a breakfast forum for the construction industry to discuss health and safety in the contract management process. They also organise a successful Trades Apprentice Challenge event each year that aims to improve the health and safety knowledge of construction industry apprentices.

Taranaki Health & Safety Leadership Forum

The Taranaki Health & Safety Leadership Forum has a registered membership of more than 100 people who share a strong interest in health and safety in the New Plymouth area. Attendees include health & safety advisors, managers, elected representatives and trainers. Regular meetings are held at the Taranaki Health, Safety & Environment (HSE) Centre, a purpose built health and safety training centre in New Plymouth.

The group is informal - there is no formal structure or recording of meetings, allowing supportive networking, free discussion of issues and ideas with no risk of exposure of sensitive business information. ACC and the Department of Labour have been involved in the group from an early stage, providing easy access to their resources and areas of expertise. Forum meetings often feature guest speakers who share their knowledge and experience of health and safety as well as providing follow up support for businesses as required.

Family Violence

Taranaki Safe Families Collaborative

The Taranaki Safe Families Collaborative (TSFC) was formed in 2008 following the merger of three groups (Family Violence Focus Group, Taranaki Te Rito Group and South Taranaki Family Violence Network). These groups had worked together extensively throughout the Taranaki region for many years undertaking a range of activities including conferences, training seminars, awareness raising events, local media campaigns and networking forums. The formation of the TSFC was prompted by a desire for a single collaborative group with more effective communication and that could be more inclusive, encouraging greater participation.

The Taranaki Safe Families Collaborative vision is that all families in Taranaki will have safe, respectful and healthy relationships that are free from violence. The aims of the TSFC are to raise awareness of family violence issues in the Taranaki Region, undertake education and promotion initiatives, to improve collaboration between family violence services and to assist with the strategic development and planning of family violence initiatives.

The Collaborative is made up of over 30 members including representatives from Taranaki District Health Board, Department for Courts, Tu Tama Wahine O Taranaki, HRC Family Counselling, Taranaki Community Law, Barnados, DoVe, ACC, Plunket, Family Works, Tui Ora Ltd, New Plymouth District Council and others. The Collaborative employs a full-time Family Violence Coordinator.

The TSFC has developed an action plan to guide local action on family violence. The document is intended to be a 'living and accessible' document for everyone involved in the collaborative. The Plan is also used to monitor and review TSFC's ability to raise awareness of family violence issues, to improve services to victims and to ensure perpetrators are held accountable.

Alcohol

New Plymouth District Alcohol Strategy Group

The New Plymouth District Alcohol Strategy group is a multi-agency group committed to taking a collaborative approach to reducing alcohol-related harm in New Plymouth District.

The Alcohol Strategy Group has a focus on overseeing the implementation of the New Plymouth District Alcohol Strategy. Formed following the development of the strategy, the group represents diverse sector interests including regulatory control, health, police, workplaces and sports groups.

The goal of the New Plymouth District Alcohol Strategy is to achieve “a safe, healthy, vibrant community and quality living environment through the responsible use of alcohol and by minimising alcohol related harm in New Plymouth district”. The Alcohol Strategy Group meets on a quarterly basis to review and update progress towards the achievement of the Alcohol Action Plan. The group also produces an annual report measuring the trends in alcohol related harm across a number of measures.

Current stakeholders include Police, New Plymouth District Council, ACC, Taranaki District Health Board, New Plymouth injurySafe, Roadsafes Taranaki, Toi Ora, Taranaki HSE Strategy Group, Sport Taranaki, MSD, Department of Labour, Taranaki Rugby Football Union and Western Institute of Technology Taranaki (WITT).

YATA (Youth Access To Alcohol)

The Youth Access to Alcohol (YATA) group aims to reduce alcohol related harm for young people aged under 25 years by normalising moderation and reducing harm across Taranaki, proactively and reactively.

YATA group meetings provide a regular forum for discussions and the planning of activities guided by their annual Action Plan. The group is also responsible for overseeing the implementation of these activities. Activities include awareness raising events, resource publication, training for licensed premises and door staff

Current stakeholders include, but are not limited to, New Plymouth, Stratford and South Taranaki District Councils, Taranaki DHB, ACC, Sport Taranaki, ALAC, Police, and Waitara High School. The YATA group is open to all people and or organisations with an interest in helping to reduce alcohol related harm to young people.

Road Safety

Roadsafes Taranaki

Roadsafes Taranaki undertakes the Community Road Safety Programme in Taranaki on behalf of the New Zealand Transport Agency. Roadsafes Taranaki is based on a regional road safety agreement between the three Local Territorial Authorities (New Plymouth, Stratford and South Taranaki District Councils).

Roadsafes Taranaki sets out to assist communities to identify and take ownership of their road safety issues and to increase participation of community groups in road safety projects.

In addition to the three E's of Education, Enforcement and Engineering identified in the Road Safety 2010 strategy, Roadsafes Taranaki also focus on encouragement to promote behaviour change and environment to provide a safe sustainable travel network.

To help facilitate this work a road safety co-ordinator and road safety project assistant are employed to work within the community (managed by the South Taranaki District Council). Collaboration is a key part of an effective road safety approach and Roadsafes Taranaki is committed to a Community Development approach to assist and stimulate communities to develop a road safety culture.

The Roadsafes Taranaki Management Group includes representatives from NZTA, New Plymouth District Council, Stratford District Council, South Taranaki District Council and Police. The group meets quarterly to oversee the delivery of the community road safety programme and to approve community funding applications.

A copy of the Roadsafes Taranaki Strategic Plan 2009-2012 is available at <http://www.safetaranaki.org.nz/road-safety/strategies>

Road Safety Action Planning (RSAP) Group

Road Safety Action Plans provide a mechanism for achieving sustained reductions in road trauma. The Taranaki Road Safety Action Plan (RSAP) contains an implementation plan to give effect to local/regional coordinated inter-agency road safety strategies. It is focused on coordinating the delivery of enforcement, education and engineering activities to manage key local road safety risks. Regional and local road safety partners identify problems to be solved by assessing information and intelligence such as crash data, community identified needs, traffic counts and speeds, police enforcement and prosecution data, studies and surveys, media issues, and results from the community outcomes process.

Collaboration is key to successful implementation of the Taranaki RSAP both in the production of the RSAP and ongoing monitoring of its progress. The Taranaki RSAP group meets quarterly and includes road safety partners such as district council roading planners, ACC, police, New Zealand Transport Agency (NZTA) regional representatives, New Plymouth injurySafe and the regional road safety coordinator.

The Taranaki RSAP aims to reduce the incidence and severity of crashes in the Taranaki region. Progress is measured through a report bank and a maintained reduction in crash figures. The group responds to identified areas that require action as they become aware of them.

The current Road Safety Action Plan is available at <http://www.safetaranaki.org.nz/road-safety/strategies>



Crime Prevention

Police Liaison Working Party

Crime prevention activities in New Plymouth District are coordinated through the Police Liaison Working Party, a jointly chaired meeting comprising of District Councillors and New Plymouth Police staff.

Police Liaison Working Party meetings are also attended by Council Officers. The purpose of the Working Party is to provide an opportunity to liaise with Police and other appropriate parties to work through issues with a view to recommending to the council and/or the Police action that promotes a safe environment for the community. The working party also provides advice to the council on the New Plymouth CBD security camera system as well as the implementation and monitoring of liquor bans for specific events or occasions.

Items are raised for discussion as issues arise. Crime Prevention activities are not planned in advance, therefore this Council working party does not provide a strategic focus.

Community Development Team (Crime Prevention Portfolio)

The New Plymouth District Council community development team currently manage a number of crime prevention projects funded by Ministry of Justice after funding changes caused the New Plymouth District Safer Community Council to cease operating in 2008 (crime prevention was previously managed by the Safer Community Council). Current crime prevention activities are largely focused on reducing youth crime, particularly graffiti, vandalism and violence. Funding has also supported community profiling and re-development activities in the Waitara and Marfell area which are overseen by individual project steering groups made up of police, community development staff and community members.

The Ministry of Justice have recently announced that funding priorities and contract management processes will change again. The Community Development Team have facilitated an initial process to coordinate the development of priorities and strategic planning among community safety partners prior to applications for funding being submitted to Ministry of Justice.

North Taranaki Neighbourhood Support

North Taranaki Neighbourhood Support (NTNS) works closely with the Police and other organisations in the community. Experience shows that when organisations and the community work together, they can reduce crime and be better prepared to deal with emergencies and disasters and improve safety.

NTNS operates under a Trust structure and employs two coordinators. Many urban and rural neighbourhood support groups have also been established within New Plymouth. Currently NTNS are focusing on high priority areas, crimes or community safety issues identified through Police. Communication with member groups occurs through E-Watch bulletins and neighbourhood network volunteers.

NTNS encourages neighbours to talk to each other and to share information that will help reduce the risk and fear of crime. They believe this will help foster a sense of community spirit, where everyone is respected and valued, empowering local communities to take responsibility for their own safety.



Emergency Management

Civil Defence Emergency Management (CDEM) Group

The Taranaki Regional Council is involved in planning and preparing for a whole range of emergencies in the region and for coordinating risk reduction, readiness, response and recovery. The Taranaki Civil Defence Emergency Management (CDEM) Group has responsibility for civil defence emergency management in the region and is administered by the Taranaki Regional Council.

Representatives of the New Plymouth, Stratford and South Taranaki District Councils and the Taranaki Regional Council make up the CDEM Group. During an emergency the CDEM Group ensures that strategic advice and direction is provided to responding agencies, and that emergency welfare is delivered to the affected communities. The CDEM Group carries out its responsibilities for civil defence emergency management under the CDEM Act 2002.

The Taranaki Civil Defence Emergency Management Group has established specialist advisory groups for health, welfare, rural, lifelines, hazardous substances and Egmont Volcano. A Co-ordinating Executive Group has also been established to provide advice and assistance to the CDEM Group.



Criteria Two

Long-term, sustainable programmes covering both genders and all ages, environments, and situations



Our community benefits from a broad range of safety programmes covering all ages, environments and situations. These programmes are designed to address local safety priorities that have been identified through our formal needs assessment process (carried out every 5 years) as well as ongoing monitoring of local injury data trends and feedback from community stakeholders. More detailed information about how our Safe Community documents the frequency and causes of injury is outlined under Criteria 4.

Our last Community Injury Prevention Needs Assessment was carried out in 2006 and will be repeated in 2011. This Needs Assessment identifies the types of injuries, population groups and injury locations that should be given priority within our local community injury prevention programme in the context of existing injury prevention programmes and activities within the district. The needs assessment report compiles relevant statistical and qualitative information to identify patterns of injury in the New Plymouth District.

Main environments, safety issues and population groups that are covered by our safe community programme.



As an established Safe Community, the number and breadth of our safety programmes have grown over the years. Indeed there are potentially hundreds of examples of safety projects taking place across the New Plymouth district area that address a range of safety issues. For example, many individual workplaces will have safety programmes and initiatives in place, such as training programmes, policies and protective equipment aimed at keeping their workers safe. Similarly education and health providers will have policies and procedures in place that promote safety within their environment. Many agencies also provide safety training as part of their day-to-day role (e.g. drugs education or fire safety education in schools).

Consequently, the examples highlighted within this application represent just a fraction of the safety promotion activity in our community. Projects selected for inclusion in this application have been chosen due to their collaborative nature, i.e. they represent initiatives that benefit from the involvement of two or more partners in their development and implementation.

Some projects have also been selected due to their innovation – for example, projects that have been developed locally to address a locally identified need. These particular examples highlight the uniqueness of our community and reflect those issues that are important to those who live and work here.

Initiatives that are considered to be ‘business as usual’ (for example, speed checks and breath testing by police, ACC workplace injury prevention presentations, etc.) are not included. While such initiatives do take place locally, and are considered to make an important contribution towards safety in our district, they do not demonstrate so well the degree of collaboration and innovation that is often a feature of Safe Communities. This allows our application to focus on a number of creative and innovative projects, many of which are unique to New Plymouth.

The tables on the following pages are initially sorted by environment, but within each section they also cover a range of injury issues (e.g. falls, alcohol) and population groups (e.g. children, older people). Each set of tables is followed by a couple of case studies provide more detailed information about some of the projects.

It should be noted when reading the tables and case studies that some projects that are listed under one category (e.g. alcohol) have a direct impact across other safety areas (e.g. road safety, falls prevention). To avoid repetition projects are listed once under the category that they best fit, however the ways in which many projects cross over different safety areas should be kept in mind.

As with the projects listed in the tables, the Case Studies have been selected to demonstrate the variety of local community safety programmes aimed at different age groups, environments and situations, but are not intended to be an exhaustive list. A comprehensive list of our local safety programmes can be found in our Community Profile available on the Safe Communities Foundation NZ website (<http://www.safecommunities.org.nz/sc/np>).



Falls Prevention

Children (0-4 years)

- Child Falls Prevention Education Project
- Tamariki Falls Prevention Project
- Marfell Community Safer Homes Project

Adults (All Ages)

- Taranaki Falls Prevention Strategy
- Ladder Safety promotions

Older Adults

- Active in Age
- Well Aware community based falls prevention education workshops
- 'Wellbeing Days' & Marae-based 'Kaumatua Wellbeing Days'
- Modified Tai Chi programme
- Age Concern Home Safety Checks
- Home-based physiotherapy exercise programme for frail elderly
- Falls Prevention training in rest homes
- Green Prescription programme in rest homes
- Modified Tai Chi Training for rest homes
- Falls network newsletter ('Keeping Up')



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Falls Prevention Strategy	New Plymouth injurySafe	Taranaki Falls Prevention Strategy Group	ACC	Development of a coordinated approach to the implementation of falls prevention services across Taranaki. Raising awareness of falls and promotion of local falls prevention services. Strategy aligned with National Falls Prevention Strategy	All ages	Evaluation of individual projects, monitoring uptake of falls prevention services, monitoring of falls related hospitalisation rates	Project ongoing. Strategic Plan & Action Plan for 2010-11 in the process of being developed
Child Falls Prevention Education Project	Kidsafe Taranaki Trust	Taranaki DHB, ACC, Plunket	Health Promotion Unit, ACC	Delivery of group education sessions on falls prevention by trained educators to caregivers in various community settings (e.g. childcare centres, kindergartens, etc.)	Under 5's	Evaluation involves participant feedback from questionnaires and small sample participant telephone interviews. Measures include understanding and awareness of falls, and making positive changes to home environment to reduce risk. Also monitoring of under 5's falls related hospitalisation rates	Project ongoing
Tamariki Falls Prevention Project	Kidsafe Taranaki Trust	Taranaki DHB, ACC, Piki Te Ora Nursing Services	Health Promotion Unit, ACC	Delivery of age appropriate falls prevention education via one-to-one education sessions and safety checklist during routine well-child checks.	Under 5's (Maori)	Questionnaires following education session, monitoring of under 5's falls related hospitalisation rates	Project ongoing
Marfell Community Safer Homes Project	Kidsafe Taranaki Trust	Taranaki DHB, ACC, Piki Te Ora Nursing Services, Marfell Community Centre	ACC	Provision of safety equipment in homes. Referrals identified during home visits by Well Child Nurses and Kiawhina. Equipment provided includes safety gates, window catches and cupboard locks. Equipment is fitted by parents themselves, or by community centre volunteers.	Under 5's (low socio-economic)	Questionnaires following equipment fitting, monitoring of under 5's falls related hospitalisation rates	Project is currently offered only in Marfell area but Kidsafe Taranaki are seeking funding to extend into other areas

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Ladder Safety Promotions	ACC	Mitre 10, Carters, Alco	ACC, Mitre 10, Carters, Alco	Ladder Safety promotions include a regular ladies night at Mitre 10 (which includes a ladder safety quiz with stepladder as a prize) and ladder trade & exchange promotions at DIY stores to encourage consumers to replace old and potentially dangerous ladders as part of a national ACC promotion.	Adults	Numbers of participants are recorded. The Mitre 10 ladies night usually attracts around 500 people. Figures for ladder exchanges are recorded nationally by ACC.	Events will continue as long as DIY stores provide support.
Active in Age	Active in Age Coordinator (volunteer)	Sport Taranaki, independent exercise professionals	Self funding (user pays)	A community based exercise programme offering a weekly session of aerobics, bowling, Tai Chi, stretching, dancing, marching and other activities. Organised and managed entirely by volunteers.	Over 50's	The group is coordinated by volunteers and there is no formal evaluation. Over 100 people attend each week with some aged in their 80's.	Ongoing
"Well Aware" community based falls prevention education workshops	Peak Health Taranaki	Taranaki Falls Prevention Strategy Group, NZ Fire Service, opticians, podiatrists, nutritionists	ACC	A six week programme of falls prevention education aimed at raising awareness of falls risk factors and strategies to reduce falls risk.	Over 55's (referred by health professional and self referral)	Based on an existing evidence based programme (Stay on Your Feet) used in Australia. Evaluation form measures include intention to change behaviour as a result of new learning.	Funding for the programme ceased in 2009 but it is hoped that it will continue within existing resource (mainly presenters' time).
Older Persons / Kaumatua Wellbeing Days	New Plymouth injurySafe	Taranaki Falls Prevention Strategy Group, local older persons service providers, Mahia Mai A Whaitara, Owae Marae	ACC / New Plymouth injurySafe	Community based wellbeing days are attended by local older persons service providers and provide an opportunity for older people to find out more about health and lifestyle issues related to falls prevention and to try out activities such as Tai Chi, exercise, bowling etc. Health checks are also provided. The events primarily aim to link older people with falls prevention services and to encourage them to sign up to local exercise programmes.	Over 55's	Previous events have been evaluated using questionnaires completed on the day. Knowledge about falls prevention is also measured using a questionnaire at each event. Provider feedback is collected using a questionnaire after the event.	Ongoing

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Modified Tai Chi	Sport Taranaki	ACC	ACC	Free modified Tai Chi programme delivered over 16 weeks in various community settings, aimed at older people who have experienced a fall. Service is promoted in local media and at local groups/ events.	Over 65's (Over 55 if Maori or Pacific)	Modified Tai Chi is an evidence-based programme so local evaluation of effectiveness is not carried out. Attendance numbers monitored.	Ongoing although awaiting decision from ACC about future funding at a national level.
Age Concern Falls Prevention Project (Home Safety Checks)	Age Concern	Arthritis NZ, Taranaki DHB, Sport Taranaki, ACC	Age Concern	Age Concern field officer provides free home safety checks using the ACC Stand Up to Falls checklist and provides advice on making the home safer. Free night sensor lights are provided during the visit. Most referrals come from Arthritis NZ, hospital physiotherapists and Sport Taranaki.	Over 65's (Over 55's if Maori or Pacific)	The service is provided with the core services offered by Age Concern. There is no formal evaluation of the project.	Funding for Age Concern has been reduced in recent months. The project continues but is not widely advertised. Referrals from health professionals and other service providers are still accepted.
Home based physiotherapy exercise programme for frail elderly	Taranaki DHB (Physiotherapy)	ACC	Taranaki DHB	Previously known as the 'Otago Exercise Programme' or OEP, this service has been adapted due to ACC funding ceasing in 2009. Physiotherapists will still prescribe a home based exercise programme for frail elderly with history of falls but no longer provide follow up support visits in the home.	Frail elderly (usually over 75 years)	Clinical evaluation using strength and balance tests at follow up visits.	Ongoing. Format of future delivery may be affected by planned changes to DHB service delivery.
GRx in Rest Homes	Sport Taranaki	Rest Homes, Taranaki DHB	ACC	A green prescription programme for rest homes that provides 10 weeks of group exercise to older people within the rest home. The classes are led by a trained exercise instructor who, over the 10 weeks, also trains care staff to continue the exercise programme.	Older people in rest homes	Evaluation form is completed by Rest Home staff who participated in the 10 week programme. Rest homes will be contacted after 3 months to see if scheme is continuing.	The GRx programme was trialled in one rest home early 2010 and is now being rolled out to 10 rest homes over the next 2 years.

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Falls Prevention Training in Rest Homes	New Plymouth injurySafe	ACC, Rest Homes	New Plymouth injurySafe	Delivery of in-house falls prevention training to rest homes across Taranaki to educate staff on falls risk factors within the rest home and to enable them to develop an action plan to address those risks.	Older people in rest homes	Each training course was evaluated using a questionnaire completed by staff after the training. Measures focused on re-call of knowledge and identification of actions that staff could take to reduce falls risk.	20 rest homes received training in 2009. The training programme will offered again later in 2010.
Modified Tai Chi in Rest Homes	ACC	Rest Homes	ACC	A Train the Trainer scheme for rest home care staff and diversional therapists to enable them to deliver Modified Tai Chi within a rest home or villa setting.	Older people in rest homes and villas	An evaluation form was completed following the training. Rest homes will be followed up after six months to monitor numbers of rest homes that have set up Tai Chi groups and how many are still running.	There are no plans to offer this training in the future as ACC funding for the Trainer has discontinued.
"Keeping Up" newsletter	New Plymouth injurySafe	Taranaki Falls Prevention Strategy Group	ACC / New Plymouth injurySafe	A quarterly 'falls prevention network newsletter' that is circulated to the older persons service provider network to raise awareness and knowledge about falls prevention issues, to share information and to celebrate good practice. The publication is usually 8 pages. Around 200 colour copies are mailed out each quarter as well as further copies via an electronic mailing list.	Older persons service providers in Taranaki (including rest homes)	A feedback questionnaire (linked to a competition) was included in an early issue of the newsletter. Most feedback is verbal or by email from recipients who have commented that they find the publication useful.	Ongoing. Publication is printed but if funding is reduced the publication could continue as an electronic newsletter.

CASE STUDY 1 – Child Falls Prevention Project

Hospital data shows that over two and a half thousand pre-schoolers are hospitalised for unintentional injuries every year in New Zealand. Most of these injuries occur at home and the majority, almost half, are the result of a fall. In 2002, the Kidsafe Taranaki Trust developed a pilot project to deliver falls prevention information to groups of parents and caregivers. The following year it was expanded with inclusion of a Maori strategy. The basis of both projects is to make caregivers aware of the changing risks associated with the different developmental milestones in the pre-school years and provide advice and samples of appropriate safety devices while emphasising the importance of supervision. The approach is based on safety literature and has now been delivered to over 2,000 families.

Based on a typical annual evaluation report including over 300 participant questionnaires and 70 follow up phone surveys the following results have been achieved:

- 98% increased understanding of causes of falls to under fives
- 97% aware of prevention strategies
- 59% made changes to home environment
- 64% reported increasing or improving supervision

The project was developed collaboratively for Kidsafe Taranaki by representatives from ACC and Health Promotion and has been delivered for the past eight years by a small number of trained group facilitators who deliver the education sessions in early childhood centres and other community settings. The kaupapa Maori strategy was developed at a consultation hui with Maori providers and whanau. It has been delivered in North Taranaki by Piki te Ora Nursing Services as part of their Tamariki Ora programme with falls prevention education delivered on a one-to-one basis during home visits.

Because Kidsafe Taranaki can access and analyse local paediatric admission data, we can see that there has been a dramatic decrease in injuries to under fives caused by falls in the home since this project started. The rate of hospital admissions since 2002 has been halved and we have gone from having a rate that was 34% higher than the national average to a rate 33% lower in 2008.



CASE STUDY 2 – Community Tai Chi Classes

Tai Chi has been demonstrated in research studies to reduce the risk of falls in the older person by up to 47 % when practised on a regular basis. Community classes of Tai Chi, modified to suit older adults who are at risk of falling due to deterioration of strength and balance, have been delivered in Taranaki since 2002. Eleven courses are currently running in nine different locations over 16 weeks with the aim of reducing the risk of falling for our older population.

The modified tai chi programme has been externally evaluated by Auckland University of Technology using a standard step test to assess strength and balance at the beginning and end of the course. The evaluation shows that 88% of participants demonstrated improvement in strength and balance.

Modified tai chi for falls prevention was introduced by ACC and is now coordinated by Sport Taranaki and linked to the Green Prescription programme. It has been widely promoted through the New Plymouth Positive Ageing network and by Age Concern. It is also profiled at the regular Wellbeing Days organised by New Plymouth injury Safe as part of the regional falls prevention strategy. In the past two years, ACC has provided free instructor training for people working with older adults either in the community or in rest homes so that they can deliver the many benefits of tai chi directly to those they work with.



Locally, older people have enthusiastically taken to tai chi. It was a real challenge to introduce a new type of activity that was quite different to what many people thought of as exercise however well over a thousand Taranaki residents have now participated in community classes. Clinical studies in the US report improved balance after only 8 weeks. Other, less expected, benefits of tai chi include improved working of internal organs, better breathing and finding it easier to sleep at night. Most people report more strength, stamina and suppleness as a direct result of doing their tai chi, real improvements to their quality of life.



Home Safety

Children (0-4 years)

- Poututangata Wahakura Wananga
- Paracetamol Poisoning Project
- Better Homes Safer Children
- Kia Tupato Tamariki

Adults (All Ages)

- Taranaki HSE Centre Home Safety Demonstration Display
- Taranaki HSE Centre Business House Safety challenge
- Workplace Home Safety Expos
- Wellington School of Medicine Home Injury & Intervention Study
- Poututangata Research Study

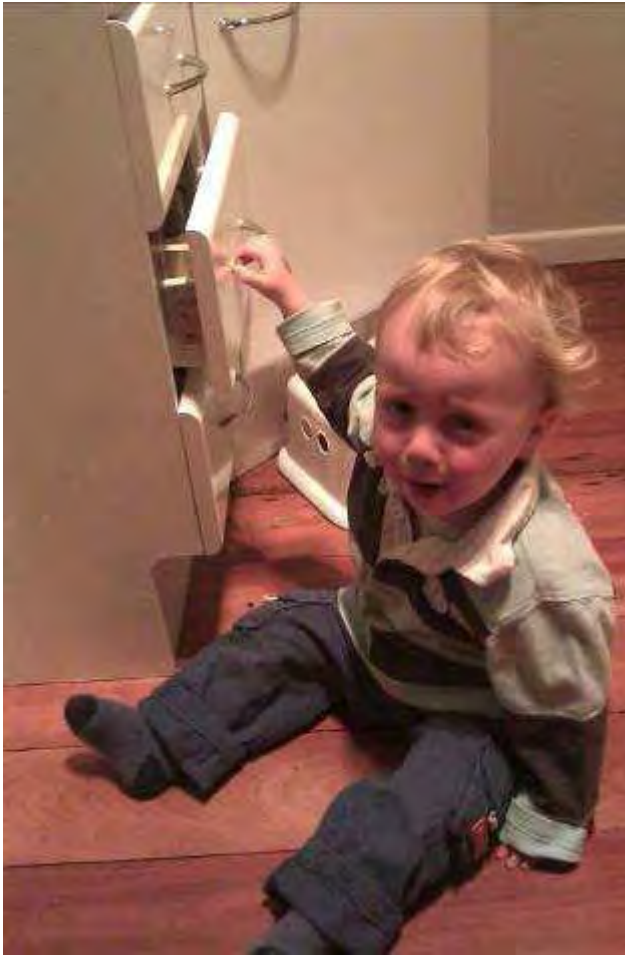


Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Poututangata Wahakura Wananga	Poututangata	Tui Ora	Tui Ora	A practical weaving workshop held over 2 days at Parihaka Marae. Workshop delivered key safety messages relating to care of young babies, with a particular focus on prevention of SIDS.	Babies under 1 year, Maori	Evaluation report containing qualitative feedback from participants involved in the wananga was produced and circulated by Poututangata	One off event, although there are plans to run this workshop again at a later date
Paracetamol Poisoning Project	Kidsafe Taranaki	Peak Health Taranaki, GP practices	Taranaki DHB (Health Promotion), Peak Health Taranaki	Education project delivered by 12 GP practices utilizing the GP/nurse consultation to provide information to caregivers on poisoning prevention including information about correct dosage and storage of medication. Caregivers are also provided with a free cupboard latch to store medication.	Under 5's	Telephone interviews with a sample of participating caregivers to determine knowledge of the scheme and awareness of key messages. Participants' use of the free cupboard latch is also measured. Surveys are carried out with GP practices to review and improve the project.	Ongoing
Better Homes Safer Children	Kidsafe Taranaki	WISE Better Homes	ACC, Ministry of Health, Lotteries, COGS	Installation of safety equipment such as stair gates, cupboard latches and window locks into the homes of children under 5 years along with provision of child safety information. Focus on low income families. Project ended 2007.	Under 5's, low income families	Project is evidence based. Evaluation carried out using feedback forms completed by parents and caregivers following installation of equipment.	Ended 2007 due to lack of funding and delivery capacity
Kia Tupato Tamariki (Child injury prevention resource)	Kidsafe Taranaki Trust	Taranaki DHB, Kohanga Reo	Taranaki DHB (Health Promotion)	Injury prevention resource kits (story book, videos, fact sheets and resource guidelines) designed to be used as a teaching tool for pre-school centres, Kohanga Reo, Kura Kaupapa Maori and primary schools. Resource aims to reduce the number and severity of unintentional injuries in the home to children aged 3-6 years olds with a focus on burns, falls and poisoning.	Under 5's	Evaluation form provided with resource used to measure appropriateness of resource and inform future development of its contents	Kidsafe Taranaki Trust aim to develop a wananga to relaunch the kit to Maori medium education staff

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki HSE Centre Home Safety Demonstration Display	New Plymouth injurySafe	ACC, Taranaki Construction Safety Focus Group, Taranaki HSE Centre	New Plymouth injurySafe, ACC, CApENZ	Interactive home safety display area at the Taranaki HSE Centre that can be used as a static information display as well a practical resource for use by training groups to highlight home safety hazards	Adults	Evaluation of the resource itself has not been carried out although initiatives that have involved use of the resource have been evaluated (e.g. Business House Safety Challenge events)	Ongoing
Taranaki HSE Centre Business House Safety Challenge	New Plymouth injurySafe	ACC, Department of Labour, Red Cross, NZ Fire Service, Police, Roadsafes Taranaki, Sport Taranaki, SADD.	New Plymouth injurySafe	Practical, interactive safety competition aimed at health & safety representatives from local businesses. Teams undertake a range of practical safety challenges relating to home safety (e.g. fire safety, first aid, safe ladder use) and are awarded points for safety knowledge and skills. Held as annual event during Safety Week. Participants are encouraged to arrange similar practical workshops in their own workplaces by establishing links with safety providers running activities on the day.	Adults	Feedback is obtained from participants using an evaluation form to identify what they have learnt and how they could use this to run similar workshops in their own workplace. Follow up has shown that some of the companies have gone on to arrange road safety, fire safety and first aid activities in their workplace.	Ongoing (run as an annual event)
Workplace Home Safety Expos	ACC	Taranaki HSE Centre, Department of Labour, safety groups (Roadsafe Taranaki, Red Cross, Plunket etc.) and local employers (e.g. New Plymouth District Council, STOS, Stratford Peaker Project).	N/A	Delivery of workplace safety expo-style events that focus on home safety in particular. Activities on offer include health checks, ladder demonstrations, sunsmart displays (for outside workers), road safety activities and first aid workshops. ACC also provide presentations on home safety and road safety within workplaces.	Adults (in the workplace)	The events usually run quizzes aimed at raising awareness of home safety issues to encourage discussion with event presenters.	Ongoing and delivered in response to requests from workplaces

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Wellington School of Medicine Home Injury Study	Wellington School of Medicine, Otago University	Wellington School of Medicine, WISE Better Homes, Home-owners	ACC (Phase 1), Health Research Council (Phase 2)	Ongoing research study that has undertaken a hazard assessment of over 1000 older (pre-1977) homes in Taranaki and is now carrying out low cost remedial repairs to half of the homes to measure impact on injury rates.	All ages	Evaluation is built into the research study.	Project planned to end in 2012 after which results will be published
Poututangata Research Study	Tui Ora Ltd	Manaaki Oranga, WISE Better Homes, New Plymouth injurySafe	Ministry of Health	Participatory Action Research project that aimed to identify injury prevention priorities for Maori in Taranaki. Training was provided to community researchers to undertake participatory research within their own community. Priority issues identified included child safety in the home, youth safety (particularly on the roads) and older persons safety (falls). Research findings were presented at a local seminar and the Poututangata action group was established to address the issues that were raised.	All ages, Maori	Research report was produced and disseminated.	Lack of funding has limited follow up since the research project. Tui Ora plan to work with Poututangata during 2010-11 to develop an action plan to address the issues

CASE STUDY 3 – Paracetamol Poisoning Prevention Project



Children aged under 5 years are statistically at more risk of unintentional poisoning than any other age group. The Paracetamol Poisoning Prevention Project aims to reduce the incidence of unintentional paracetamol poisonings in children aged under five. It is a partnership initiative between Kidsafe Taranaki Trust (KTT), Peak Health Taranaki Primary Health Organisation and 12 GP practices.

The project involves the delivery of poisoning prevention education by GP's or nurses whenever paracetamol is prescribed to under 5's. During, or immediately following a consultation, the caregiver receives a five to 10 minute informative session on poisoning prevention. The safe and accurate dosage for their child is emphasised as well as ways to create a safe physical environment, relative to poisoning prevention. This approach was developed to be consistent with good practice for injury prevention initiatives, which suggests that education and information alone will not change behaviour.

All participants are provided with a free cupboard latch to secure medications. These 'give-aways' are well received by parents/caregivers and follow up phone calls have found that a high percentage of participants go on to install the cupboard latch.

This project ultimately aims to reduce the number of children aged under five presenting to Emergency Departments or admissions for unintentional poisonings in Taranaki. The most recent analysis of Taranaki Base Hospital paediatric admissions data (in 2010) has shown that unintentional poisoning rates are falling in Taranaki.

Evaluation has been carried out using a telephone survey to measure parents/caregivers' knowledge and opinion of the project. The rate of behaviour change was found to be high and the project shows continuous success in outcomes. 100% of the sampled participants considered the project to be useful suggesting a real need for access to information and support of this nature by parents within the Taranaki community.

CASE STUDY 4 – Taranaki Business House Safety Challenge

The Business House Safety Challenge is a practical safety competition held each year at the Taranaki HSE Centre, a purpose built health and safety training centre. The competition is aimed at health and safety representatives from a range of local businesses in Taranaki. The competition themes focus largely on safety issues outside of the workplace including home safety, road safety and alcohol use.

The event involves teams (of up to 4 employees) taking part in a number of 20 minute practical exercises for which they are awarded points for safety knowledge and skills (e.g. completing a hazard ID, selecting appropriate PPE, team work and answering safety related questions). The activities cover topics such as fire safety, personal safety, correct fitting of child car restraints, alcohol, road safety, first aid, hazard identification, DIY and gardening tasks, chemical handling and physical fitness.

The event is organised and promoted by New Plymouth injury Safe with practical support from Police, ACC, Fire Service, Roadsafes Taranaki, Red Cross, Students Against Driving Drunk (SADD), Sport Taranaki, Taranaki Civil Defence, Plunket, Safety Intelligence Services, Taranaki HSE Centre and Department of Labour .

Contrary to popular belief, the home is the most likely place for injuries experienced by those of working age. The Business House Challenge provides a creative means of engaging the working age population in an initiative that promotes home safety.



The event , usually scheduled in Safety NZ Week, raises awareness of home safety among employees by focusing on the links between workplace safety and home safety. In particular, participants are encouraged to think about how safety knowledge gained and used within the workplace could be transferred to the home setting (e.g. through the use of PPE for household tasks).

The event also aimed to build links between workplace health and the organisations running activities on the day. For example, Health & Safety representatives on staff teams are encouraged to think about organising similar safety activities within their own workplaces. This has proved successful with a number of organisations going on to book practical training events (e.g. first aid training) or education sessions (such as the SADD students' fatal vision goggles activities or fire safety education) in their worksites.

Most of all, the activities were designed to be relevant and practical, and to reinforce existing knowledge and skills. The event also set out to enhance relationships between NPIS partners (e.g. ACC, Department of Labour, Police, Fire) and local business and industry partners. The event has proved successful in achieving this and has provided a strong basis on which to develop this relationship even further.

Workplace Safety

Young People

- Taranaki Secondary Schools Agricultural Safety Challenge
- Gateway Students HSE Safety Challenge
- Taranaki Skills Bus Tour
- Young Workers Safety Knowledge Survey
- Passport 2 Safety
- Trades Apprentice Safety Challenge

Adults (All Ages)

- Taranaki HSE Centre
- Taranaki Construction Safety Group (Education Programme)
- ATV Safety Project



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Secondary Schools Agricultural Safety Challenge	Agriculture New Zealand	New Plymouth injurySafe, ACC, Police, NZ Fire Service, Taratahi, Red Cross NZ, Francis Douglas Memorial College, Dept of Labour, secondary schools	New Plymouth injurySafe, ACC	An annual safety challenge aimed at improving safety knowledge and skills of agricultural students. Teams from local secondary schools participate in a competition style event, undertaking hands-on challenges such as stock handling, ATV driving and dealing with firearms. Event ends with a presentation by a farmer injured in an ATV accident. Teams are marked on safety knowledge, skills and teamwork as well as results in a quick fire quiz at the end.	Agricultural students (aged 15-16 years)	The agricultural challenge has been previously evaluated to measure impact of the event on knowledge and future behaviour. Feedback from activity leaders is used to inform event planning each year.	Ongoing (annual event)
Gateway Students HSE Safety Challenge	New Plymouth injurySafe	ACC, NZ Fire Service, Police, Dept of Labour, Red Cross, Roadsafes Taranaki, Taranaki HSE Centre	New Plymouth injurySafe	An annual safety challenge aimed at improving safety knowledge and skills of gateway (trades) students. Teams from local secondary schools participate in a range of practical safety challenges focusing on home, road and workplace safety for which they are marked on their safety knowledge.	Gateway Students, age 15-16 years	Evaluation forms are completed each year to identify recall of key safety messages and to inform future development of programme	Ongoing (annual event)
Taranaki Skills Bus Tour	New Plymouth District Council	Department of Labour, ACC, New Plymouth injurySafe, Career Service, WITT Polytechnic, Education Taranaki, local employers	N/A	The Skills Bus Tour aimed to provide a one day 'taster' of trade and industry to year 10 students in Taranaki, and to build relationships between schools and industry. The promotion of safety messages was an integral part of the project with an initial safety briefing and activities undertaken at the Taranaki HSE Centre followed up by industry specific messages at each worksite.	Students (Year 10)	Students completed a pre and post event survey to gauge their level of interest in trades careers and recall of key messages during the tour	Ongoing (annual event)

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Young Workers Safety Knowledge Survey	Department of Labour	Massey University, Secondary Schools	N/A	A knowledge and attitudes survey of all secondary school students in Taranaki to find out levels of participation in the labour force, training rates, experience of injury and attitudes towards workplace safety.	Secondary School students (13-18 years)	Survey found high rates of participation in paid labour, low rates of health and safety training and little awareness of safety rights and responsibilities.	Survey findings used to shape local workplace injury prevention priorities and activities
Passport 2 Safety	SCFNZ	ACC, Dept of Labour, secondary schools	SCFNZ	Pilot web-based health and safety training programme aimed at Year 10 students at four local secondary schools.	Secondary school students (Year 10)	Passport 2 Safety is an internationally evaluated training tool.	Pilot completed 2008
Trades Apprentice Safety Challenge	Taranaki Construction Safety Group	ACC, NZ Fire Service, Police, Dept of Labour, Red Cross, Roadsafes Taranaki, Taranaki HSE Centre	New Plymouth injurySafe, industry groups (sponsorship of prizes)	An annual safety challenge aimed at improving safety knowledge and skills of trades apprentices employed in the construction industry. Teams from local industry groups compete in range of practical safety challenges focusing on home, road and workplace safety for which they are marked on their safety skills and knowledge.	Young workers (18-25 years) working in the construction industry	Evaluation forms are completed each year to identify recall of key safety messages and to inform future development of programme	Ongoing (annual event)
Taranaki HSE Centre	Initially industry-led and then CAPENZ (Centre for Applied Engineering New Zealand) took on the role as manager and operator of HSE Centre	ACC, Dept of Labour, industry groups	ACC, Dept of Labour, oil & gas and engineering industry sponsors	A purpose built health and safety training centre designed for the construction, engineering and energy industry. Equipment in place to enable training in safe working at heights, confined spaces and other practical safety topics. The centre is also used by community groups for wider community safety training and hosts a range of fun Challenge events each year aimed at schools and businesses.	Construction Engineering and Oil & Gas industry workers	The use and ongoing promotion of the HSE Centre is regularly reviewed through the HSE Centre strategic management group	Ongoing

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Construction Safety Group (Education Programme)	Construction industry representatives	Dept of Labour, ACC	N/A	An informal group of construction industry representatives that meet regularly to plan seminars, training and other events to raise awareness of health and safety within the construction industry. The group organizes regular 'tool box talk' seminars at the Taranaki HSE Centre on safety issues. The group also provides a forum to share information and ideas.	Construction and Engineering industry workers	Seminars and training events are evaluated using feedback questionnaires that measure effectiveness of event and ideas to improve future planning	Ongoing. Tool box talks run every 2-3 months.
ATV Safety Project	Dept of Labour	Taranaki Motorcycles, Pacific Helmets, Dairy NZ, Massey University	Dept of Labour, Taranaki Motorcycles and Pacific Helmets (prize sponsors)	Trade stand space was purchased at two A&P Shows in Taranaki in November 2009 to highlight to farmers that there are safer alternatives to conventional ATV's. Data was also collected at the shows, and at farmers meetings, regarding farmers knowledge of the safe use of ATV's to inform the development of future ATV safety interventions	ATV users	Surveys completed by farmers at the events revealed that ATV injuries commonly occur and are often not reported, and there is good awareness of the safety guidelines but a low rate of compliance with them.	Study findings will be used to plan future ATV safety initiatives and locally. They are also being used to inform research at a national level.

CASE STUDY 5 – Trades Apprentice Safety Challenge

The Trades Apprentice Safety Challenge is an annual safety event organised by the Taranaki Construction Safety Group, an informal group of industry representatives with a shared vision of making the construction industry a safer place to work. In partnership with BCITO (Building & Construction Industry Training Organisation), the group ran their first ever Trades Apprentice Safety Challenge at the Taranaki HSE Centre in May 2009. The success of this initial event led to it becoming an annual event.

The Challenge involves teams of trades apprentices from local construction and related industries competing against each other in a practical, hands-on safety competition that tests their safety knowledge and skills as well as their teamwork ability. Tasks range from loading up a truck and working on scaffolding to putting out a small fire and responding to a first aid incident.

Feedback from industry partners suggests that the Challenge is seen as a valuable training opportunity that is particularly relevant to young people starting out in their trades career.

Following last years competition (2009), three apprentices from one of the teams went on to witness a workplace accident just two weeks later, where a colleague fell from scaffolding and suffered a serious back injury. The apprentices stated that what they had learnt during the first aid activity at the Challenge equipped them to confidently respond to the incident involving their injured colleague. One apprentice went off to call an ambulance and the remaining apprentices administered basic first aid to the injured worker. One apprentice even used his shirt (which he had won at the Challenge event) to control the blood loss of his colleague.



Although in this instance the Challenge event had not prevented the injury, it equipped those who participated with the skills needed to apply basic first aid and reduce the risk of further injury. The ambulance crew who arrived on the scene commented that the apprentices responded appropriately and professionally, and that their actions ensured that his injuries were not worsened. The injured worker made a good recovery after an extensive rehabilitation period.

Another team who performed particularly badly in the first aid activity in the 2009 competition were awarded first aid training as a sponsored prize. Imagine how pleased the first aid trainer was to see the same team came back in 2010 and won the first aid category!



CASE STUDY 6 – Taranaki HSE Centre

The Taranaki Health Safety and Environment (HSE) Centre is a major initiative between the Centre of Applied Engineering NZ (CApENZ), the Accident Compensation Corporation (ACC) and local industry to offer wide-ranging safety training across the community, taking pressure off individual businesses needing to adequately train their staff and ensuring a uniform high standard of training. Originally planned as a resource to change the way in which safety awareness training and induction was delivered to staff within the engineering industry, the centre's focus has been expanded to include all facets of the community after strong support from interest groups.

The idea for the development of the Taranaki HSE Centre was initially proposed by Simon Taylor, CEO of Transfield Worley who set up the CEO forum to oversee the development and use of the centre. The vision and subsequent funding to turn that vision into a reality was based on a partnership between a number of local industry partners who continue to financially support the Centre.

The facility is operated by CAPENZ to deliver NZQA accredited courses, including a locally developed Taranaki Passport training programme. The centre is also a service provider for the facilitation of training courses for all sectors of the community and provides a one-stop shop for HSE training. The CEO forum, made up of industry players, directs and manages the operation of the centre. They also support the centre with ongoing sponsorship. The CEO forum also empowers the HSE Strategy Group to identify health and safety initiatives to raise the bar in HSE excellence. The HSE centre aims to change the way in which safety awareness training and inductions are delivered to people in the community and industry.



The centre is suitable for all operations personnel including management, operators and contractors in all industries, as well as community groups and schools. It offers participants a tailor-made range of training, ranging from exercises, team discussions and debate, to visual, audio and touch facilities with practical interactive displays of equipment and hazards. It consists of three training rooms and a major training hall containing practical training equipment and static HSE information displays. Each display suite is relevant to the hazards encountered on-site, and requires tasks to be completed before moving to the next section. The inclusion of modules on road safety, nutrition, alcohol, sports safety and home safety distinguishes the Taranaki HSE Centre from most other workplace training facilities.

At the completion of training, participants will boast an NZQA-accredited one-day basic safety awareness qualification. The courses have been developed with industry and can be tailor-made on request. Please visit <http://www.capenz.co.nz/#/HSE%20Centre/Home/> for more information.



Leisure Safety

Children (5-14 years)

- District Council Playground Audits
- Quality Learn to Swim Programme
- Beach Education Days – theoretical and practical education programme designed to teach children how to enjoy the beach safely.
- School playground safety audits
- Scoping research of serious sporting injuries among children aged 5-14 years
- AWE Schools Learn to Swim programme
- From the Horses Mouth

Adults (All Ages)

- Sports Injury Prevention Seminars



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
District Council Playground Safety Audits	New Plymouth District Council	ACC	ACC, New Plymouth District Council, Taranaki DHB	Safety audit of 51 council owned playgrounds across New Plymouth district against NZ Safety Standards 5828 and non-compliance recorded. Structural condition, potential for body entrapment and evaluation of safety surfaces was also carried out. A repair and replacement programme was put in place following the audit. Compliance targets included in LTCCP. Audit is now carried out every 3 years.	Children (0-14 years)	Safety audit report identified repairs and suggestions for safety improvements. Repair and replacement programme implemented. Level of compliance against other district councils is measured.	Regular inspection, repair and replacement of playground equipment is ongoing. Compliance continues to be a key performance indicator in the LTCCP.
Quality Learn to Swim Programme	Swimming Taranaki	Local Swimming Clubs, New Plymouth District Council	User fees	Learn to Swim programme delivered at 4 local swimming pools using a mixture of paid and volunteer coaches. Children who participate in the lessons are encouraged to progress via a squad development programme and local competition schedule.	Children (5+ years)	Learn to Swim programmes are accredited bi-annually through the Swimming NZ/SCAT Quality Learn to Swim initiative that requires swim schools to conform to nationally recognized safety and teaching standards.	Ongoing. Swimming Taranaki is developing a Coaching Mentoring Programme to provide professional development support to volunteer coaches
Beach Education Days	Surf Lifesaving Taranaki	Primary & Intermediate Schools	Surf Lifesaving Taranaki & various private sponsors	Theoretical and practical programme designed to teach children how to enjoy the beach safely, understand key beach safety messages and to introduce them to Surf Lifesaving. Each school is offered one Beach Education Day every 2 years aimed at Years 0-8.	Students (5-13 years)	The local programme is based on a national model that is subject to ongoing Internal and external review	Ongoing

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
School Playground Safety Audits	New Plymouth District Council	Primary Schools, ACC, New Plymouth InjurySafe	N/A	Resources and safety checklist provided to schools to enable them to carry out their own injury audits and playground safety audits.	Primary School Students (5-11 years)	N/A	Practical training seminar for school Boards of Trustees planned for 2010 to coincide with NPDC playground audit taking place.
Sports Injury Research Study	Taranaki DHB (Health Promotion)	Sport Taranaki, Schools, Sports Clubs, Kidsafe Taranaki Trust	Taranaki DHB (Health Promotion)	Scoping research of serious sporting injury among children aged 5-14 involving Sport Taranaki and local sports clubs to determine level and types of injuries experienced by children aged 5-14 years, attitudes to injury, existing sport injury prevention programmes and gaps in provision. Research was followed up by a series of seminars aimed at sports providers.	Children (5-14 years)	N/A	Development of future injury prevention programmes to be undertaken by Sport Taranaki. Seminar programme now delivered by Sport Taranaki
AWE Schools Water Safety Programme	New Plymouth District Council (Todd Energy Aquatic Centre)	New Plymouth District Primary Schools	AWE (Australian Worldwide Exploration)	Water Safety education programme based at the Todd Energy Aquatic Centre that teaches basic theory and practical water safety skills to all Year 6 primary school students over five sessions. The programme is free to schools.	All Year 6 Primary School students (10-11 years)	Programme is being run as a pilot with 2 schools. Internal evaluation will be undertaken before the programme is rolled out to all schools.	Aimed to deliver to 1200 students in 2010 (dependent on future funding)
From The Horses Mouth (horse riding safety resource)	Kidsafe Taranaki	New Zealand Pony Clubs Association	ACC	Development of a printed resource aimed at young horse riders aged 10-14 to highlight safety issues relating to horse riding and provide guidance on correct equipment and riding technique	Horse riders (10-14 years)	N/A	Printed resources still available to the community
Sports Injury Prevention Seminars	Sport Taranaki	YATA, Drug Free Sport New Zealand and other relevant presenters, Sport Clubs	N/A	Regular seminars on a range of topics including injury prevention, dealing with injuries, drugs & alcohol in sport and other topics. Sport Taranaki deliver the seminars to sports clubs and within workplaces.	Sports Clubs, Coaches, athletes	Evaluation forms are used to gain feedback from seminars on the relevance of content to inform future seminars	Ongoing

CASE STUDY 7 – AWE & NPDC Water Safety in Schools Programme

Research from Water Safety New Zealand in 2008 has shown that only 25 percent of year six students in New Zealand are able to swim 25m or treat water, a decline on previous years. The research also suggests that such skills are declining due to lack of access to appropriate facilities, a lack of qualified teachers and cost restraints. New Plymouth District has many rivers and lakes and a long coastline, so learning to swim is an essential life skill for local children.

The Water Safety in Schools Programme is a joint funding partnership between New Plymouth District Council and Australia Worldwide Exploration (AWE). AWE is the operator and major equity holder of the Taranaki offshore Tui Oil Field with joint venture partners NZOG, Mitsui E&P Australia and Pan Pacific Petroleum. The initiative aims to improve water safety skills among school children by providing free water safety tuition to all year six students in New Plymouth District during school time.



The students receive five practical sessions that give them a good knowledge of water safety and survival skills, with tuition provided by New Zealand surf lifesaving team captain, Glenn Anderson, and the Council's aquatic team. The programme hopes to achieve as many children as possible being able to swim 200m continuously by the age of 12. Students from Welbourn and Central schools in New Plymouth were the first to complete the programme and students from about 40 schools around the district will be offered the chance to take part over the coming year.

Central New Plymouth schools will be the first to participate in the programme, followed by Waitara, Inglewood and Okato, where the community pools would be used during the summer.



CASE STUDY 8 – District Council Playground Audits

During February 2007, 51 playgrounds were audited on behalf of New Plymouth District Council. The audit was funded by New Plymouth District Council with funding contribution from ACC and Taranaki District Health Board. This was the first time an audit of this scale had been undertaken in the district. The playgrounds were inspected to measure their level of compliance to the New Zealand Standard for playground equipment and surfacing. The audit included an assessment of maintenance standards and provided recommendations for bringing equipment up to meet Safety Standard requirements but did not include evaluation of the structural integrity of the equipment.

An externally appointed inspector completed the audit, accompanied by two New Plymouth District Council Parks playground maintenance staff. The assessment included all moving parts, bolts and fasteners, chains and ropes, safety surfacing, missing components and footings/equipment stability. Issues of metal and structural fatigue were flagged for further investigation. Equipment was evaluated for potential head and body entrapments, and safety surfacing was reviewed in terms of whether fall zones and surfacing materials met NZ standards. A photographic record of each site and identified safety issues was taken.

The level of compliance to the safety standards was found to be at a low level although there were not a substantial amount of high-risk playgrounds in the district. Many of the non-compliance issues were found to be of a minor nature that could be rectified with programmed renewal of the playground. The most commonly reported areas of non-compliance were inadequate surfacing of fall zones, swings hung too closely together on swing frames and embankment slides that were too high with inadequate safety surfacing around them. It was recommended that some playgrounds, particularly high use, poor condition playgrounds with inadequate safety surfacing, should be entirely renovated.

The findings of the audit led to the implementation of a significant renewals programme. Key Performance Indicators (KPI's) relating to playground safety standards have been developed, and compliance targets are incorporated into the Long Term Council Community Plan (LTCCP). Playgrounds are now checked on a weekly or monthly basis depending on the level of use of the facility, with reactive and proactive maintenance carried out. Minor maintenance is carried out as required and major maintenance is programmed throughout the year.

The council has made a commitment to repeat the independent audit every 3 years and the next one is due in 2010. When this audit takes place, New Plymouth District Council and New Plymouth injurySafe hope to make use of the auditors knowledge by offering a practical training seminar aimed at primary school Boards of Trustees across the district.



Road Safety

Children (0-4 years)

- Child Restraint Installation Clinics
- Child restraint roadside compliance checks
- Booster seat promotions

Children (5-14 years)

- Walking School Buses
- BikeWise (Wild West Bike Fest)
- KIDDS (Kids Involved in Driving Down Speed) road safety project
- Cycle Safety training in schools
- School Bus Safety Project
- St John Bosco School Cycle Safety Project
- Reclaiming the Streets parties

Young People

- Ready2Drive Road Safety Expo
- Scooter safety training & policy development in schools
- SADD (Students Against Driving Drunk)
- Young Drivers Day
- Taranaki Motorsport Youth Driver Training

Adults (All Ages)

- 'Grim Reaper' Intersection campaign
- Bikewise Wild West Bike Fest
- Driver Reviver stops

Older Adults

- Older Driver Refresher courses



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Child Restraint Installation Clinics	Kidsafe Taranaki	Plunket	ACC, Taranaki DHB (Health Promotion)	Community based practical education sessions aimed at raising awareness of correct fitting of child restraints and adjusting/fitting seats were necessary. Usually held in early childcare centres where parents can bring their vehicle and child restraints in for checking.	Children 0-8 and their caregivers	Number of rectified faults are counted. Compliance is monitored through roadside check points.	Original funding source has ended so continuation would depend on community road safety grant funding
Child Restraint Roadside Compliance Checks	Kidsafe Taranaki	Police, Plunket	ACC (koha for volunteers)	Roadside compliance checks carried out by police and Plunket staff. Police stop vehicle and Plunket staff check for correct restraint use. Incorrectly fitted restraints are corrected and Police may issue a verbal warning or infringement notice if child totally unrestrained.	Children 0-8 and their caregivers	Monitoring compliance rate trends over time.	Ongoing
Booster Seat Promotions	Kidsafe Taranaki	Plunket, Police Education Officers	ACC, Taranaki DHB (Health Promotion)	Education sessions and media publicity to promote continued use of booster seats for children up to 140cm.	Children up to 140cm in height	Compliance is monitored through roadside check points.	Ongoing dependent on community road safety grant funding
Walking School Buses	Roadsafe Taranaki	New Plymouth District Council, Kidsafe Taranaki, primary schools, RoadSense (until 2009), Police Education Officer	Roadsafe Taranaki	Development of a safe, supervised walking bus service within local primary schools to encourage more children to walk to school. Support (funding, resources and advice) provided to schools to set up and manage new walking bus services. NZTA Walking School Bus resource packs also distributed to schools.	Primary school students (5-11 years)	Schools that have received Roadsafe Taranaki funding provide evaluation reports outlining their progress and reporting numbers of students using the service.	Ongoing. Additional schools that wish to develop a walking bus are encouraged to apply to Roadsafe Taranaki.

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Cycle Safety Training in Schools / Adult Cycle training	New Plymouth District Council	NZTA cycle trainers, primary schools, Police	New Plymouth District Council, NZTA (Model Communities Funding)	Pilot programme of Level 1 & 2 cycle safety training courses held at 4 New Plymouth primary schools in line with NZTA guidelines. This will be extended to include all year 6 students in New Plymouth primary schools as a result of the district receiving Walking & Cycling Model Communities funding this year. An adult cycle safety training programme will also be developed to build skills and confidence in adults, in particular those who are returning to riding after many years.	All year 6 primary school students (10-11 years)	Measured include numbers of children completing and passing Level 1 training (& Level 2 if appropriate)	Training to be extended to all Year 6 primary school students in 2010.
KIDDS (Kids Involved in Driving Down Speed)	New Plymouth injurySafe	ACC, RoadSense, Police, New Plymouth District Council, NZTA, primary schools	Roadsafe Taranaki, ACC	A participatory research project that involved primary school students carrying out research into road safety issues around their schools and developing their own solutions to address the problems. Students presented their findings at a local conference and worked with road safety representatives to implement a number of local school based projects. The project won the education category in the NZ Road Safety Trust awards 2008.	Primary school students(5-11 years) and their parents and caregivers	Feedback from teachers involved in the projects was recorded. Measures of success of the project included tangible changes around the school environment (e.g. installing signs, changes to car park spaces, etc.).	Project ended 2008. School Bus Safety project developed in 2009 after using same model.
School Bus Safety Project	New Plymouth injurySafe	RoadSense, Police, Transit Coachlines, primary schools	Roadsafe Taranaki	A participatory research project based on the KIDDS project model. Primary school students using school buses carried out research into safety issues (hazards, risks, etc.) affecting those who use school buses and developed solutions to address them.	Primary school students (5-11 years) using school buses	Feedback from teachers involved in the projects was recorded. Measures of success of the project included tangible changes within the schools .	Research phase completed and interventions currently being implemented

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
St John Bosco Cycle Safety Project	St John Bosco primary school	New Plymouth injurySafe, New Plymouth District Council, Police, RoadSense	Roadsafe Taranaki	Participatory research project where a team of students investigated levels of walking/cycling at their school and then identified barriers to cycle use in particular. Following the research the students organized a cycle fun day that included Level 1 cycle safety training for all senior students with a bike. The school also set up a walking school bus.	Primary school students (5-11 years)	Evaluation measures focused on numbers of children walking and cycling before and after the project. One month after the project cycle use had increased 30% and walking had increased a similar amount (via the walking school bus)	One-off project, although walking school bus continues.
Ready2Drive Road Safety Expo	New Plymouth injurySafe	ACC, Roadsafe Taranaki, Police, New Plymouth District Council, SADD, AA Advanced Driver Training, Secondary Schools	Roadsafe Taranaki	A one day road safety expo aimed at Year 10 students to promote road safety messages around alcohol, restraints, road rules and scooter safety. Activities included the seatbelt simulator, fatal vision goggles and on-line based activities. The event concluded with a vehicle extraction demonstration with the Fire and Ambulance service.	Secondary School students (14-15 years)	Evaluation form was completed by students to measure recall of information, changes in knowledge and potential impact on behaviour. Also used to inform future event planning.	Due to the success of this event, an annual Ready2Drive expo is being offered to all secondary schools in New Plymouth district.
Scooter Safety Training & School Policy Development	ACC	AA Advanced Driver Training, secondary schools	ACC	A one-hour practical scooter safety training session provided within school to those students riding scooters or intending to ride one. An experienced AA Advanced Driver Training instructor delivers the training. Session focuses on correct safety wear, correct bike handling and defensive driving. ACC work with the schools at the same time to encourage development of policies requiring students to wear safety clothing when riding scooters to school.	Secondary school students who ride motor scooters.	Students complete scooter safety quiz to assess safety knowledge. Assessments carried out during training by AA trainer	Two schools have taken up the training this year. Training is being offered to all secondary schools in Taranaki.

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
SADD (Students Against Driving Drunk) education sessions	SADD	Roadsafe Taranaki, secondary schools	Roadsafe Taranaki, NZTA	A peer education programme that aims to reduce road crashes caused by drunk drivers. The programme is run in secondary schools, by students, and is incorporated into the school curriculum. SADD is open to any student across all year groups, and students develop the activities they deliver to take account of the unique environments in which they are run. E.g. SADD week at schools, workplace educational sessions, field days etc.)	Secondary school students aged 13-18	SADD underwent national evaluation in 2004. The evaluation report recommendations led to an update in strategic direction. Local implementation of SADD continues to be guided by that national SADD programme.	Ongoing. The programme is currently delivered in 3 secondary schools additional school are being encouraged to establish groups.
Young Drivers Days	Roadsafe Taranaki	Police, New Plymouth injurySafe, New Plymouth District Council, Police, Holden Advanced Driver Training	Roadsafe Taranaki	A practical road safety event where young drivers can participate in a free one-hour programme that includes in-car skid control training run by Holden Advanced Driver Training. Other activities include the seatbelt simulator, fatal vision goggles and a visit to the Booze Bus. Parents who attend are also encouraged to participate in the activities.	Young drivers aged 15-25 and their parents	Participants fill out an evaluation form to measure changes in knowledge before and after the session and to inform planning of future events. Road Safety Quiz is also completed.	Annual event.
Taranaki Motorsport Youth Driver Training initiative	Taranaki Motorsport Driver Education Trust	New Plymouth District Council, Roadsafe Taranaki, The Rock (radio station), local businesses	Roadsafe Taranaki, in kind funding and sponsorship from local business	A one-day youth driver training event was held in June 2010 to provide young people practical hands on experience of safe braking and collision avoidance. The event also served as a formal promotional launch of the project aimed at attracting potential investors and corporate sponsors to enable a purpose built facility to be developed. The long term aim is to establish a driver-training centre to provide practical youth driver training which is through corporate training income.	Corporate employees requiring driver training, young drivers up to 24 years who are progressing from restricted to full licence	An evaluation framework has been put in place for pre and post training assessment of driving skills and behaviour	Future of project depends on level of private investment and corporate use

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Schools Reclaiming the Streets Parties	New Plymouth injurySafe	Roadsafe Taranaki, Police, ACC, New Plymouth District Council, primary schools	Roadsafe Taranaki, supermarkets (food sponsorship)	Based on the 'Reclaiming the Streets' philosophy of David Engwicht, street parties have been held outside local schools with the intention of raising awareness of school location and reducing speed of passing traffic. Students make contact with drivers and pass out information, as well as asking them to reduce speed in future when passing the school.	Drivers commuting and/or parking outside local primary schools	Feedback from participating schools.	Future street parties will be supported if requested by schools
Bikewise Wild West Bike Fest	New Plymouth District Council	Cycle Clubs, Cycle shops, New Plymouth injurySafe, Police, primary schools	New Plymouth District Council, NZTA	A month full of cycling activities held in February each year including pedestrians street parties, BMX club displays, Rogaine, twilight cycle rides, school bike days and 'Frocks on Bikes' events. The event aims to encourage more people to consider using bikes for short local journeys.	Cyclists, all ages	Review undertaken by planning group each year to identify what events were successful and why, to inform planning for next year.	Annual event
Driver Reviver Stops	ACC	Roadsafe Taranaki, Tainui Playgroup, Police, St John 'Volunteer Ambulance	ACC, Roadsafe Taranaki	Driver reviver stops are held on routes that are typically used by long distance drivers (e.g. SH3). Drivers are stopped by the police and volunteers provide driver fatigue information, a bottle of water and a voucher to use at a local café. A survey is also carried out to find out journey details and knowledge and attitudes towards driver fatigue.	Drivers, all ages	A survey is carried out with all drivers stopped during the event. Drivers are asked about the length of their journey, stops and knowledge/ attitudes about fatigue. Trends are recorded over the years.	Annual event, now led by Roadsafe Taranaki

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Grim Reaper Intersection Campaign	New Plymouth injurySafe	Police, Roadsafes Taranaki, Midweek newspaper	Roadsafe Taranaki	A local variation on the NZTA grim reaper intersection campaign. A local 'lookalike' was recruited to sit beside a replica wheel of misfortune at selected intersections over a 2 week period. Extensive coverage through the Midweek newspaper in terms of the competition to find the lookalike, and coverage of the campaign in following weeks.	Drivers at selected intersections	Media coverage was monitored over the campaign period. Drivers behaviour during the campaign and afterwards was captured on video.	The campaign launched a longer term intersection safety strategy that involves regular videoing at high risk intersections and issuing of infringement notices where appropriate.
Older Drivers Refresher Courses	Age Concern	Roadsafe Taranaki	NZTA, Roadsafes Taranaki	An adapted version of the discontinued NZTA Safe with Age programme that is delivered by an education workshop to older persons groups.	Older drivers (over 65 years)	The programme is based on evaluated Safe with Age materials, with permission of NZTA	Workshops delivered as required.

CASE STUDY 9 – Grim Reaper Intersection Campaign

Intersections are feature as the main cause of injury and non-injury road crashes in New Plymouth. 43% of local road crashes and 45% of State Highway crashes in our district occur at intersections.

The Grim Reaper intersection campaign utilized the national 'Intersections – Bad Calls can be Deadly' television advertisements to launch a longer-term road safety project focusing on intersection safety. In partnership with the North Taranaki Midweek newspaper a competition was launched to find a 'lookalike' Grim Reaper character to sit beside a replica 'Wheel of Misfortune' as seen on the high profile. A number of applicants applied and, following a public vote, local man Ralph Barton was voted to be the face of the local campaign!

Ralph spent two weeks sitting alongside the Wheel of Misfortune at a number of our highest crash rate intersection sites. The competition and associated publicity aimed to raise awareness of the issue of intersection safety and to highlight the highest risk sites. Police and road safety representatives were on site with Ralph at all times, speaking to members of the public and responding to any traffic management issues that arose. A number of campaign materials (key rings, air fresheners, etc.) featuring the Wheel of Misfortune logo were given away during the two-week period.



However, the need for a longer-term project addressing intersection safety was recognized. Thanks to funding from ACC and Roadsafet Taranaki, the police have been able to purchase two high-definition video cameras. Following the Grim Reaper campaign, the police have regularly been videoing problem intersection sites and using video footage to issue infringements notices where necessary. Follow up media has allowed us to publicise the number of tickets issued so that awareness of intersection safety can continue to be promoted.

Feedback from local people during the Grim Reaper campaign was great. Local businesses near the selected intersection sites were very accommodating and happy to have the Wheel of Misfortune sited in their car parks, and the response from passing motorists and pedestrians was positive and cheery. Having our own local Grim Reaper provided a highly visual means of linking in with a high profile national campaign and was a creative way of launching a longer term project to address intersection safety locally.

Careful, he's watching

Deadly visions

BY YVETTE BARTON

THE Grim Reaper's appearance at some of New Plymouth's most dangerous intersections is making a difference – but only when he's around.

Since last Monday New Plymouth's reaper Ralph Barton has attracted attention by haunting problem intersections with the wheel of misfortune.

His appearance follows the national Intersections – Bad Calls Can Be Deadly television campaign as a reminder that it's better for drivers to arrive late than dead on time.

As part of the campaign, police have monitored the reaper's planned haunts before and during the appearance.

It's because clear the spectacle keeps drivers behaving as they should.

But as soon as the reaper's gone, drivers are back to their old tricks, running red lights and treating stop signs as mere suggestions.

There's very little respect for the road rules," says Community programme manager Christine Perry says. "People know what the rules are, they just choose not to follow them."

Road police sergeant Pat Duffy agrees, and is equally disappointed. "It's disheartening," he says. "Behaviour is far better when it's the wheel is there than when it's not."

While monitoring the intersections when the Grim Reaper isn't there, Mr Perry estimates one in every three cars run stop signs. "That is not every minute. He just notices."

While at the traffic light-controlled intersections at least one car every second phase run red lights.

They would have had simple warning with the orange lights and would have been able to stop way before the lights," Mr Duffy says.



Duffy says. "One thing's for sure – anyone caught running a red light or stop sign will end up with a \$150 fine."

"There was no money in just won't listen," Mr Perry says. "After 10 minutes I thought, 'This is stupid'. In 10 minutes we had enough to give police (work) to do for a week."

"You'd get writer's cramp," Mr Duffy adds.

Despite this the campaign has been well received overall.

The response has been extremely positive with kids wearing out, cars honking, people stopping to have photos taken with Mr Grim," Mr Duffy says.

Mr Perry says Mr Barton has fitted into his role well. He is not avoiding the traffic go past with a solemn expression.

The wheel of misfortune will be in town until Friday. He appears tomorrow with the launch of a more local long-term road safety campaign at intersections.

The project is funded by Roadsafet Taranaki and runs in conjunction with ACC, New Plymouth Injury Fund and police.

Once the wheel is gone, an enforcement approach will be taken at intersections, including video recording at problem areas and then ticketing drivers.

"We have intersections are a road safety issue locally and we want to get serious about tackling that," Mr Perry says.

Death is watching: The Grim Reaper, Ralph Barton, sits at New Plymouth's most dangerous intersections with the wheel of misfortune. Photo: YVETTE BARTON

GRIM SPOTS

Haunted intersections include:

• Corner St and 1st St

• In the Mokey St, Union St and Devon St area

• Brougham St and Brougham St

• Northgate, near New Plymouth Girls' High School

• Victoria St and Tuhanga St

CASE STUDY 10 – Kids Involved in Driving Down Speed (KIDDS)



KIDDS is a partnership project between local New Plymouth injury Safe, Police, ACC, RoadSense and 6 district primary schools. Uniquely the project was led almost entirely by students aged 9-11 years old.

The project initially arose in response to concerns about speeding around schools. Students from the six schools spent several weeks collecting data relating to vehicle speeds, road conditions and vehicle numbers using tools such as speed laser guns and video cameras.

The students analysed the data to identify the main road safety issues affecting their school and worked as a team to develop potential solutions to the problems. Interestingly, some schools found that parking and vehicle numbers was more of an issue than speed. Students from the six schools went on to present their findings and ideas to local road safety representatives at a special 'mini-conference'.

Since the conference a number of the children's' ideas have been put into place, including installation of new road safety signs around some schools (designed by the students), changes to parking spaces and rules, a reduction in the speed limit around one school and the installation of new fencing at another school.



Children involved in the project traveled to Napier to take part in a presentation at the 2007 IPNANZ (Injury Prevention Network Aotearoa New Zealand) to share what they had learnt with others. The following year the project went on to win the Education Category in the 2008 National Road Safety Trust Innovation & Achievement Awards and a group of children traveled to Wellington to collect the award. Since the 2007 KIDDS project another similar project has been run with local schools with a particular focus on school bus safety on urban and rural school routes.



The KIDDS project successfully harnessed the unique perspective and creativity of children who are affected by road safety issues on a day to day basis. As well as providing an effective method of disseminating road safety messages back to parents and carers the project also captured the attention of local media over a prolonged period. Most importantly, the project led to tangible changes to the road safety environment around those schools and gave local schools ownership and control of many of their road safety issues.



Crime Prevention

Children (5-14 years)

- Big Brothers Big Sisters

Young People

- When the Wheels Fall Off
- Ferndene Off-Road project
- WAVES Creative Youth Holiday Programmes

Adults (All ages)

- The Good Neighbour Guide
- E Watch
- Community Champions

Crime Prevention Through Environmental Design (CPTED)

- Sir Victor Davies Park Re-design (CPTED)
- Marfell Urban Renewal Masterplan
- District Bus Stop re-design
- Community Mural Project
- Zero tolerance for graffiti (24 hr response to clean up)
- CBD CCTV Surveillance



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Big Brothers Big Sisters	Big Brothers Big Sisters of Taranaki	Adult mentors, schools, Police Youth Development Team, referring agencies	AWE (Australian Worldwide Exploration) and Taranaki oil venture partner, Mitsui	Big Brothers Big Sisters is a mentoring programme that matches children and young people aged 6-18 years with trained mentors in professionally supported one-to-one relationships. Adult mentors can become involved in community mentoring (e.g. participating in sporting and recreational activities) or school-based mentoring (where adults spend time with their matched child at school, sharing activities together). Children referred to the programme are identified as vulnerable or at-risk.	Children aged 6-18 identified as vulnerable or at-risk	The Big Brothers Big Sisters model of mentoring has been affirmed by rigorous, ongoing external evaluation. This independent research has shown the positive relationships between youth and their Big Brothers and Big Sisters have a direct and measurable impact on children's lives in terms of social and educational outcomes.	Ongoing, thanks to long term funding commitment by AWE and Mitsui
When the Wheels Fall Off (Anti-Violence Education)	New Plymouth District Council	Whakawhanaungata nga Relationship Services, New Plymouth district secondary schools	Ministry of Justice	Anti-violence education programme delivered to Year 10 students in four New Plymouth district secondary schools through a 10 week school based programme (one hour per week) for Year 10 (14-15 years). The programme aims to create awareness of the immediate and ongoing effects of violence in the home, school and wider community. A module aimed at parents/whanau is also offered to back up the youth programme.	Secondary school students (14-15 years)	Evaluation was undertaken by a participant feedback questionnaire to measure changes in awareness following the programme. Baseline measures of levels of violence and anti-social behaviour have been taken prior to the programme and will be compared to measures at the end of 2010 to identify any changes.	Ministry of Justice funding changes mean that continuation of this project will be subject to outcome of contestable funding applications in future

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Ferndene Off Road Project	Taranaki Recreational Motorsport Association	New Plymouth District Council, Police, Roadsafes Taranaki	Self-funding	Development of a private, off public road, venue where young drivers can safely participate in recreational car use. The aim of the project was to reduce unlawful driving on the streets and to promote positive relationships between youth and police. The project is overseen by a not for profit incorporated society (Taranaki Recreational Motorsport Association Inc). The group has a committee and runs regular events at Ferndene Speedway. Club Members organize and participate in youth driver events such as 'burnouts' on purpose built concrete pads. The project is now self-funding through gate sales.	Young drivers	Motorsport club monitors gate sales and use of facility. Police monitor unlawful driving offences among young drivers.	Ongoing
WAVES Youth Holiday Programme	WAVES	Police, CYFs, WINZ, MSD, referring agencies	Ministry of Justice	School holiday programme offering positive youth development opportunities for young people referred by WINZ, CYFS, Police and other providers. Workshops include graffiti art, film-making, music etc. Young people are identified as at risk and are offered a health and psychosocial screening on enrollment to identify whether they would benefit from other WAVES services.	At-risk youth	Evaluation measures include a range of psychosocial indicators including engagement with other support services, pre and post offending rates and self reported indicators such as self-esteem, confidence and self control.	Ministry of Justice funding changes mean that continuation of this project will be subject to outcome of contestable funding applications in future
The Good Neighbour Guide	New Plymouth District Council	N/A	New Plymouth District Council	A 'Good Neighbour Guide' has been developed as part of a local initiative to address neighbourhood disputes. The resource provides guidance on how to prevent neighbourhood disputes and how to manage them if they do occur.	Adults	Project has recently been launched. Evaluation measures will include numbers of copies distributed by council.	Resource available in hard copy and on line

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Sir Victor Davies Park CPTED Re-Design	New Plymouth District Council	STOKS Ltd (contracted CPTED consultants)	Ministry of Justice	CPTED introductory seminar and site assessment of Sir Victor Davies Park was carried out and recommended safety improvement plan developed. A workshop was held to discuss issues and identify solutions. The park was re-developed in line with the safety improvement plan recommendations.	General public and users of Sir Victor Davies Park	Recommendations from the CPTED report were implemented including clearance, re-planting and extension of the CBD liquor ban area. Community safety issues are regularly monitored.	Any community safety issues in the park will continue to be monitored
E Watch	North Taranaki Neighbourhood Support	New Plymouth Police	N/A	Distribution of an email bulletin to urban and rural residents and business communities with information specifically targeted to certain areas and businesses. Information includes burglaries, thefts, vandalism, scams, stolen property alerts and other relevant information. E Watch aims to provide information that can help prevent further crimes by making residents and businesses aware of crimes in their area and steps they can take to prevent crime.	Urban and rural residents, business communities in North Taranaki	The success of E Watch is based on a two-way exchange of information. Police provide information to be sent to residents and businesses, and any return information is forwarded to police.	Ongoing. Neighbourhood Support continue to promote the E Watch scheme through local events and business networks to increase membership
Marfell Urban Renewal Masterplan	Marfell Combined Culture Community Centre Trust	New Plymouth injurySafe, New Plymouth District Council, Police, Housing New Zealand, Inspiring Communities, SCOPE	New Plymouth District Council, COGS	A collaborative project between community, housing, council and others that aims to undertake a comprehensive urban renewal of Housing New Zealand properties and surrounding areas in the Marfell community. Included a participatory action research project to identify community priorities and ideas for redevelopment. Residents are working with architects and Housing New Zealand to inform future redevelopment of the area.	Residents living in Marfell	Evaluation process and measures built into Masterplan. Measures include level of community involvement, participatory research findings and outcomes, crime statistics and qualitative feedback from residents.	Ongoing project. The Marfell Urban Renewal Masterplan is expected to continue for a number of years

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
District Bus Stop Re-Design	New Plymouth District Council	N/A	New Plymouth District Council	Re-design bus stop facilities to provide better quality shelter and protection against vandalism. Use of vibrant designs to prevent graffiti and enameled glass surfaces to increase natural surveillance and reduce opportunities for crime. In addition a group of community volunteers, funded by Ministry of Justice, painted murals on all 5 bus stops along Cook Street to reduce graffiti vandalism while awaiting installation of new bus stops using the designs outlined above.	Bus stop users, community residents living near bus stops	Evaluation measures include the monitoring of future vandalism at district bus stops.	There are plans to replace all bus stops in the district using this design
Community Mural Project	New Plymouth District Council	Ministry of Justice, community groups, local residents	Ministry of Justice	The Community Mural Project aims to assist the vibrancy and community pride within neighbourhoods and to help address graffiti vandalism. Using the principles of CPTED this project aims to target graffiti-prone areas within the district, particularly affecting areas that are not overlooked or well maintained. The use of community engagement and participation in the completion of murals helps achieve a sense of pride. Each artwork is treated with an anti-graffiti protective coating so graffiti damage can be easily removed.	Community areas affected by graffiti vandalism	The project is evidence based. Research has shown that community murals are a proven method to reduce graffiti vandalism by increasing the public's feelings of ownership of a public space leading to greater use and, in turn, greater surveillance of the area.	Ministry of Justice funding changes mean that continuation of this project will be subject to outcome of contestable funding applications in future
Zero Tolerance to Graffiti	New Plymouth District Council	General public	New Plymouth District Council	The council removes any graffiti that can be seen from a public space (e.g. road, reserve, walkway) free of charge, regardless of whether the graffiti is on public or private property. Public can phone the council or use a dedicated "Report Graffiti" link on their website.	Community areas affected by graffiti vandalism	The council measures rates of graffiti clean-up calls and trends over time.	Ongoing

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Community Champions	New Plymouth District Council	Community residents as 'Champions'	N/A	Residents are encouraged to sign up as 'Community Champions' for their street and/or surrounding areas. Champions take responsibility for cleaning litter and monitoring / reporting of vandalism, glass, graffiti and other issues. Regular briefings held for new Community Champions to inform them of project and outline reporting systems etc.	Whole population	This is a new project. The council will measure recruitment and retention of community champions and rates of reporting by champions	This is a new project that started July 2010
CBD CCTV Surveillance	New Plymouth Police	New Plymouth District Council	New Plymouth District Council	CCTV cameras are in place in and around the CBD. Most cover the main street but a few are strategically placed to cover areas that tend to be problem areas for the city. Some cameras are hard wired (fixed) while others are moveable so if problems come up in an area that is not covered by a CCTV camera they can be re-located. Cameras also cover a large portion of the coastal walkway and Pukekura Park. The cameras are monitored by trained volunteers during the peak hours of 9pm – 4am on Thursday, Friday and Saturday.	General public within and around CBD	N/A	Ongoing

CASE STUDY 11 – Community Mural Project

This project aims to prevent graffiti vandalism by targeting graffiti prone locations and building community pride and public ownership through the completion of community murals. This project aims to combat graffiti vandalism by getting people involved in creating a mural artwork that will be on public display. Run as a contestable funding round, community groups and schools are asked to coordinate mural projects. The aim is to get as many people as possible involved in the design and creation of the murals.

A number of locations have had murals installed and a reduction in graffiti vandalism has been recorded. There is a strong sense of community ownership of the murals leading to increase in surveillance of the public space surrounding the mural sites. Graffiti at the sites is promptly reported to the council for removal. Youth likely to be involved in committing graffiti vandalism have been involved in the mural projects and have been invited to participate in celebration events undertaken by the community when the murals have been completed. Positive media coverage of the mural projects has also been achieved.

The project relies on the passion and organisation of community groups to produce these community murals. Each mural is headed by a community group that involves their local community in designing and painting the murals. Those involved can range from a small group of students, through to a whole community of families, children, parents and schools.



The Community Mural project provides a number of added benefits by taking the problem and eye sore of graffiti vandalism and building community awareness and action through the creation of an artwork for all to enjoy. The mural artwork helps prevent further graffiti vandalism from taking place at the mural location site and makes graffiti removal easy if it does occur (due to anti-graffiti coatings on the artwork). Social capital of communities is built through involvement in this communal activity, which also has lasting effects of communities taking more ownership of public spaces, in turn reducing the opportunity for graffiti vandalism to occur.

CASE STUDY 12 – CPTED analysis and re-design of Sir Victor Davies Park

Sir Victor Davies Park, located in the middle of New Plymouth, was initiated by local Rotary Clubs in 1978 and named after a prominent nurseryman and authority on trees. Once used extensively as a recreational area, many people had become reluctant to use the park in recent years as it had developed a reputation for being an undesirable and risky place to be. The main reason for this was its growing use by people whose presence and liquor related behaviour was seen as threatening by others. Reported problems affecting the park included a known assault, vehicle break ins, groups gathering to drink alcohol and evidence of solvent and drug abuse.

In 2006, Stoks Ltd was contracted by New Plymouth District Council to present an introductory seminar on Crime Prevention through Environmental Design (CPTED) and to carry out a CPTED Site Assessment and workshop for the park. The seminar was open to Councillors, Council staff, Police, Safer Community Council representatives and local designers who work with the Council on open space projects. The CPTED seminar was given partly for information purposes and to provide some background to the principles that would be applied later for finding remedies to the problems in the park. The CPTED assessment involved reviewing background material; preliminary visits to the park during the day and again after dark, discussing the context and crime prevention concerns with the Police and key Council staff, looking at city CCTV systems, examining aerial photographs and conducting a number of detailed site visits. A workshop was then held with Council staff to discuss the site visits and develop practical options for addressing identified safety and security issues.

A simple checklist/assessment tool was developed for the assessment so that the following qualities could be considered: entrapment zones, exit opportunities, sightlines, surveillance opportunities, capable guardians, expression of ownership, and presentation. Workshop participants went to Sir Victor Davies Park with the assessment checklist, a briefing on CPTED considerations in park settings, and an understanding of the issues concerning crime and use of the park. The assessment involved a detailed examination and mapping of the Park and all pedestrian thoroughfares in and around the park, plus the seating areas, boundaries and the four car parks. Further workshops with Council staff developed and prioritised recommendations to address issues and optimize positive features observed.

The recommendations for action were separated into three categories – A ('quick fixes' with low budget and policy implications), B (6-12 month timescale, larger budget implications) and C (12-36 months, extensive budget implications). These included implementation of a thorough tidy-up and maintenance programme for the park, reviewing the cleaning contract (to deal with broken glass), strict enforcement of the CBD liquor ban, extensive trimming of trees and bushes, realigning pathways, redevelopment of seating areas and re-design of the car park.

Since the Assessment, a 24-hour/7 day liquor ban was introduced in Sir Victor Davies Park, encompassing surrounding streets. The majority of the recommendations outlined in the CPTED Assessment report have also been implemented. The previous crime issues affecting the park have largely disappeared and the park is once again being used for recreational purposes by the general public and employees from surrounding businesses. The use of the park continues to be monitored by council staff.

A full copy of the CPTED analysis and recommendations report is available at http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/1-94506-SIR_VICTOR_DAVIES_PARK_CPTED_ASSESSMENT_REPORT.tif/view



Alcohol

Young People

- School Gala Visits
- High on Life wallet cards
- Parent Pack – Tools for the Teenage Years resource

Adults (All ages)

- New Plymouth District Alcohol Strategy
- Mellow Yellow
- Alcohol Accord
- Professional training for licensed premises
- DrinkSafe workshops
- Sports Club Assist
- Workplace Common Drug & Alcohol Policy



Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
School Gala Visits	Mahia Mai A Waitara	YATA , Taranaki DHB (Health Promotion), secondary schools	YATA, Mahia Mai A Waitara	YATA has manned stalls at Taranaki secondary school galas providing information/resources on youth alcohol issues as well as running fun activities to encourage discussion. The Gala Visits aims to promote messages of safe drinking in a fun, safe environment and to encourage conversation between young people and their whanau about alcohol related harm and binge drinking.	Young people (12-18 years) and their parents/ caregivers	Students fill out knowledge quizzes to measure level of knowledge about alcohol and to stimulate discussion.	Ongoing
High on Life Wallet Cards	Mahia Mai A Waitara	YATA, Secondary schools	YATA	Development and dissemination of 'High on Life' wallet card containing information about alcohol and other drugs (AOD) and contact details for local services. The cards aim to share AOD information among the Taranaki secondary school population, informing them of the facts and effects of using AOD and where to get more information and help.	Young people (12-18 years)	Formal evaluation being undertaken currently.	Resources re-printed as required. An adapted version of the resource has also been developed for Taranaki catholic secondary schools
Parent Pack – Tools for the Teenage Years	Taranaki DHB (Health Promotion Unit)	YATA	ALAC, ACC, CPU, Taranaki DHB (Health Promotion Unit)	Parent Pack resources are a paper based resource that aim to assist parents and caregivers to manage a range of issues, including alcohol and other drugs, for their young people. The packs aim to increase awareness, to provide practical support to deal with different issues and to encourage dialogue and sharing of information and ideas between parents and young people. Distribution of the packs are supported by presentations at schools and other venues.	Parents and caregivers of teenagers	The Parent Pack was extensively pre-tested in the development phase. ALAC commissioned evaluation of the Taranaki Parent Pack project in 2008. Audience feedback forms are used at presentations and distribution of packs is monitored.	Ongoing. Resources are re-printed each year as required.

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
New Plymouth District Alcohol Strategy	New Plymouth District Council	Taranaki DHB, ACC, Sport Taranaki, Police, Department of Labour, and others	N/A	The Strategy was developed using a partnership approach and followed extensive research and consultation with key stakeholders. A shared action plan was developed and the progress in delivery of this plan is overseen by an implementation monitoring group	Whole population	The action plan has individual evaluation measures built in to each action. These are monitored by the implementation group to measure the effectiveness of the strategy	Ongoing. The Alcohol Strategy covers the period 2009-2015
Mellow Yellow	New Plymouth Police	New Plymouth District Council, licensed premises within the CBD	N/A	A collaborative project that aims to improve communication between licensed premises and the Police to make the CBD a safer place at night. Trained door staff wear hi-viz yellow jackets and carry walkie-talkies so they can alert each other in the event of problems (e.g. if they have refused entry to someone) as well as keeping in contact with police. The project aims to promote a consistent and collaborative approach to the management of alcohol-related harm issues across all CBD licensed premises in a highly visible way.	Individuals or groups using licensed premises within the CBD	Regular review of the impact and effectiveness of the programme is carried out by police using feedback from licensed premises and monitoring alcohol related crime statistics	Ongoing
Alcohol Accord	New Plymouth District Council	HANZ, Police, Taranaki DHB, District Licensing Authority (DLA), CDB Licensees	N/A	A formal agreement between the Alcohol Accord Management Committee, the Liquor Liaison Group, the hospitality sector, the Sale of Liquor regulatory agencies and Police to work collaboratively to increase safety in the CBD and throughout the hospitality sector by reducing alcohol related harm and offending. Signatories agree to operate fairly in accordance with the Sale of Liquor Act and individual projects related to the Alcohol Accord.	Individuals or groups using licensed premises within the CBD	Commitment by all groups to the Alcohol Accord principles is monitored. Rates of alcohol intoxication and offending related arrests in the CBD are also monitored.	Alcohol Accord will be reviewed after 12 months to review its effectiveness in achieving objectives

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Professional Training for Licensed Premises	Taranaki DHB (Public Health)	YATA, Licensed premises	YATA, Taranaki DHB	Annual professional training for staff working in licensed premises with the aims of reducing alcohol related harm and promoting responsible host behaviour. The training consists of an intensive three session workshop covering Sale of Liquor Act, duties of a door person, crowd control, risk assessment and force management.	All staff working in licensed premises	Evaluation is carried out using participant feedback forms and is used to improve quality of training in future.	Ongoing
DrinkSafe Workshops	YATA	DLA (District Licensing Agency)	YATA	Annual professional training for staff working in licensed sports clubs with the aim of reducing alcohol related harm. Training focuses on developing skills such as verbal and non-verbal communication and assertive behaviour, de-escalation of conflict and minimizing of physical of harm in the event of conflict.	Licensed sports club staff (door staff, bar staff, glassies etc.)	Participant Feedback Forms used to inform future training development.	Ongoing. Training is held annually.
Sports Club Assist Programme	Sport Taranaki	YATA, New Plymouth Police, ACC, licensed sports clubs	YATA, Sport Taranaki	Working with sports club executive committees to provide them with tools to set alcohol policies and host responsibility guidelines for their club. YATA run seminars for sports coaches, managers and administrators on the impact of alcohol and other drugs on youth and challenge the common link between sports and alcohol.	Licensed sports clubs in Taranaki and their users	Annual survey of clubs to measure changes and trends over time.	Ongoing
Workplace Common Drug & Alcohol Policy Development	Taranaki HSE Strategy Group	ACC, Department of Labour, local employers	N/A	Development of a common drug and alcohol policy template for use across Taranaki industry, based on research and amalgamation of existing drug & alcohol policies. Policy is available for use by all employers and information/advice on practical implementation of policy is provided by members of HSE Strategy Group where required.	Employers, employees	Policy has been based on existing policies and informed by research into best practice in managing drug and alcohol issues in the workplace.	Common policy is freely available for use by any employer.

CASE STUDY 13 – New Plymouth District Alcohol Strategy

The development of an Alcohol Strategy for New Plymouth was undertaken to achieve a whole of community response to alcohol related harm within the New Plymouth District with the aim of reducing actual harm. Research was initially carried out including a literature review of existing best practice in community responses to reducing alcohol harm and the content of existing alcohol strategies both nationally and internationally. A consultation was also undertaken with a range of community groups to identify priority alcohol issues affecting the district and potential solutions to these issues.

The development of the strategy was a partnership effort from the very start, with input from New Plymouth District Council, Taranaki DHB, New Plymouth Police, Work and Income, MSD, Sport Taranaki, YATA, New Plymouth injurySafe, Toi Ora and a number of other partners. These partners have committed to taking responsibility for the implementation and evaluation of a number of activities designed to reduce alcohol harm.

The project has achieved a number of successes. These include the development of a community strategy and plan of action to address alcohol related harm, a combination of resources and greater coordination of effort, and a consistent way to measure and report on the impacts of the strategy over time. The approach used in the Strategy's

development and the ongoing implementation of the Action Plan places the responsibility of doing something on everyone involved. The sharing of responsibility has helped keep groups accountable and assists in working together for joint outcomes. A consistent evaluation framework enables the groups to see how their actions have contributed to the bigger picture of alcohol harm reduction.

A copy of the New Plymouth District Alcohol Strategy is available at <http://www.safetaranaki.org.nz/alcohol/projects/district-alcohol-strategy/>



CASE STUDY 14 – Professional Training for Licensed Premises

Licensed premises, as suppliers of alcohol and providers of a venue for consumption of alcohol, have a crucial role to play in terms of reducing alcohol related harm. Being a responsible host is the role of all staff in who work in licensed premises and who interact with patrons. This includes door staff, managers, glassies, bar staff and any others who come into contact with patrons.

Professional training for Licensed Premises aims to reduce alcohol related harm in licensed premises by increasing the skills of staff.

It serves to develop staff skills such as verbal and non-verbal communication and assertive behaviour, to de-escalate conflict or minimise the risk of potential conflict and/or physical harm. This specific form of training provides the opportunity for staff members to develop their professional skills and gain new knowledge of an ever changing industry.

An intensive three-session workshop is delivered by a contracted provide and covers introductory topics and force management. The introduction covers topics such as alcohol related laws, the role of a door person/security, intoxication, underage drinking, crowd control and the steps involved in removing people from the premises. The force management session builds on this and covers areas such as positional asphyxia, mechanics of application, holds and restraints, self defense and personal safety. The training is aimed at all staff from Licensed Premises in Taranaki and is held annually.

A copy of the evaluation report of this project is available at http://www.safetaranaki.org.nz/alcohol/documents/Professional%20Training%20for%20Licensed%20Premises_Report%20for%20200..pdf/view



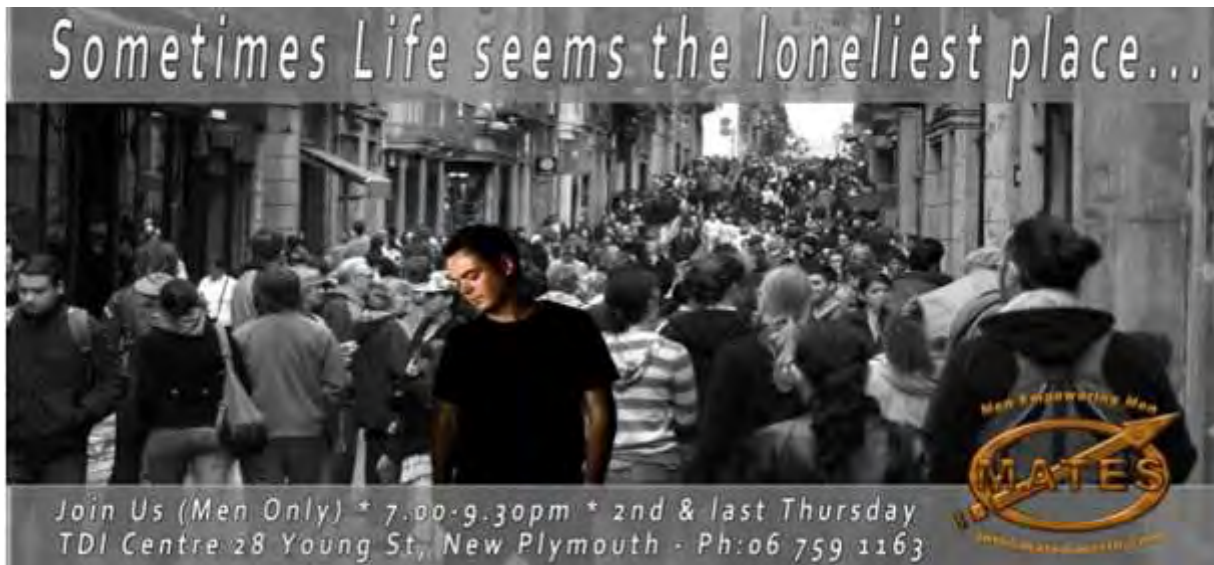
Suicide Prevention

Young People

- Waiora Wellness Centre
- WAVES youth programme
- Young People's Trust

Adults (All ages)

- Taranaki Suicide Prevention Needs Assessment
- ASIST (Applied Suicide Intervention Skills Training) workshops
- QPR (Question, Persuade, Refer)
- Suicide Prevention seminars
- Whakawhanaungatanga Self Harm Collaborative
- Multi-Level Suicide Prevention Intervention Study
- Touched by Suicide Support Group



Rural Community

- Stress in Rural Communities' roadshow
- Rural Support Trust suicide prevention awareness workshops

Men

- MATES Outreach Programme

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Suicide Prevention Needs Assessment	New Plymouth injurySafe	LikeMinds Taranaki, Mental health service providers, various other support services	Ministry of Health (Public Health Directorate)	The study involved a stock take of existing service provision relating to suicide prevention to identify service gaps and needs. This also included the development of an action plan, aligned to the NZ Suicide Prevention Strategy, to address identified needs. A regional suicide prevention co-ordination group was established as a result.	All ages	Research report was peer reviewed prior to publication. Taranaki Suicide Prevention Coordination Group meets quarterly to oversee progress of action plan.	Ongoing. Focus of Suicide Prevention Coordination Group is on training to build suicide prevention awareness and skills in the community.
Waiora Wellness Centre self-esteem programme	New Plymouth Girls High School	WAVES, Mahia Mai A Waitara, Taranaki DHB public health nurses, GPs, counsellors	New Plymouth Girls High School	A school based drop-in style health clinic offering counseling, sexual health, GP services and general health information. Runs a number of targeted group sessions focusing on resilience, self-esteem, peer support and strengthening cultural identity.	Female students, aged 12-18 years	Evaluation is carried out within the centre by collecting feedback from evaluation forms completed by students and staff.	Ongoing.
WAVES Youth Health, Development and Support Service	WAVES	Local health service and youth service providers	Taranaki DHB, Primary Health Organisations, Contact Energy	A drop-in youth health service, based in the centre of New Plymouth. Offers youth friendly health services, counselling, psychotherapy and a safe place to hang out. Also offer workshops (music, art, film-making etc.) and a creative holiday programme for at-risk youth. The service is free. All young people using the service are offered a full social and psychological assessment and referred on to external services if required. The service also offers a drop-in centre that is open daily.	Youth, aged 12-24 years	Individual services are evaluated by collecting feedback from service users, referrers and activity leaders. Evaluation measures users perception of service impact (e.g. on self-esteem, confidence, etc). as well as objective measures such as re-offending rates.	Ongoing

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Young People's Trust Service & Programmes	Young People's Trust	Local health service and youth service providers	Multiple funders	A drop-in information and advice centre assisting young people with issues such as health, housing, money and education. Provides some limited short-term counseling, as well as advocacy and referral on to other services (e.g. more intensive counseling) and service coordination on behalf of the young person. The service also provides educational sessions on topics such as managing stress and good communication.	Children and young people aged up to 24 years	Evaluation is carried out by seeking feedback from users and staff, measuring service input and impact.	Ongoing
ASIST (Applied Suicide Intervention Skills Training) workshops	New Plymouth injurySafe	Peak Health Taranaki, Federated Farmers, Tui Ora	Peak Health Taranaki, TSB Community Trust	ASIST consist of a 2 day workshop delivered by trained facilitators (who travel down from Living Works in Auckland). Workshop enables participants to identify someone at risk of suicide and to help them access appropriate support services. Funding is sought for the workshops to enable them to be offered at a subsidised rate of \$75 (with some free workshops available to volunteers/unwaged).	Training is targeted at those working in gatekeeper roles (e.g. community workers, health workers, clergy, Maori health workers etc)	ASIST is an evidence based programme running internationally. All participants complete an evaluation form that measures usefulness of training and changes in knowledge and confidence with the topic.	Delivery of ASIST workshops in the future is dependent on obtaining funding to subsidize costs
QPR (Question, Persuade, Refer) training	Otago University	New Plymouth injurySafe, Suicide Prevention Coordination Group	Otago University MISP, New Plymouth injurySafe	QPR is an online training programme. The first level of training (Level 1) can be completed in 1-2 hours and enables participants to identify those at risk of suicide and assist them with accessing help. The course usually costs \$50 but funding has enabled us to offer the training for free. The training currently targets large employers, local health service providers and community groups.	Training is available for anyone in the community who is interested	QPR is an evidence based programme. Evaluation of the community programme in Taranaki will be carried out by local researchers as part of the MISP study.	Free training will be offered for next 2 years and the paid training will continue to be promoted after this

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Suicide Prevention Seminars	New Plymouth injurySafe	Like Minds Taranaki	New Plymouth injurySafe, Like Minds Taranaki	Occasional seminars on suicide prevention are offered locally to raise awareness of the topic and to promote membership of the Suicide Prevention Coordination Group.	All ages	Evaluation forms used to seek feedback on seminar organization and level of interest in topic.	Ongoing. Seminar are run on an opportunist basis, e.g. making use of traveling speakers.
Whakawhanaungata nga Self-Harm Collaborative	New Zealand Guidelines Group (NZGG)	Taranaki DHB Emergency Department, Maori Health and Mental Health Services	Ministry of Health	This project is part of a national initiative to improve crisis care in emergency departments, Maori health and mental health services in a way that recognizes local situations, people and resources and provides care in line with Guidelines for the Assessment and Management of People at Risk of Suicide. ED staff have received training in implementation of the guidelines and targets relating to initial care and follow up care are in place.	Individuals admitted to ED as a result of self harm or suicide attempt	The project is being evaluated nationally by NZGG. Taranaki DHB monitors performance against project targets and reports these back to NZGG.	Ongoing.
MATES Outreach Programme	MATES	N/A	The group are currently applying for funding from various sources to expand the service	A support service for men experiencing the trauma of a major life change such as divorce, separation, relationship breakdown, loss or grief. MATES aims to provide a confidential forum for men, giving them the opportunity to talk and be listened to about any subject or experience they are having in their life, and for group members to provide peer support.	Men	Service is regularly reviewed by seeking feedback from men using the group	Ongoing
Stress in Rural Communities Roadshow	Like Minds Taranaki	Federated Farmers, Rural Support Trust, rural interest groups	Like Minds	Series of rural workshops focusing on stress, depression and suicide prevention delivered to rural and farming groups across Taranaki. Aim was to raise awareness of signs and symptoms of stress and depression, and highlight sources of local support	Rural groups (particularly men)	Evaluation forms completed by those who attended the workshops measured usefulness of information & changes in knowledge	Workshops continue to be run as requested

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Rural Support Trust depression and suicide awareness workshops	Taranaki Rural Support Trust	Like Minds Taranaki, Federated Farmers, Dairy NZ, Rural Women	Rural Support Trusts	Depression and suicide prevention information workshops provided under contract to Rural Support Trust groups across New Zealand, based on the Stress in Rural Communities roadshow model.	Rural groups (particularly men)	Evaluation forms completed by those who attended the workshops measured usefulness of information, changes in knowledge and suggested improvements for future workshops	Ongoing (funding permitted)
MISP (Multi Level Intervention Suicide Prevention) Research Study	Otago University	Taranaki Suicide Prevention Coordination Group, local mental health services	Ministry of Health	Part of a national research study to evaluate effects of suicide prevention initiatives in primary care and community settings. Taranaki is one of 4 intervention sites (matched with a control site) and the project involves running a number of small interventions and measuring impact over a 2 year period.	Taranaki population	Evaluation of individual projects is built into the study design. Wider evaluation will be carried out by measuring suicide and self harm rates over the 2 year period.	Study will run for 2 years (ending 2012)
Touched by Suicide Support Group	Supporting Families	LikeMinds Taranaki	LikeMinds Taranaki	A facilitated support group for those bereaved by suicide. The group meets monthly and provides information, education and support.	Individuals bereaved by suicide	The support group model is based on best practice research evidence. Evaluation forms are used to inform regular service reviews and forward planning.	Ongoing, although continuation of the group in the long term is always dependent on funding

CASE STUDY 15 – Applied Suicide Intervention Skills Training (ASIST)

ASIST (Applied Suicide Intervention Skills Training) responds to an identified need for enhanced suicide intervention knowledge and competence. Originally developed in Canada in the 1980s, the training programme has been progressively modified and over 200,000 people have participated in ASIST worldwide. Living Works (based in Auckland) is licensed to deliver the training in New Zealand and sends facilitators around the country to run workshops as required.

ASIST is a 2-day skills-based workshop that helps equip people for suicide first-aid. ASIST helps increase people's ability to recognise when someone may be at risk of suicide and reach out in a supportive way that links them with further resources and help. The importance of linking people to informal supports (such as family and friends) and options for professional help is emphasised. Workshop participants include people concerned about family members or friends, along with those in public contact, volunteer or professional helping roles.

Following the Taranaki Suicide Prevention Needs Assessment in 2008 it became apparent that our highest risk groups in Taranaki were farmers and young Maori males. In previous years the ASIST programme has been advertised widely and training place issued on a first come first served basis. However, in 2009 a

decision was made that the training would be targeted at those who were best placed to provide support to our highest risk groups. Potential trainees were identified by contacting a range of key organisations including rural networks and support groups, and Maori health providers and iwi representatives. Consequently the 2009 ASIST workshops (held in Stratford and Waitara) included a number of rural support workers (veterinarians, rural bankers, first responders and Rural Support Trust staff) and Maori health and youth workers.

Funding was obtained from TSB Community Trust and Peak Health Taranaki (PHO) to enable the course costs to be subsidized (from approximately \$400 per person to \$75). However, this year it was possible to offer a small number of fully subsidized (free) workshop places to community volunteers and unwaged people. This responded to feedback received during the Needs Assessment that, for some individuals, even \$75 prevented them accessing the training. As a result we were able to attract some individuals for whom cost would have been a barrier but whose roles within the community meant that they were well placed to utilise their newly developed ASIST skills.

More information about the ASIST training can be found at http://www.livingworks.org.nz/ASIST_Workshop.aspx

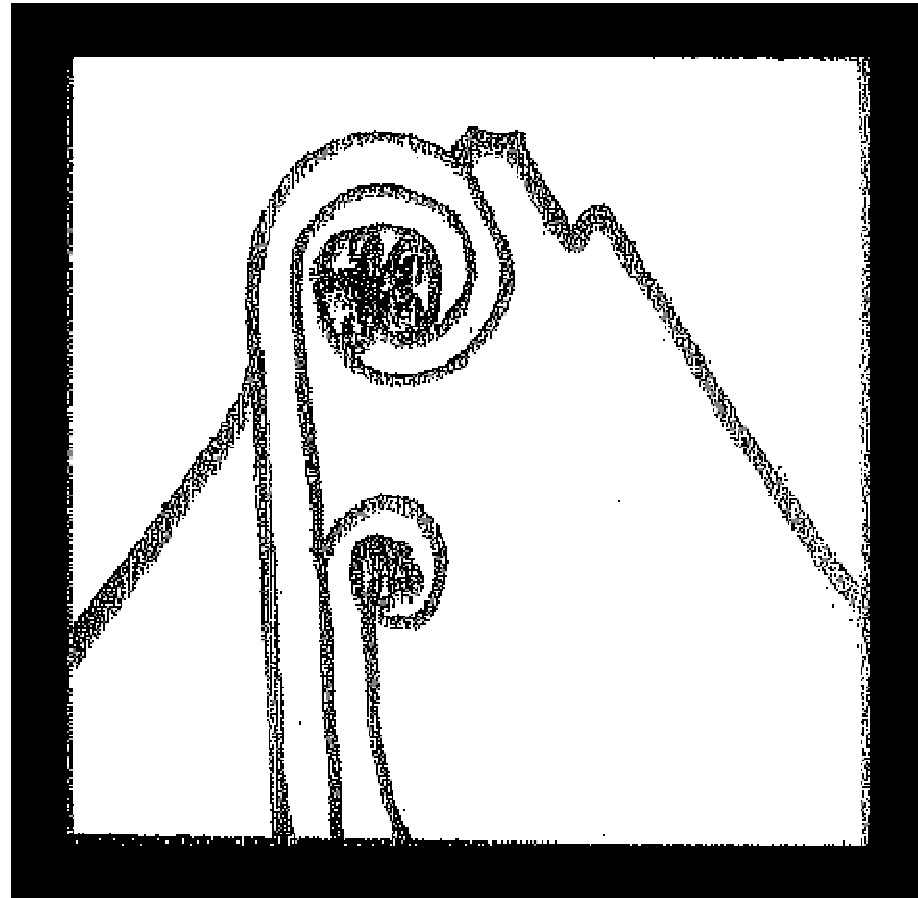


CASE STUDY 16 – Touched By Suicide Support Group

Touched By Suicide is a facilitated support group that runs each month for those bereaved by suicide. The group is run by two trained facilitators under the umbrella of the Taranaki Supporting Families (SF) organisation and is informed by best practice in the delivery of postvention support. The service responds to an awareness that those who are bereaved by suicide are themselves at greater risk of suicide, hence the need for appropriate and timely support..

The group was formed several years ago in response to an identified local need for support for families touched by suicide. The purpose of the group is to support group members to develop their own understanding of grief and to provide an avenue for group members to view their specific grief experience as part of their bigger life picture, rather than their only life experience. The facilitators support the group to cover a range of issues that members may face through their grief process and to provide an opportunity for them to extend their support networks with others who may understand their specific feelings and needs. The facilitators provide access to resources and information that enabled group members to understand and work through their own grief processes. Touched By Suicide also organise an annual remembrance service at a local church that is open to anyone who is bereaved by suicide.

Individuals may self refer to the group, although referrals commonly come via health professionals and Victim Support. There is currently one group running in New Plymouth but there are plans to extend the support group into South Taranaki. Supporting Families are in the process of applying for funding to enable this to happen.



Family Violence

General Public / Families

- Taranaki Safe Families Coordinator
- White Ribbon Day events
- Family Challenge Fun Days
- 'Family Violence is not OK' media, billboards and mural campaign
- Public seminars and presentations on family violence
- Family Violence adopted as Taranaki Chamber of Commerce 'cause for the year 2010'

Health & Social Service Providers

- Taranaki Safe Families Coordinator
- Family Violence Service Directory and Flip Chart resource
- Seminars and presentations on family violence
- Resource Teacher Learning Behaviour (RTLb) Training
- Domestic Violence Intervention Project (DVIP)

Family violence is not OK – make the call

TARANAKI IS a place where family violence is not OK.

That is the message of a month-long awareness campaign under way now.

New Plymouth District Council, in partnership with Taranaki Safe Families Trust (TSFT), is leading the campaign that encourages people to take action against family violence.

"Family violence is a community problem and we're encouraging the community to take action when they know something is happening," says Community Development Adviser Craig Campbell-Smith.

"It takes just one person to speak up – whether to challenge behaviour, support a family member or friend or contact a community agency – for action to begin to stop the violence."

"No one should be frightened by someone in their family."

Taranaki Safe Families Coordinator Marion James says family violence is a significant problem in New Zealand.

"In New Plymouth at least 120 people are being harmed by family violence each month," she says.

"It's probable that you or someone close to you knows someone who is affected by violence in the home. If you know about it, don't ignore it – make the call."

The campaign encourages families, whānau, friends, team mates, workmates and neighbours to take action.

"It's about giving and receiving help, about noticing when things start to go wrong



Taking the message to the community about stopping family violence are (from left) Colleen Tuuta, Mayor Peter Tennent, Betty Leung and Vance Hoskins. Photo: Freeze Frame Photography.

and supporting people to get the help they need," says Marion.

"If someone tells you they feel unsafe, believe them. If someone tells you they are worried about their own behaviour, listen to them."

Fronting the local campaign are Mayor Peter Tennent, community advocate and volunteer Betty Leung, young volunteer and sportsman Vance Hoskins and TSFT Community Trust Chairperson Colleen Tuuta.

This anti-family violence campaign is part

of the nation-wide It's Not OK campaign, which challenges attitudes and behaviour that tolerate any kind of family violence.

More information about what to do about family violence is available online at www.itsnotok.org.nz, and from the Family Violence Information Line on 0800 456 450.

* NPDC is leading the way in the business sector by being the first employer in Taranaki to embrace family violence awareness in the workplace, having formed a partnership with TSFT.

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Taranaki Safe Families Collaborative Coordinator	Taranaki Safe Families Collaborative	Tu Tama Wahine O Taranaki	Te Rito - Family & Community Services	To provide co-ordination and management of the Taranaki Safe Families Collaborative activities.	Families	A formal evaluation of all Taranaki Safe Families Collaborative initiatives is currently underway using an externally contracted researcher. A previous evaluation was carried out in 2008. The evaluation measures the effectiveness of the TSFC media and social marketing campaigns.	All projects are ongoing (dependent on funding)
White Ribbon Day	Taranaki Safe Families Collaborative	New Plymouth District Council, Taranaki DHB, Sport Taranaki, Police	Te Rito - Family & Community Services (Community Partnership Funding)	Promotion and management of public events for International White Ribbon Day – Non Violence Toward Women. Events have included hosting the Super Maori Fullus as part of their national tour.	General public		
Family Challenge Fun Days	Taranaki Safe Families Collaborative	Sport Taranaki, Police, NZ Fire Service, local businesses, Soroptomists, Rotary, St John Ambulance	Te Rito - Family & Community Services (Community Partnership Funding), local business sponsorship	Community events that celebrate positive healthy family interactions. Events include Family Challenge Days (competitions, sausage sizzles, sports activities etc.) and Sand Challenge Days (sand sculpture competition, big dig etc.). Events are free and attended by hundreds of people.	Families		
‘Family Violence is Not OK’ Media, Billboard, Mural and Role Models Campaign	Taranaki Safe Families Collaborative	Local Media, Police, New Plymouth District Council	Te Rito - Family & Community Services (Community Partnership Funding)	Campaigns include fortnightly advertisements in local newspapers using high profile local people to promote family violence awareness and key messages. Billboards reinforce messages of positive parenting and that reporting and protection of children is everyone’s business. Murals in prominent community spaces promote Taranaki as a place where violence is not okay. Most recently a poster campaign featuring community leaders as role models against family violence has been developed.	Whole population		

Programme	Lead Organisation	Partners	Funder(s)	Programme Description & Objectives	Target Group	Evaluation measures	Future Direction
Family Violence Directory & Flip Chart Resource	Taranaki Safe Families Collaborative	N/A	Te Rito - Family & Community Services (Community Partnership Funding)	Family Violence Directory and a handy desktop resource containing information about all social service agencies in Taranaki related to family violence	Health and Social Service Providers, Families	A formal evaluation of all Taranaki Safe Families Collaborative initiatives is currently underway using an externally contracted researcher. A previous evaluation was carried out in 2008. The evaluation measures the effectiveness of the TSFC media and social marketing campaigns	All projects are ongoing (dependent on funding)
Family Violence public seminars and presentations	Taranaki Safe Families Collaborative	Selected family violence experts and presenters	Te Rito - Family & Community Services (Community Partnership Funding)	A range of seminars and presentations have been organized by the Taranaki Safe Families Trust aimed at both public and professionals. Presentations have included a National Male Role Model Speech by Tom Scott, parenting workshops by Trish Hunt and a visit from the Super Maori Fullus.	General public, health & social service professionals		
RTLb (Resource Teacher Learning Behaviour) Training	Taranaki Safe Families Collaborative	TSFC partners, RTLbs	Te Rito - Family & Community Services (Community Partnership Funding)	Provision of specialist training to build knowledge and capacity of RTLb's to identify and deal with family violence issues.	Children at risk or affected by family violence		
Taranaki Chamber of Commerce 'Cause of the Year 2010'	Taranaki Safe Families Collaborative	TSFC Partners, Taranaki Chamber of Commerce (TCC)	Taranaki Chamber of Commerce	Taranaki Safe Families Collaborative was adopted as the Taranaki Chamber of Commerce 'Cause of the Year' for 2010 providing valuable access to TCC partners through networking and advertising opportunities as well as providing an additional source of funding for the group	Employers, employees		
Domestic Violence Intervention Project	Taranaki Safe Families Collaborative	TSFC partners		Involves facilitated fortnightly meetings with first and second tier family violence agencies focused on intensive case management for high and complex needs families.	Families, health & social service professionals		

CASE STUDY 17 – Family Violence is not OK Campaign

Taranaki Safe Families Collaborative run a variety of creative and highly visual campaigns throughout the year that link in with the national 'Family Violence is NOT OK' campaign. The collaborative runs fortnightly advertisements in local newspapers using high profile local people to promote family violence awareness and key messages and, most recently, has launched a local poster campaign using community leaders (including the Mayor) as role models against family violence. The group also runs billboard campaigns that reinforce messages of positive parenting and remind people that protection of children is everyone's business. Murals in prominent places (including one outside the New Plymouth Police Station) promote Taranaki as a place where violence is not ok and similar messages appear on the back of local buses.

The Collaborative are always looking for creative opportunities to spread the anti-violence message and take the view that, as a widespread community issue, it is important to raise awareness across the whole community. One of their most recent initiatives involves a partnership with Southern Rugby Club that will see non-violent behaviour on the rugby field rewarded. 'Violence is not our Game' posters are on display in the Southern Rugby clubrooms and changing rooms and four trophies have been presented to the Southern Rugby Club by the

Collaborative for presentation to senior teams at the end of year prize-giving. Coaches are keeping a watchful eye on their teams and will nominate players that have best displayed non-violent play throughout the season. These will then be forwarded to management for selection. Coasters and posters stating 'Violence is not our Game' will be on display throughout the season to remind players of the anti-violence message.



Little booklets:
Taranaki Safe Families Trust members, from left, Marion James, Michele Coe and Mary Beaumont with copies of the Directory of Family Violence Services.
Photo: YVETTE BATTEN

Keep families safe

By YVETTE BATTEN
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PROFESSIONALS working to counter family violence are about to receive an updated Taranaki Safe Families Collaborative Directory of Family Violence Services.

The booklet clearly displays the contacts around Taranaki for emergency services and support agencies for children, youth and adult victims, and offenders.

"The idea is that it's for professionals to use in their workplaces," Taranaki Safe Families Trust co-ordinator Marion James says.

"It's a quick reference for them to easily identify who they may need to make referrals too so that it can be done really effectively and efficiently and people are referred to the correct agencies."

About five years ago the trust distributed 700 booklets but on a smaller scale and only for

North Taranaki services.

This time they've produced 1800 to be distributed around Taranaki to all preschools, day care centres, kindergartens, schools, alternative education, GPs, counsellors, psychologists and other community organisations.

They are being sent out in the coming weeks. If you provide a service and feel it would be beneficial to receive one of these booklets ring Mrs James on 759 1492.



CASE STUDY 18 – Family Challenge Fun Days

The Taranaki Safe Families Collaborative hold two Family Fun Days each year – a Family Challenge Day, to coincide with White Ribbon Day on 25th November, and the Great Family Sand Challenge in April. The purpose of the Family Fun days is to provide an opportunity for families to have fun together and to promote safe and violence free families. The message is delivered in an interactive way through challenging and creative activities where families have to work together to complete a task such as a sandcastle competition or a treasure hunt.

The free events are extremely popular with around 1000-1200 people at each. All kinds of families attend such as grandparents raising grandchildren and parents having contact visits. A significant number of families attend that ordinarily would not be able to afford to participate in events of this kind.

Families are provided with an opportunity to have fun doing things together and because of this they are engaged in an interactive way with the anti-violence message. The messages promoting safe and non-violent families are woven thorough activities and games and all the children receive promotional items to take home that reinforce the stop family violence message.

The wider community is involved as much as possible to emphasise that family violence is a community issue. The support received from other groups is essential to the success of the events. Taranaki Safe Families member organisations are involved organising a number of activities. The NZ Fire Service, Sport Taranaki and the YMCA organise games and other activities. St John Ambulance provide a first aid service, sun block is provided by the Cancer Society, Rotary and Soroptimists provide extra people to ensure safety and help the event run smoothly and Taranaki Rescue Helicopter provide a tent. More FM provide music and staff for announcements.



The local Family Court Judge, NPDC Mayor, a local sporting personality and the TDHB Community Paediatrician have all been involved as judges for the Sand Challenge. Sponsorship was also received from several local businesses that either donated goods or discounted their services.

Organisers have been thrilled to see so many families enjoying being together and having fun. The involvement of the wider community and groups and individuals that would not ordinarily be involved in family violence prevention activities was very important. Family violence is a community issue and a whole of community response is needed to successfully eliminate family violence. Through the Family Fun Days, Taranaki Safe Families Trust have formed some very valuable relationships and many organisations involved in the events have made an ongoing commitment to assist with preventing family violence in any way they can. People really understood the message and this was evidenced in the feedback and also in the sand sculptures that families created. As a result a number of people have come forward and identified themselves as champions of the message.



Criteria Three

Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups



As highlighted in the previous section, analysis of our local data has been carried out to identify the types of injuries, population groups and injury locations that should be given priority within our local safe community programme. A five yearly needs assessment report compiles relevant statistical and qualitative information to identify patterns of injury in the New Plymouth District, but injury data is also monitored in between this time to keep a track on any emerging safety issues.

Within the injury data for our community there are a number of environments and population groups that stand out as being at higher risk of injury than others. Certain population groups may be at higher risk due to individual factors (high risk of falls among the frail elderly, physical vulnerability of small children) or due to social and environmental factors (e.g. youth access to alcohol, risks associated with certain occupations). Similarly some population groups are statistically at greater risk than others due to complex socio-economic reasons (e.g. higher risk of injury among lower socio-economic groups).

The analysis of our local data has highlighted the following high risk population groups and environments:

High Risk Environments:

Environment	Evidence
Home	Most common site for injuries to occur, responsible for 48% of ED admissions and 37% of ACC claims.
Sports/ Recreation	Second most common site for injuries to occur, responsible for 14% of ED admissions and 18% of ACC claims
Workplace	Third most common site for injuries to occur, responsible for 12% of ED admissions and 29% of new ACC claims. Most common industry for injuries is manufacturing (19%) followed by agriculture (16%) and construction (15%). Farmers (and their children) and young workers identified as being at higher risk
Road	Traffic accidents are the most common cause of unintentional injury-related death, third most common cause of injury hospitalization and responsible for 10% of ED admissions

High Risk Population Groups:

Group	Evidence
Children	On average 168 0-9 year olds are hospitalised each year as a result of injury and 1017 visit the Emergency Department. Falls are the most common cause of injury related hospitalisation, with most of these occurring in the home.
Young People	Transport accidents are the most common cause of injury related death and injury related hospitalisation in the 10-19 year age group, followed by intentional self-harm. 11% of those apprehended for violent offences are aged 14-16, 18% are 17-20 and 29% are 21-30. Alcohol and drug use linked to incidence of traffic accidents and violent offences.
Low Socio-economic groups	In all age groups, people living in the most socio-economically deprived areas are more likely to be hospitalised for injury than people living in less deprived areas.
Maori	Maori twice as likely to die as a result of injury than non-Maori. Intentional self-harm and traffic crashes are the most common cause of injury related death. 19% of road crash casualties are Maori.
Older Adults	Older adults aged 70+ are most likely to be admitted to the Emergency Department or hospitalised as a result of injury. Falls and transport accidents are the most common cause of injury related death and hospitalisation.

These priority groups and environments are illustrated in the diagram below:



A broad range of programmes and projects that target high risk groups and environments in our community have been outlined in the tables and Case Studies presented in Criteria 2.

This section will therefore use a number of detailed case studies to highlight a selection of local projects that target some of the high risk population groups and environments listed above.

Home Safety

CASE STUDY 1: Preventing Falls in Older People – Kaumatua Wellbeing Days



The Taranaki Falls Strategy Group is a multi-agency group established in 2007 to improve coordination and delivery of falls prevention services across the region. The group is coordinated by New Plymouth injurySafe and undertakes a range of activities including awareness raising, information sharing, training and development of new falls prevention initiatives.

The group organise a number of community 'Wellbeing Days' each year aimed at the older population to promote local falls prevention services and to encourage older people to access them. The events provide an opportunity for older people to try out Tai Chi and other exercises and to sign up for local programmes, as well as offering free health checks, information and advice.

The Wellbeing Days are attended by a number of local organisations including ACC, Taranaki District Health Board, Age Concern, Sport Taranaki and Arthritis NZ. The events are free and are held in a range of community venues including bowling clubs, church halls and even rest homes. Each event attracts anywhere between 50 -150 people and they provide an excellent opportunity for older people to find out about the range of services that are available to them all in one place on the same day.

A Kaumatua Wellbeing Day is held every year at Owae Marae and has successfully attracted Kaumatua groups from all over Taranaki, including Parihaka, Patea, Puniho and Opunake. The event is organized by New Plymouth injurySafe in partnership with the Mahai Mai A Waitara Kaumatua Group and as well as the usual Wellbeing Day activities, visitors are treated to mirimiri, waiata, raranga (weaving) and line dancing. The activities are delivered by local people who run similar activities in Waitara on a weekly basis. This is an important aspect of the event as it is hoped that older people who try the activities and enjoy them will be encouraged to continue attending the activity at a local group. By linking them up with local people it is easier to make that first step and join a regular group.

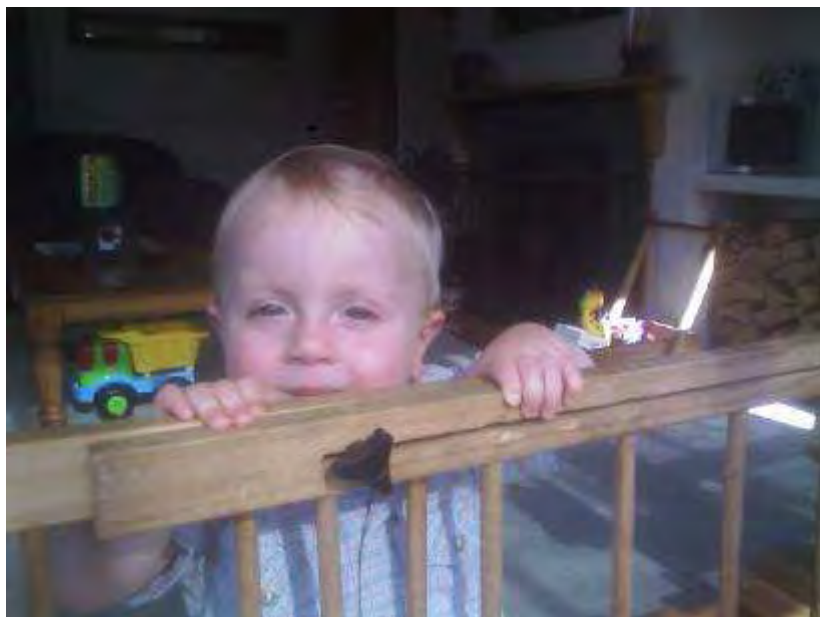
Feedback from visitors and participating organisations has been very positive. The most recent evaluation of the Owae Marae Wellbeing Day highlighted how the focus on overall wellbeing and the availability of such a varied programme was key in attracting kaumatua. The Kaumatua Wellbeing Day is now recognised as an annual event and another Marae in our region is looking at hosting a similar event later in the year.



CASE STUDY 2: Preventing Child Falls in Lower Socio-Economic Groups – Better Homes Safer Children & Marfell Home Safety Project

The Better Homes Safer Children project was set up in 2004, and ran until 2007, and aimed to reduce the most common injuries to children aged 0 to 4 at home. The project used a safety assessment tool to identify environmental hazards in the home. The assessment was offered to 100 low-income families in conjunction with the Taranaki “Better Homes” free energy efficiency upgrades and was delivered by WISE (Waitara Initiatives Supporting Employment) Better Homes when conducting energy audits. This project aimed to reach the most disadvantaged households per year, in this case those households that qualified for the free energy upgrade on the basis of low income, health status and poor housing conditions.

The project combined improvements to the safety of the child’s home environment with the provision of information and education directly to parents. The project focused on the top four causes of injury to young children in the assessment, aiming to successfully combine strategies used in separate projects (child falls, poisons prevention) into an effective single intervention.



The range of devices installed included window latches, non-slip bath mats and stair gates to prevent falls; smoke alarms, stove locks and temperature sensitive bath appliques to prevent burns; visibility tape to prevent cuts; cupboard catches to prevent poisoning; door stoppers to prevent crush injuries and electric socket guards to prevent electrocution. In addition, hot tap water temperatures were measured and discussed. The equipment was provided and installed for free, families were advised of the importance of supervision in the prevention of home injuries and were left with an information pack about home safety for under 5’s.

Evaluation of the scheme showed that participating families found the safety devices and information useful and there was a good recall of information following the visit.

Due to a lack of funding, the project ended in 2007. Since then a small amount of funding has been identified to support the delivery of a smaller-scale version of the scheme in the Marfell area. Families on low incomes who would benefit from the installation of safety equipment (mainly stair gates) are identified by child health nurses and kiawhina working in the area. The safety equipment is supplied on loan, at no cost to the families, who are asked to return it to the Marfell Community Centre when they no longer need it. Families are advised on the importance of supervision and provided with child home safety information when the equipment is supplied. Although an equipment fitting service is not formally supplied, families are advised that they should contact the community centre for assistance with fitting (by a volunteer) if this is a problem.

Workplace Safety

CASE STUDY 3: Taranaki Secondary Schools Agricultural Safety Challenge



The Taranaki Secondary Schools Agricultural Safety Challenge is a hands-on, practical event that aims to increase students' awareness of agricultural hazards and safe farming practices. The competition has been running for 12 years in Taranaki and is held on a working farm based at Francis Douglas Memorial College. It is organised by Agriculture New Zealand and funded by New Plymouth Injury Safe and ACC. It has the support of a number of local organisations including Taratahi, New Plymouth Police, NZ Fire Service, Norwoods Farm Machinery, Young Farmers Clubs, Red Cross, Department of Labour and Francis Douglas Memorial College.



Teams of up to four students from secondary schools across Taranaki undertake up to 8 safety challenges focusing on tractor driving, use of firearms, ATV driving, chemical handling, fire safety, livestock handling, first aid and working at height. Activities are run by a variety of safety professionals including agricultural trainers, Department of Labour inspectors, police firearms officers, first aid instructors and fire officers. Each challenge activity takes 20 minutes and the teams complete every activity. They are marked on their safety knowledge and skills and provided with feedback about their performance at the end of each session.

Following the practical safety challenges the students participate in a quick fire quiz and the points are then counted before the winners trophy is presented. To highlight the lifelong impact of an agricultural injury, Agriculture New Zealand invite Kevin Richards (Worksafe Ltd.) to speak to students about the effects of an ATV accident in 1989 that left him unable to walk.

The combination of a fun, competitive learning experience with a serious safety message is seen as the key to the success of this annual event. Previous evaluations have highlighted how much the practical nature of the event was enjoyed and how this approach, combined with constructive feedback from activity leaders, was an effective way of engaging young people in safety education. An impact evaluation was carried out with a sample of participating students and revealed that 100% of those interviewed felt that they benefited by participating in the competition, 87% learned at least one important piece of safety information, 81% have adopted at least one safer practice and 56% discussed safety issues at home following the event.

CASE STUDY 4: Construction Managers Breakfast Forum



The Taranaki Construction Safety Group, in partnership with New Plymouth injurySafe, hosted a Construction Manager's breakfast forum in February 2009 in response to concerns raised by local industry about inconsistency of safety systems and practices within construction industry contractor management processes. The forum focused on practical examples of how safety could be built into contractor management systems, using good practice examples from across local industry. The forum included a range of speakers such as local employers and the Department of Labour, and was aimed at managers, contractors & construction trades workers. The event was held early in the morning (7.30am) to accommodate the needs of the industry and included breakfast.

The event attracted around 130 people and provided a unique opportunity for sub-contractors to share their concerns with contract managers. Examples of issues raised included a common perception that building safe

working practices into a tender risked raising the price and reducing the likelihood of winning a contract. This led to concerns that some organisations were winning contracts based on price rather than safety. The strong message to come out of the day was that safety should be paramount and appraisal of safety systems should be given higher weighting in the contract selection process.

Following the forum, a number of new organisations joined the Taranaki Construction Safety Group with a view to addressing the issues raised on the day. One of these organisations was New Plymouth District Council who tender a number of large local contracts. The Council has made a commitment to improve mechanisms that ensure safety is built into its contract tendering and management systems and is working with other local organisations to share best practice in this field.



Road Safety

CASE STUDY 5: Ferndene Off-Road Project

The Ferndene Off-Road Project aimed to achieve a redirection away from illegal 'boy racing' activity to a controlled, off-road, legal and safe environment for the enjoyment of vehicle based recreation.

The project involved establishing a relationship with key young car enthusiasts ('boy racers') and involving them in a solution to reduce or eliminate illegal and unsafe driving on public roads. Achievements include:

- Formation of a cohesive group of car enthusiasts
- Formation of the 'Taranaki Motor Sport Recreation Association Incorporated Society'
- Securing of venue and management of legal events
- Support demonstrated from the 'boy racing' community, evidenced through strong gate sales at events
- Reduction in 'boy racer' activity at known local hot spots, particularly with the introduction of a traffic bylaw (and with little enforcement required)

The groups involved in the project were the 'boy racer' community themselves, New Plymouth District Council as a facilitator of the process and New Plymouth Police. The challenge initially was in building a relationship of trust with this group and having them focus on developing a joint solution. This was aided greatly by a local motor sport legend who donated his time to make the initial connections.

This project was great as it involved Police and the car enthusiasts working together to develop a solution to otherwise illegal and dangerous driving behaviour. Taking the group of car enthusiasts through a process of developing a vision, project planning and implementing local events, built their ability to operate this independently and in a manner that is self funding. The perception and respect of the Police was affected, to focus on safety rather than on impinging on 'boy racer' freedoms through enforcement.

Since this project was established there are now plans to develop a practical youth driver training project locally. A one-day youth driver training event was held in June 2010 to provide young people practical hands on experience of safe braking and collision avoidance. The event also served as a formal promotional launch of the project aimed at attracting potential investors and corporate sponsors to enable a purpose built facility to be developed. The long term aim is to establish a driver-training centre to provide practical youth driver training through income generated by corporate driver training (i.e. for paid employees).



CASE STUDY 6: Ready2Drive Road Safety Expo

The Ready2Drive Road Safety Expo was held for the first time in 2010, at Francis Douglas Memorial College. The aim of the event was to raise road safety awareness of young people who are about to apply for their learner licence or have recently gained their licence. The main focus of the event was to highlight the impact of alcohol on driving ability, the importance of wearing a seatbelt, knowledge of road rules, scooter safety survival tips and the consequences of road crashes.

The event was held during school time and aimed at all Year 10 students (aged 14-15 years). Students were split into groups and participated in a range of road safety activities. These included taking part in an obstacle course while wearing Fatal Vision goggles ("beer goggles"), a ride on the 'seatbelt simulator', a visit to the Police Booze Bus to find out more about drink driving related laws, an online scooter safety activity and a taking part in a sample driving theory test using the AA website. Paramedics and Fire Officers also ran an activity that focused on how to respond when first on the scene of a road crash and, at the end of the day, carried out a reconstruction of a crashed vehicle extraction.

During the day students were also asked to complete a road safety quiz, which was entered into a prize draw at the end of the event.



There was no cost to the school for the event, largely due to the fact that road safety professionals who led the activities gave up their time for free. Students were treated to a sausage sizzle over lunchtime and the activities were kept running to allow students from other year groups to participate.

The evaluation of the event showed some pleasing results. Three quarters of the students reported that the event caused them to think differently about road safety with over half of the students reporting that they were now more aware of the effects of alcohol and consequences of drinking and driving. Recall of key safety messages was very good (between 77% and 92% for each activity). 61% of students reported that they would change their driving behaviour as a result, with the most common change being "not drinking and driving".

The Ready2Drive expo will now be offered to other schools within the district, with a view to making it an annual event.



Recreational Safety

CASE STUDY 7: When The Wheels Fall Off

When the Wheels fall off is a programme delivered to year 10 students (age 14-15 years), within four New Plymouth district secondary schools. It seeks to create an awareness of both the immediate and on-going effects of violence in the home, school and wider community.

The programme is delivered for one hour per week and covers specific modules over ten weeks. There is also a module offered for parents and family reinforcing the messages of the student sessions. A range of facilitators and guest presenters participate in the programme giving differing perspectives on the reality of violence from a personal level and its effects within our communities. The programme is funded by the Ministry of Justice, administered by New Plymouth District Council and contracted to Relationship Services Whakawhanaungatanaga.

The core message of the programme is that violence is not acceptable in any form, despite it being portrayed in many media around everyday life. This programme is designed to help students reduce and/or eliminate abusive and violent behaviours through four key objectives:

- To increase understanding of causes and examine the cultural and social context in which violence is used
- To assist students understand how acts of abuse and violence can be used as control mechanisms against victims
- To encourage accountability by those using violence through acknowledging and taking responsibility for their actions
- To provide students with information and practical options around changing violent and abusive behaviours and being able to communicate more effectively with their peers and family.

The programme has been a resounding success with all participating schools requesting it again next year. All key programme indicators have been met or exceeded and feedback from attendees has been very positive. This programme is an integral tool in meeting the challenge of violence in our communities by providing information and realistic alternative choices delivered in a medium that participants can connect with.

A total of 345 students from four secondary schools completed the ten-week programme. Students, teachers and principals gave very positive feedback about the programme content, style of the presenters and effectiveness within their school environments. Evaluation has shown that over 90% of participants feel that the programme left them with a better understanding of the causes of violence, information on how to change behaviours and a more comprehensive knowledge about how violence impacted on victims.

Schools advised anecdotal evidence of positive change as a result of the programme being delivered through more respectful language being used, a reduction in complaints about student-to-student conflict, and a greater awareness of the key messages around violence being discussed between students.



CASE STUDY 8: Parent Pack – Tools for the Teenage Years

Evidence shows that families are widely recognised to be one of the most influential contributors to the environments experienced by young people as they grow up. Interventions which can strengthen and support young people's positive connections with their families, key adults and their communities and increase other resiliency factors may enhance young people's healthy development and wellbeing. Reflecting the aim of enhancing positive connections between young people and their parents, Parent Pack resources (Parent Packs) are a paper based health promotion resource that aim to assist parents and caregivers to manage a range of issues, including alcohol and other drugs, for their young people.

Parent Pack resources are designed to give parents the tools and guidelines to deal with issues faced by their teenage children, particularly alcohol and drug issues. The resource is aimed at parents and caregivers of teens and aims to reduce the supply of alcohol to young people and thereby reduce the incidence of binge drinking and alcohol related crime. The resource sets out to increase parents' awareness of alcohol related issues for youth, provide practical support for parents to deal with these issues and encourage dialogue and sharing of information and ideas among parents and between parents and young people.

A Taranaki version of the Parent Pack booklet was produced in 2007, along with some promotional resources. The resources are designed to enable promotion of the Parent Pack through group presentations, displays at community events and counter displays in receptions and waiting areas. The Parent Pack is also distributed through Taranaki secondary schools.

The Parent pack was extensively pre-tested in the development phase and ALAC commissioned evaluation of the Taranaki Parent Pack project in 2008. Evaluation of the resource continues to be carried out through audience feedback forms used at presentations and ongoing monitoring of distribution. Follow up phone contact with presentation participants is also carried out to determine usefulness of information and whether the Parent Pack contributes to further discussion or changes in behaviour.



CASE STUDY 9: WAVES Creative Youth Holiday Programme

The WAVES Creative Youth Holiday programme aims to provide positive youth development opportunities for young people identified as being 'at risk'. Reasons for being considered at risk included a lack of parental supervision, misuse of drugs/alcohol, a past history of physical violence, engagement in anti-social behaviour or not participating in mainstream school or employment. Referrals to the programme come from clinical staff at WAVES (a local youth health and support service based in New Plymouth), school counsellors, Work and Income, Child Youth and Families, Police, Mental Health Services, Taranaki Safer Centre and alternative education providers. Many of the young people taking part in the programme are existing WAVES clients, but the programme has attracted some new clients. All were provided with a full health and psychosocial assessment at the beginning of the programme.



A range of workshops are on offer during the programme including graffiti art, film-making, music and weaving. The workshops are run during the week of the school holiday and are always at full capacity which has led to number restrictions and a waiting list being put in place. The graffiti workshops were particularly popular and past taggers have reported that they would not longer tag illegally after working alongside the activity leaders.

The programme focuses on identifying issues that may be impacting on the young person's health status, and is based on the philosophy that emotional, physical, social, spiritual and mental health is all inter-connected. Where necessary, young people are referred on to other services such as counseling.

Evaluation has shown that the young people who participate in the holiday programme have become more productive and self sufficient, and have continued to use the WAVES service for their health and personal development needs. The evaluation has also looked at criminal behaviour and previous involvement with police by carrying out a pre and post evaluation of the programmes attended. A group of 10 recidivist offenders that had all spent time in prison have been 'jail free' for over 5 months. They have attended court for minor disorderly offences, but continue with weekly support from the WAVES psychologist and have entered into contracts of behaviour as part of a further youth development programme. These young people have moved from a controlling environment (such as prison or community service) to controlling themselves.

Criteria Four

Programmes that document the frequency and causes of injuries

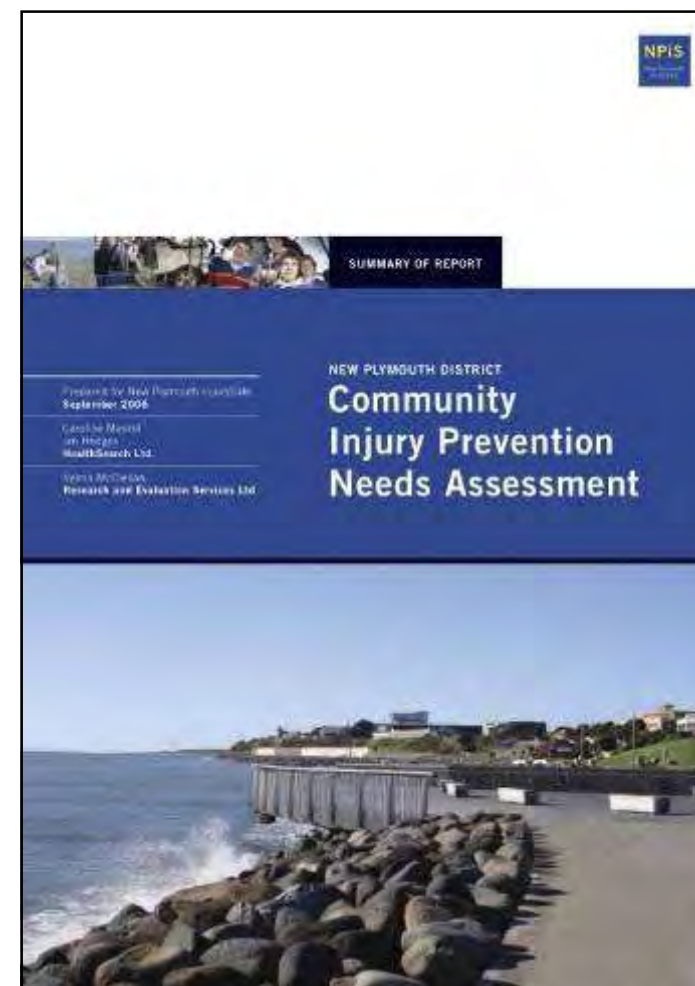


Community Injury Prevention Needs Assessment

New Plymouth injurySafe has committed to carrying out a comprehensive community based injury prevention needs assessment every five years. The district's first Needs Assessment was carried out in 2001 with funding support from ACC. This involved a literature review, analysis of local and national injury statistics and extensive consultation with local organisations and individuals with an interest in injury prevention. This work was undertaken on behalf of NPiS by Research & Evaluation Services and HealthSearch Ltd. The purpose of the Needs Assessment was to identify patterns of injury in New Plymouth District and to inform future injury prevention priorities and action.

The Needs Assessment was repeated in 2006, updating injury statistics and information on injury patterns since 2001. Most noticeably, the period had seen a downward trend in injury-related hospitalisation rates (at a time when national age-standardised injury hospitalisation rates were steadily increasing). By repeating the needs assessment every five years we are able to monitor our progress by examining injury trends over a longer time period. This is particularly valuable as the benefits of community safety and injury prevention programmes may take many years to be realised.

The next Injury Prevention Needs Assessment is due to be carried out in 2011. However, in the meantime, injury statistics are regularly monitored within the community to keep a track on the effectiveness of current safety programmes and to identify any emerging injury issues.



Injury Statistics for New Plymouth District

The most recently compiled full analysis of injury data for New Plymouth District can be found in our 2006 Needs Assessment report (McClellan V, Maskill C & Hodges I, 2006, *New Plymouth District Community Injury Prevention Needs Assessment*, prepared on behalf of New Plymouth injury Safe Trust). A summary of the statistics is documented in the Community Injury Prevention Needs Assessment – Summary Report 2006.

Both documents can be downloaded from our website: <http://www.safetaranaki.org.nz/injury-prevention/injury-statistics/new-plymouth-statistics>

For the purposes of this application an overview of the main injury statistics for New Plymouth District are presented below. The statistics have been taken from the Summary Report of the 2006 Community Injury Prevention Needs Assessment and are based on data from a range of sources including ACC claims, hospitalisation figures, New Zealand Transport Agency, Police and Coroner's data. It should be noted that the data mainly covers the period 2001-2006, although more recent data is presented in the next section of the application to support Criteria 5.



DEATHS FROM INJURY

On average each year, almost 30 New Plymouth District (NPD) residents die as a result of injury.

About two-thirds of injury deaths among NPD residents are due to unintentional causes, with most of the remainder due to intentional causes.

In 2000-2003, most of the deaths due to unintentional injuries involved:

- Transport accidents (8 per year)
- Falls (6 per year)
- Drowning / submersion (1 per year)
- Accidental poisoning (1 per year)

The vast majority (85 percent) of deaths due to intentional injury were caused by intentional self-harm, suicide and other types of self-inflicted injury (7 per year).

In the four year period 2000-2003, the average annual age-standardised death rate for injury among New Plymouth District residents was slightly higher than that of New Zealand as a whole.

Injury death rates in NPD were highest in the oldest age group (80+) and lowest among 0-9 year-olds. Another (lower) peak in rates occurred for 20-29 year olds.

Intentional injuries (predominantly suicide and other self-inflicted injuries) contributed to nearly half of all injury deaths among 20-29 year olds, 30-39 year olds and 40-49 year olds. This contrasts with the pattern for all other age groups where unintentional causes were far more common than intentional causes.

The age-standardised injury death rate for males living in the New Plymouth District was just over double the female rate. The age-standardised rate of injury deaths among Maori was nearly twice that of non-Maori. People living in the most socio- economically deprived areas of NPD had higher injury death rates than people living in less deprived areas.

Trends in injury-related death rates in NPD are quite difficult to analyse because of small numbers and a change in classification systems in 2000. However, looking at longer term trends over the period 1989-2003, injury mortality rates in NPD appeared to be below the national average during the early 1990s, but were very similar to the national average in the mid 1990s.

In the late 1990s, the NPD rates again were slightly below that of New Zealand as a whole. From 2000-2003, NPD rates were initially higher and then became lower than the national rates.

HOSPITALISATIONS FOR INJURY

In the five year period 2001-2005 an average of 1364 NPD residents per annum were admitted to hospital due to injuries (includes both intentional and unintentional). Over this same period, 87 percent of these admissions were for unintentional injuries and just 8 percent of admissions were due to intentional injuries.

The most common groups of injuries were:

- Falls (42 percent)
- Exposure to inanimate mechanical forces (15 percent)
- Transport-related accidents (14 percent)

Overall the male hospitalisation rate for injury was 1.6 times that for females. Males had higher hospitalisation rates than females in all age groups except the 70-79 and 80+ age groups. On an age-adjusted basis, Maori and non-Maori in NPD had an almost equal chance of being hospitalised due to injury.

In all age groups, people living in the most socio-economically deprived areas of NPD were more likely to be hospitalised for injury than people living in less deprived areas.

From 1989 until 1997 the rates of hospitalisation for injury in NPD were higher than for New Zealand as a whole. However, in 1998 the trend reversed and in recent years NPD has had an injury hospitalisation rate somewhat lower than New Zealand as a whole.

NPD appeared to be below the national average during the early 1990s, but were very similar to the national average in the mid 1990s.

In the late 1990s, the NPD rates again were slightly below that of New Zealand as a whole. From 2000-2003, NPD rates were initially higher and then became lower than the national rates.

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EMERGENCY DEPARTMENT ATTENDANCES FOR INJURY

In the year 2005, there were 7253 Emergency Department clinic (ED) attendances for injuries among NPD residents.

The ED attendance injury rate for males was 72 percent higher than for females (age-standardised rates). Ten to 19 year-old males and females, 20-29 year-old males and 80+ year-old females were the most likely to attend ED for injuries. The non-Maori age-standardised rate of ED attendance was slightly higher than the rate for Maori.

The three leading causes of injuries for which NPD residents attended EDs in 2005 were:

- Falls (32 percent)
- Blunt trauma (30 percent)
- Penetrating trauma (10 percent)

People living in the most socio-economically deprived parts of New Plymouth District were much more likely to attend public hospital EDs for injury than those living in less deprived areas.

The three most common sites where injuries occurred among NPD residents who attended ED were:

- Domestic situations (48 percent)
- Sports / recreation venues (14 percent)
- Workplaces (12 percent).

ACC INJURY CLAIM STATISTICS

In the 2005 / 2006 financial year in NPD, a total of 2167 new entitlement claims were recorded by ACC. The NPD ACC new claim rate was slightly higher than the New Zealand average.

NPD males were twice as likely as NPD females to have ACC new claims over the 2005 / 2006 period. For males, the highest claim rates were among 20-29 year-olds. For females, 50-59 and 65+ year-olds had the highest claim rates. Children aged 0-9 years had by far the lowest claim rates. Eighty-three percent of NPD claimants were European/Pakeha, 10 percent were Maori and 4 percent were of other ethnicities.

The highest numbers of NPD claims were made for injuries that occurred at:

- Home / other domestic situations – 37 percent (compared to 30 percent for NZ as a whole)
- Sports / recreation venues – 18 percent (compared to 15 percent for NZ as a whole)

In 2005/ 2006 males were more likely than females to make claims for injuries sustained on farms, at industrial places and at sports/recreation venues; whereas females were more likely to claim for injuries that occurred in the home.

In the 2005 / 2006 financial year, over \$10 million was spent on ACC new entitlement claims in New Plymouth District. On average, each claim cost \$4,770. This was slightly less than the national average of \$4,993.

CORONER'S SUICIDE DATA

Over the ten-year period 1996-2005, 93 suicides were investigated by the local coroner. Eighty percent of these suicides were by males. The most common ages for committing suicide were 30-39 (contributing to 27 percent of suicides) and 20-29 (20 percent). The most common suicide methods were hanging (42 percent) and carbon monoxide poisoning (26 percent).

POLICE STATISTICS

In 2005, violent and sexual offences together contributed to 20 percent of all recorded offences in New Plymouth Policing Area, compared to 13 percent of all recorded offences nationally.

From 1996 to 2005, the annual numbers of recorded violent offences in NPD increased by 42 percent (from 627 to 890). A similar trend was evident for New Zealand as a whole. The total numbers of recorded sexual offences were similar in NPD in 1996 (70) and in 2005 (75).

Family Violence Statistics for New Plymouth

The Taranaki Family Violence Collaborative takes a lead in monitoring and reporting on a wide range of family violence data. Prior to the establishment of the Collaborative, the Taranaki Te Rito Management Group commissioned an extensive needs assessment (*"Developing New Collaborative Initiatives for Preventing Family Violence in Taranaki – Results of a Needs Assessment"*) which was undertaken by Velma McLellan (Research & Evaluation Services Ltd) and Caroline Maskill/Ian Hodges (HealthSearch Ltd) in 2005.

The needs assessment looked at census data (to identify number of families in Taranaki), estimates of family violence incidence based on national survey data, existing service use statistics, a review of family violence strategies carried out across the country and made recommendations for effective interventions that could be developed in Taranaki. The full Needs Assessment report is available at: <http://www.safetaranaki.org.nz/family-violence/documents/Needs%20Assessment%202005.pdf/view>

ROAD TRAFFIC CRASH STATISTICS

In the 10 years from 1996-2005, a total of 1823 road traffic crashes in NPD involving injury were reported to the Police. A total of 2622 people were injured in these crashes.

From 1999 through to 2002 the total number of serious or fatal road traffic crashes that occurred in NPD moved progressively downwards, before spiking markedly up again in 2003 and 2004. However, in 2005 the total fell to 26, the lowest recorded in the 10-year period.

In 2001-2005 a total of 195 fatal or serious crashes were reported in NPD, compared to 259 in 1996-2000. Most crashes involving injury in NPD occurred on urban roads. However, crashes that occurred on rural roads more often involved serious and fatal injuries.

Of the 2622 traffic casualties in NPD between 1996 and 2005, just over half (51 percent) were drivers of cars or vans, while slightly less than a quarter (24 percent) were passengers in cars or vans.

Twenty-three percent of all road crash casualties in New Plymouth District were aged 15-19. The other leading casualty groups were 20-24 year olds and 25-29 year olds. Altogether, 42 percent of all road crash casualties were aged between 15 and 29.

The most common types of vehicle movements involved in urban road injury crashes were:

- Crossing / turning movements
- Rear end / obstructions
- Loss of control / or head on collisions on road bends

On rural roads the most common types of vehicle movements involved in urban road injury crashes resulted from:

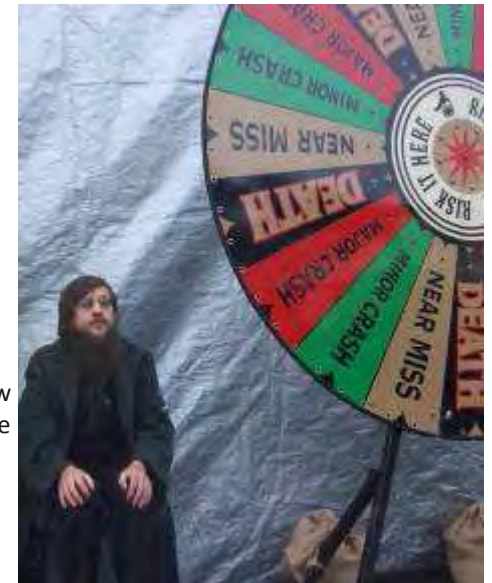
- Loss of control / or head on collisions on road bends
- Crossing / turning movements
- Loss of control / or head on collisions on straight roads

Poor observation and failure to give way or stop were the two most common contributing factors to injury crashes on urban roads in the New Plymouth District. On rural roads, poor observation was the most common factor contributing to injury crashes followed by poor vehicle handling.

Intersections are a common site for injury crashes in the New Plymouth District, more so than the rest of New Zealand.

The proportion of crashes involving alcohol was lower in NPD compared to New Zealand as a whole.

The most recent surveys show the rate of front seat belt use, rear seat belt use and child restraint use is higher in NPD compared to New Zealand as a whole. Cycle helmet use was also slightly higher than it was for all New Zealand.



Criteria Five

Evaluation measures to assess programmes, processes and the effects of change



Measuring our Effectiveness

New Plymouth Safe Community is committed to monitoring and evaluating the effectiveness of our safety programmes and their impact on safety in our district. This is carried out in a number of ways including:

- Monitoring of injury data to measure impact of our programmes and projects on injury rates
- Evaluation of individual programmes and projects to monitor effectiveness and to improve quality
- Monitoring of performance against individual action plans across a range of injury prevention and safety areas

This section of the application presents a selection of case studies that demonstrate how we collect and analyse injury data and how we use various evaluation methods to inform our assessment of local safety programmes and their impacts.

Most of the case studies present injury data trends over the last five years. The findings from a number of evaluations of individual safety programmes and projects are also outlined. The case studies generally link to programmes and projects featured in the case studies presented for Criteria 2 and 3 of this application. Where evaluation reports are available, and permission has been given for their release, the document has been loaded on to the Safe Taranaki website and web link is provided.

The injury data presented in the case studies includes the latest injury data for New Plymouth District taken from an injury data analysis report commissioned in July 2010 for the purposes of the New Plymouth District Safe Community re-accreditation application (Maskill C, 2010, *New Plymouth District Selected Injury Statistics*, HealthSearch Ltd. Auckland). Other data is from sources such as the three yearly Analysis of Paediatric Hospital Admissions for Unintentional Injuries compiled by Kidsafe Taranaki, National Research Bureau (NRB) surveys and data collected by local agencies.

The use of injury data to measure effectiveness of Safe Community programmes is not without its limitations, and this is discussed at the beginning of this section. For ease of reference, an overview of key findings of our most recent injury data analysis is also presented at the beginning of the section.



Limitations of Injury Data

It should be noted that injury data is only a small part of the picture when considering the effectiveness of safe community programmes. Figures for some injuries (and particularly for injury deaths) are relatively small and caution needs to be exercised when assuming a causal link between a particular safety programme and trends in injury data. For example, it would be flawed to link the success of a cycle helmet promotion campaign to a reduction in cycle deaths when there may be, on average, only one or two deaths a year from cycle accidents. In fact, the campaign may have been successful at increasing compliance in cycle helmet use but unfortunately this is not reflected in routinely collected data sources (which record injuries and deaths).

Similarly, measuring the impact of programmes such as this can be quite difficult due to the nature of the settings in which they operate (i.e. the community). In this example it can be quite difficult to measure increase in cycle helmet use and the findings of local surveys may not be reliable. This is further complicated by the range of other variables that can impact on the effectiveness of safety programmes but are not necessarily linked to the programme itself. Using the example of cycle helmet use, there may be economic reasons why some people do not respond to a campaign. They may be willing to consider wearing a cycle helmet but simply cannot afford one. Others may simply be unaware of the campaign or were not exposed to it (e.g. visitors or new arrivals to the area).

With these issues in mind, Langley & Simpson (2009) have argued that measurement of risk taking behaviour may actually be a more suitable measure for the effectiveness of safe community programmes than actual injuries or deaths. They raise valid concerns about the limitations of routinely collected injury data in New Zealand, highlighting that the absence of an explicit theoretical definition of injuries in the community means that it is unclear what such data actually represents. As numbers of injury deaths are relatively low (around 30 per year in New Plymouth) it is common for Safe Communities to rely instead on hospitalisation data as the numbers are much higher.

However, the inpatient data system includes injuries ranging from very minor through to those that are a high threat to life. Of this total injury figure, the High Threat to Life (HTL) injuries form a small percentage. For example, in 2006 there were 693 hospital admissions of which 77 were defined HTL. In the case of minor injuries we cannot be sure what proportion of total minor injuries actually result in hospital admission. As Langley & Simpson (2009) point out, socio-demographic factors such as availability and access to hospital services and level of health service-seeking behaviour will influence the numbers of individuals with minor injuries admitted to hospital. With access and service delivery issues potentially having greater impact on injury-related hospital admission figures it is possible that reduced hospitalisation figures may suggest a programme has been successful when in fact the reverse had been the case. Changes in admission policies and diagnostic coding practices can also lead to bias in data, particularly when looking at longer term trends.

However, focus on HTL injuries is not without its problems. It is quite possible that a significant number of minor injuries not classified as HTL are still considered important because they result in significant disability (e.g. blindness). Unfortunately current hospital inpatient databases do not routinely identify disabling injuries. Similarly, ACC does not have a database that records nature and severity of disability following injury.

Langley & Simpson (2009) argue therefore that most small to medium Safe Communities are unlikely to be able to show statistically significant impacts on injury rates. They propose a shift in focus to measuring the effect of relevant risk factors for important injury. They suggest, for example, monitoring of alcohol-impaired driving, appropriate seatbelt/restraint use and speeding be undertaken to measure effectiveness of road safety programmes as such strategies are all known to reduce injury. In turn they call on Safe Community umbrella organisations to consider replacing the requirement of Safe Communities to undertake local injury surveillance with surveillance of safety behaviours and other impact measures that have been shown to reduce injury.

Summary of Evaluation Findings

Injury data analysis for New Plymouth District has highlighted the following::

- From 2005—2009 rates of public hospitalisation for falls among adults aged 60 and over were consistently below the national average.
- From 2005—2009 rates of ACC new entitlement claims for fall-related injuries among adults aged 60 and over have declined steadily (apart from a small increase in 2006/7) going from a rate 31% higher than national average to a rate in line with national average.
- Since 2002 the rate of hospital admissions for falls among under 5's have halved, going from a rate that was 34% higher than the national average to a rate 33% lower in 2008. However, 2009 saw a noticeable increase, with the New Plymouth rate almost matching the national average for that year.
- Between 1996 and 1998, unintentional poisoning accounted for 26% of hospital admissions of under 5's for unintentional injury. The most recent data analysis (2006-2009) has demonstrated a reduction in hospital admissions of under 5's for unintentional poisoning to 12.9% of unintentional injury hospital admissions.
- Crash data highlights that road safety remains a priority issue for the district with a significant number of hospitalisations for transport related injuries each year. Age-standardised rates of public hospitalisation for transport injuries in New Plymouth District were below the national average in the three years 2005–2007 but increased to almost match the national average in 2008 and exceed it in 2009.
- The age-standardised rate of ACC new entitlement claims for workplace injuries continues to track below the national average. ACC claims (all claims) for workplace injuries has shown a steady decline in the agricultural sector from 764 in 2004/05 to 636 in 2008/09. ACC entitlement claims were previously increasing in the construction and manufacturing sector but the rate of claims has shown a fall in manufacturing since 2006/07 and construction since 2007/08.
- Between 2005 and 2009, rates of public hospitalisation for suicides/self-harm in New Plymouth District were generally similar to the national average. Only in 2009 did the New Plymouth rate exceed the national average.
- There was an overall 6% drop in recorded offences 2008 to 2009, at a time when the national rate rose by 4.6%. in 2009 the crime resolution rate sat at 53%, above the national resolution rate of 48% .
- The findings of the NRB Communitrak Survey over the last 3 years have shown that the percentage of respondents who consider the New Plymouth CBD at night to be 'safe' or 'very safe' have increased year on year. The percentage of respondents who consider the CBD at night to be 'very unsafe' has dropped from 20% in 2008 to 4% in 2010.
- In terms of perceptions of safety across the whole of New Plymouth District in 2010, 37% of residents reported feeling that the district is 'definitely' a safe place to live (an increase on the 2009 figure of 34%)
- Graffiti Vandalism reported to the Council over the past four years can be tentatively said to be trending downwards, after a peak in 2005/06. The data suggests that the most recent years in which various graffiti vandalism reduction projects have been run has led to a decrease in overall levels of graffiti reported to council.
- The numbers of apprehensions for breach of protection orders resulting in prosecution has increased since 2006/07. In 2006/07, 85.3% of resolutions involved prosecution and 13.3% resulted in a warning. In 2008/09, 90.5% of resolutions involved prosecution with 8.6% warnings being issued. New Plymouth Police led the country with the highest measure of successful convictions for 'breach of protection order' and 'male assaults female' offences in the 2008/09 year. The increase in police apprehensions has occurred at a time when public awareness of family violence has been actively raised through both national and local media campaigns to encourage greater reporting and help seeking behaviour.

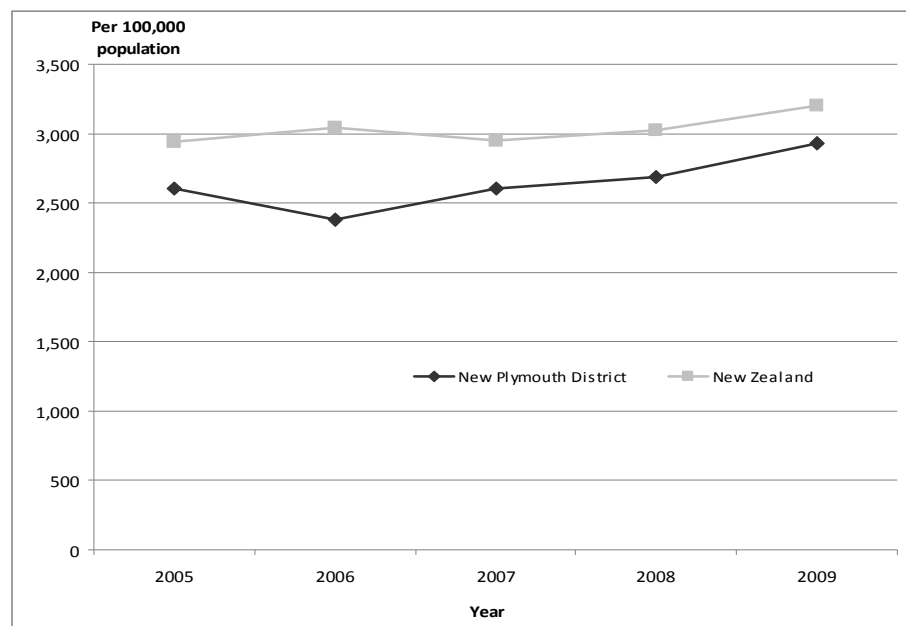
CASE STUDY 1 – Programmes to Reduce Falls in Older Adults

INJURY DATA

In New Plymouth District in the five years from 2005 to 2009, on average each year there were 390 public hospitalisations for adults aged 60 and over. Rates of public hospitalisation for falls for this age group were consistently below the national average (figure 1). However, the data suggests hospitalisations for falls in this age group are on the increase, both in New Plymouth District and New Zealand as a whole. It should be noted that the number hospitalisations does not indicate the number of falls in this group. One fall may result in a number of hospital admissions being recorded. For example, a patient may be transferred to another specialty within the hospital (e.g. admitted into a rehabilitation unit, or to a hospital dental unit for example) or they may be re-admitted for follow up surgery. Therefore one fall may actually be recorded as several 'hospitalisations' during the same hospital stay because a patient is transferred to different wards or specialties due to their treatment needs. Similarly, many falls may go undetected in this data because treatment is provided within a primary care setting or an individual chooses not to seek treatment at all.

Figure 1 - Public Hospitalisation for Falls by People Aged 60 and Over

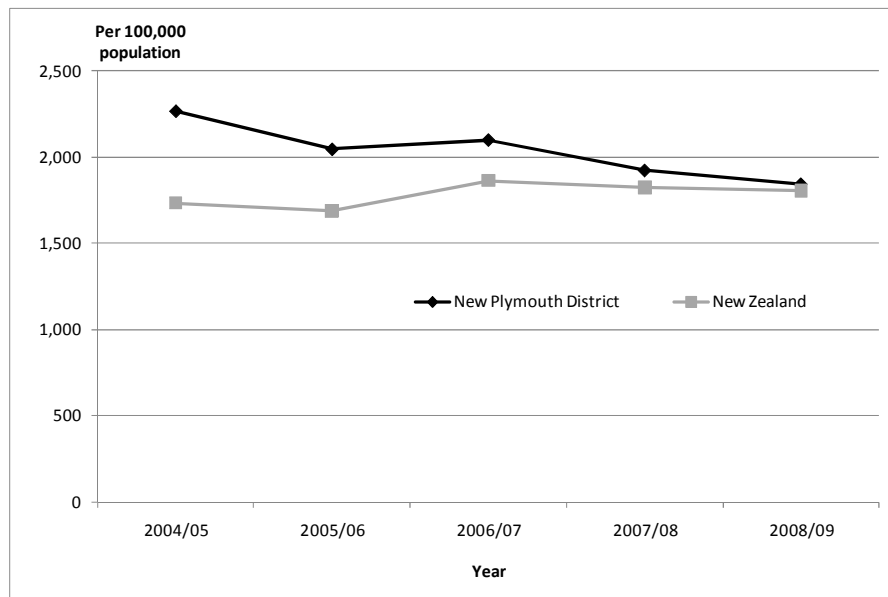
New Plymouth District and New Zealand, Five-year trend: 2005–2009



CASE STUDY 1 – Programmes to Reduce Falls in Older Adults (continued)

Figure 2 - ACC New Entitlement Claims for Falls by People Aged 65 and Over

New Plymouth District and New Zealand, Five-year trend: 2004/05–2008/09



In New Plymouth District in the five financial years ending 2008/2009, on average each year there were 225 ACC new entitlement claims for fall-related injuries in people aged 65 and over. Rates of new entitlement claims for fall-related injuries in this age group declined steadily over the five financial years to 2008/09 (with the exception of a small increase in 2006/07 – see figure 2). In 2008/09 the New Plymouth District (1845 per 100,000) had almost the same rate of new entitlement claims for fall-related injuries as New Zealand as a whole (1807 per 100,000). Five years earlier the New Plymouth claim rate was 31 percent higher than the national average (2265 and 1734 per 100,000 respectively). Although the fall in ACC claims looks promising it can be misleading to assume that a reduction in ACC claims necessarily means a reduction in falls. These figures record ‘entitlement claims’ (i.e. not medical fees-only claims) where there is an ongoing disability that entitles the person to entitlement benefits (such as home help or wages for time off work). These are the minority of claims and do not reflect the number of actual injuries. Rates of ACC claims are also linked to a range of factors including claim seeking behaviour, the accessibility of local ACC services and the effects of government direction affecting ACC policy.

Ministry of Health mortality data for the five years 2003-2007 records a total of 26 deaths from falls among New Plymouth District people aged 60 and over. This was an average of 5.2 fall deaths per year. Looking at individual years, the highest number of fall deaths was in 2007, a total of nine deaths. The lowest was in 2006 (three deaths). The low numbers of falls related deaths render it unwise to make assumptions based on this data.

CASE STUDY 1 – Programmes to Reduce Falls in Older Adults (continued)

EVALUATION FINDINGS

Well Aware Community Falls Prevention Education Programme

The Well Aware programme is based on an existing evidence-based programme (Stay on Your Feet) used in Australia. Participants were asked to complete an evaluation form to identify which topics were considered useful and informative to ensure that the programme was relevant and interesting. The evaluation form also asked participants about any changes in behaviour, or intentions to change behaviour, as a result of participating in the programme.

The findings of the evaluation showed that the health-related topics (physiotherapy, occupational therapy, medications, eyesight) were the most popular and were enjoyed by all participants. Exercise and nutrition were least popular. Fire safety was considered to be the most useful topic and 'Move it or Lose it' (an exercise demonstration) least useful.



Almost half of the respondents had made a change as a result of participating in the programme. The same number of participants reported that they intended to make a change. A copy of the evaluation is available at: <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/WELL%20AWARE%20evaluation%20SUMMARY.pdf/view>

Kaumatua Wellbeing Days

Kaumatua Wellbeing Day events are run throughout the year to promote and improve older peoples' access to local falls prevention services. The events provide an opportunity for older people to try out Tai Chi and other exercises and to sign up for local programmes, as well as offering free health checks, information and advice on health issues related to falls (eyesight, medication, etc). The events are free and are held in a range of community venues and attract anywhere between 50 -150 people each time.

The Wellbeing Days have been evaluated using questionnaires completed on the day to find out what visitors enjoyed about the day, how it could be improved and whether they had learnt anything new. These findings have been used to inform the planning of future events. Knowledge about falls prevention has also been measured using a questionnaire at each event. Falls Prevention quizzes completed at recent wellbeing days demonstrate that knowledge about falls prevention is high with around 85% of respondents answering quiz questions correctly. One explanation for this is that a large percentage of older people attending these events have participated in previous wellbeing events and their knowledge about falls has increased as a result.

Provider feedback is also collected using a questionnaire. The most recent questionnaire was carried out using Survey Monkey (an on-line survey tool) and revealed that providers continue to value the opportunity to share information about their services with older people at these community events. This survey found that the Marae based wellbeing days were considered to be most popular and that the provision of exercise taster sessions, free health checks and free refreshments were key to the success of the event. Service providers stated that the greatest benefits of the event to their own organization was the opportunity to raise the profile of their service, to connect with older people in the community and to network with other service providers.

An evaluation of the 2009 Kaumatua Wellbeing Day based at Owae Marae can be found at <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/10P%20Kaumatua%20Wellbeing%20Day.pdf/view>

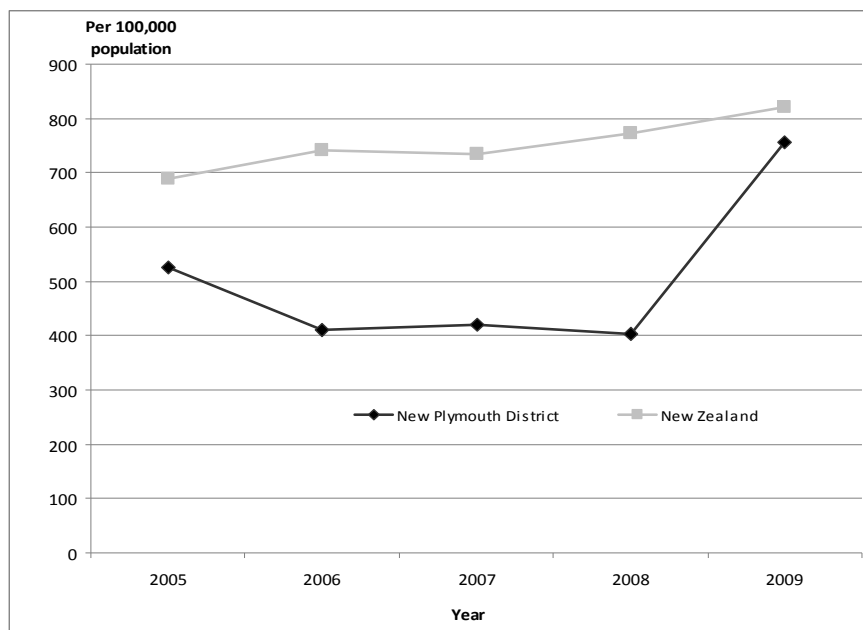
CASE STUDY 2 – Programmes to Reduce Falls among Children aged 0-4 years

INJURY DATA

In New Plymouth District between 2005 and 2009, on average each year there were 23 public hospitalisations for falls among children aged 0-4. Rates of public hospitalisation for falls in this age group remained consistently below the national average in the four years from 2005 to 2008 (figure 3). Indeed, since 2002 (when the project started) the rate of hospital admissions halved, going from a rate that was 34% higher than the national average to a rate 33% lower in 2008. However, 2009 saw a marked increase, with the New Plymouth rate almost matching the national average for that year. However, the data should be viewed with caution due to the relatively low numbers of hospital admissions in this group. Also, as pointed out already in the previous case study, the number of hospitalisations does not necessarily reflect the actual number of falls and it is possible that a single child can have more than one registered hospital admission for the same fall injury.

Figure 3 - Public Hospitalisation for Falls by Children Aged 0-4

New Plymouth District and New Zealand, Five year trend: 2005-2009



Deaths from falls (children aged 0-4)

Ministry of Health mortality data for the five years 2003-2007 indicates there were no deaths from falls among New Plymouth District children aged 0-4



CASE STUDY 2 – Programmes to Reduce Falls among Children aged 0-4 years (continued)

EVALUATION FINDINGS

Child Falls Prevention Project

Evaluation of this programme involved gaining participant feedback from questionnaires which was then followed up by small sample participant telephone interviews. Measures included parents' and carers' understanding and awareness of falls and their behaviour in terms of making positive changes to home environment to reduce risk. The Child Falls Prevention Project approach (outlined in Criteria 2, Case Study 1) is based on safety literature and has now been delivered to over 2,000 families.

Based on a typical annual evaluation report including over 300 participant questionnaires and 70 follow up phone surveys the following results have been achieved:

- 98% increased understanding of causes of falls to under fives
- 97% aware of prevention strategies
- 59% made changes to home environment
- 64% reported increasing or improving supervision



The data has demonstrated a dramatic decrease in injuries to under fives caused by falls in the home since this project started. The rate of hospital admissions between 2002 and 2008 has been halved from a rate that was 34% higher than the national average to a rate 33% lower. As can be seen from the above injury data above, the rate of falls increased in 2009 but remains below the national average. However, care should be taken when interpreting this data as the number of falls among under 5's is actually quite low (an average of 23 hospitalisations per year). It is also possible, due to District Health Board data collection methods, that a single child can have more than one registered hospital admission for the same fall injury. Full report available at <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/child%20falls%20report%2008-09%20Final.pdf/view>

Tamariki Falls Prevention Project

The Tamariki Falls Prevention Project began in 2002 and aims to reduce injuries due to falls in the home experienced by tamariki Maori aged under five years in Taranaki. The project aims to reach parents with children under five years, caregivers and extended whanau members, and Maori early childhood centres.

This approach involves the provision of information which is distributed to the key audiences by way of one-to-one visits by Tamariki Ora nurses, and also through attendance at group workshops. Piki Te Ora Nursing Services are contracted by the Kidsafe Taranaki Trust to deliver this project to their clients and wider Maori community.

Evaluation of this project was carried out using questionnaires completed by participants following one-to-one and group sessions to find out changes in knowledge. A smaller sample of participants (who identified a willingness to be contacted at a later date on their questionnaire) were interviewed by telephone to ask questions about changes in behaviour.

The evaluation found that a total of 98% reported an increase in knowledge. 67% of the participants reported that their understanding had increased 'a lot', while 31% reported that their understanding had increased 'a little'. Following the telephone interviews it was found that 87% of those questioned reported making a change to their home environment. 87% also reported having made a change to their supervision.

CASE STUDY 3 – Programmes to Reduce Unintentional Poisoning in Children

INJURY DATA

Kidsafe Taranaki Trust carry out analysis of Taranaki paediatric hospital admission data every three years. This analysis focuses on location and mechanism of unintentional injuries to children aged up to age 14 years. This analysis shows that unintentional poisonings are the second leading cause of hospitalisations for 0-4 year old children in Taranaki.

Between 1996 and 1998, unintentional poisoning accounted for 26% of children's hospital admissions for unintentional injury (110 admissions over three years). The Taranaki District Health Board Needs Assessment (October 2001) also highlighted that Taranaki had a higher rate of childhood poisonings than the national rate.

In-depth analysis of the original dataset indicated that these poisonings occurred mostly in the home environment. Over two thirds of poisoning related admissions involved medications, specifically paracetamol and psychotropic medications. This led to the development of the Paracetamol Poisoning Prevention Project in 2003.

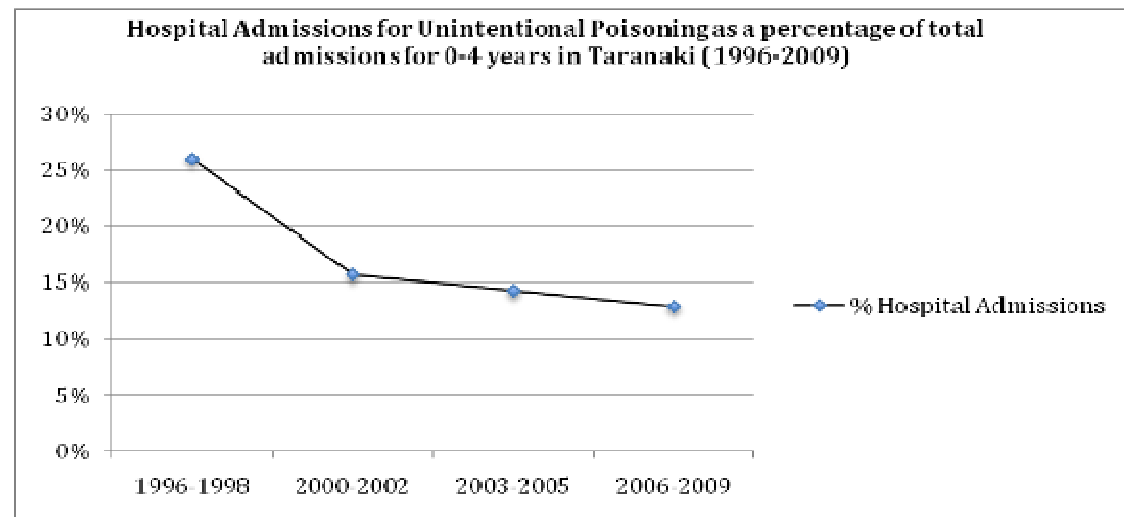
The most recent data analysis (2006-2009) has demonstrated a reduction in children's hospital admissions for poisonings, now accounting for 12.9% of hospital admissions for unintentional injury for children under five years old (27 admissions over three years).

Kidsafe Taranaki Trust Analysis of Paediatric Hospital Admissions for Unintentional Injury to Children reports from the past 12 years show the following reductions in hospital admissions for poisonings.

Figure 4 - Hospitalisations for Unintentional Poisoning of Children Aged 0-4 as a percentage of total unintentional injury hospitalisations

Taranaki, 12 year trend (3 year average figures):

1996-2009



CASE STUDY 3 – Programmes to Reduce Unintentional Poisoning in Children (continued)

EVALUATION FINDINGS

Paracetamol Poisoning Prevention Project

This project involves the delivery of poisoning prevention education by GP's or nurses whenever paracetamol is prescribed to under 5's. During the consultation, the caregiver receives a five to 10 minute informative session on poisoning prevention including information on safe and accurate dosage and ways to create a safe physical environment, relative to poisoning prevention. Parents are also provided with a free cupboard latch to aid safe storage of medications in the home.

Evaluation of the project was carried out with practice staff involved in delivery of the project as well as parents/caregivers.

Practice staff were encouraged to complete a survey form at the completion of the project. When asked what the practice found most beneficial about the project the most common response was that it was a good reminder to give out the information. They also reported that being able to give out free cupboard latches reinforced the safety message they were giving. Staff were also asked for their ideas about how the project could be improved.

The parent/caregiver evaluation involved those who participated in the project and agreed to give their name and contact details for follow-up. A sample of these parents were then contacted by telephone. Of those questioned, 90% of reported that they thought the project was useful. 65% reporting having learnt something new about safe use of paracetamol and 70% reported learning something new about safe storage of paracetamol.

A high number (62%) of caregivers reporting to having used, or were still intending to use, the cupboard latch. Those that hadn't already installed the latch cited reasons such as their baby being too young to need it or not having got around to it. Anecdotally, a number of respondents reported that the information provided to them prompted them to make other changes, such as moving all medications out of reach of children. The evaluation feedback suggests the safety messages provided in this project are potentially transferable to all medications.

Full evaluation report is available at <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/Paediatric%20Paracetamol%20Poisoning%20Prevention%20Project%20Evaluation%20Report.pdf/view>



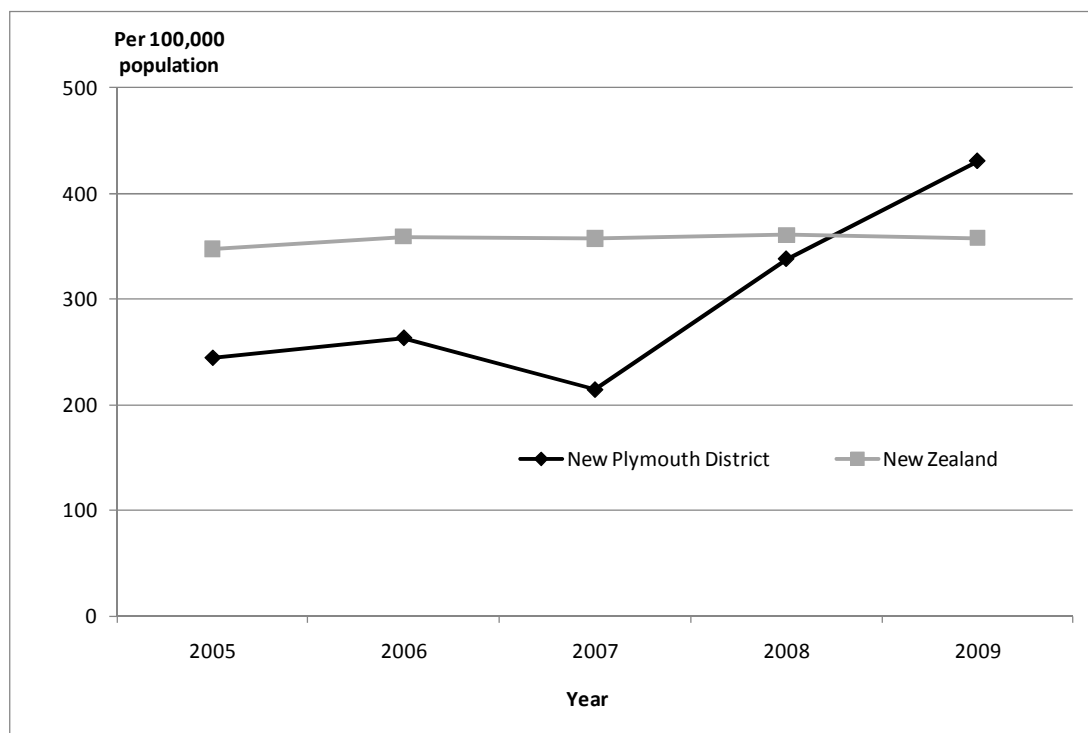
CASE STUDY 4 – Programmes to Reduce Transport Injuries

INJURY DATA

Crash and injury data for New Plymouth highlights that road safety remains a priority issue for the district with a significant number of hospitalisations for transport related injuries each year. Between 2005 and 2009, on average each year there were 209 public hospitalisations for transport injuries. Age-standardised rates of public hospitalisation for transport injuries in New Plymouth District were below the national average in the three years 2005–2007 (figure 5). However, the rate increased to almost match the national average in 2008 and exceed it in 2009.

Figure 5 - Public Hospitalisation for Transport Injuries

New Plymouth District and New Zealand, Five year trend: 2005–2009



Transport / road crash deaths

Ministry of Health mortality data for the five years 2003–2007 records a total of 43 transport deaths for the New Plymouth District population. This was an average of 8.6 transport deaths per year. The highest number of transport deaths was in 2004 (15 deaths) and the lowest in 2005 (four deaths).

Information from the New Zealand Transport Agency (2010) shows that in New Plymouth District during the five years 2005–2009, a total of 31 people were killed in 28 road crashes (an average of six road deaths each year).

CASE STUDY 4 – Programmes to Reduce Transport Injuries (continued)

EVALUATION FINDINGS

Kids Involved in Driving Down Speed (KIDDS) Project

The KIDDS project was a partnership initiative between ACC, New Plymouth Police, RoadSense and 6 local primary schools. The project, primarily led by children, aimed to promote road safety around schools through raised awareness and ultimately community action. Children from each school spent 1-2 weeks collecting vehicle speed data (using hand held radar guns) along with information on road and weather conditions. This information was then analysed to identify the main road safety issues affecting the school. The children were then supported to develop their own proposed road safety solutions and worked with local road safety representatives to implement these where possible.

The project was evaluated using the 10P project evaluation template developed by the Victorian Safe Communities Network. Evaluation data consisted of feedback from project partners and teachers/teaching support staff involved in the project. A record of the road safety actions implemented at each school was also taken.

The main outcome of the project was that the schools demonstrated an increased degree of ownership of their own road safety issues, particularly those that the school could exert some influence over (e.g. parent's parking behaviour). The schools involved in the project also felt that the project had been an excellent learning opportunity for the children and had increased their awareness of the range of factors that impact on road safety. Feedback from teachers involved in the project suggested students had been highly engaged in the project and had a good understanding of the road safety issues affecting the school. The students also developed rational and appropriate responses to the problem (although some were cost prohibitive – e.g. underpass). A number of road safety initiatives were implemented including the design and installation of road safety signs outside some schools, installation of fencing around one school, changes to parking regulations outside one school, a reduction in speed (to 40km/h) outside one school and installation of flashing light signals. Schools also sent home messages about safety through the school newsletter, developed road safety information packs for new parents and began actively policing parking behaviour around school (e.g. challenging unsafe parking).

A wider impact of the project was achieved in two ways. Firstly, the students in the school took road safety messages and requests (e.g. to park safely, to drive slower) home to their parents and the schools reinforced this message through their newsletters. As parents were often identified as part of the schools' road safety problems this was felt to be an effective way of engaging with the parents. Secondly, local media became interested in the project and followed it for several months resulting in a regular stream of newspaper and, occasionally, radio reporting. NPIS dealt with the initial media contact but schools increasingly took responsibility for this and promoted their own particular safety message. Good media coverage has occurred at each phase of the project and road safety around schools continues to be covered by the local newspaper.

A copy of the evaluation report is available at: <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/10P%20KIDDS%20Project.pdf/view>.



CASE STUDY 4 – Programmes to Reduce Transport Injuries (continued)

Ready2Drive Expo

The Ready2Drive Road Safety Expo was aimed at Year 10 students and aimed to raise road safety awareness of young people who are about to apply for their learner licence or have recently gained their licence. The main focus of the event was to highlight the impact of alcohol on driving ability, the importance of wearing a seatbelt, knowledge of road rules, scooter safety survival tips and the consequences of road crashes. The event was held on the school grounds and students were split into groups and participated in a range of road safety activities including taking part in an obstacle course while wearing Fatal Vision goggles (“beer goggles”), a ride on the ‘seatbelt simulator’, a visit to the Police Booze Bus to find out more about drink driving related laws, an online scooter safety activity and a taking part in a sample driving theory test using the AA website

Evaluation was carried out using a feedback form completed by students who participated in the programme. Students were asked a number of questions about what they had learnt at the event, what key messages they had taken away and whether they intended to change their behaviour as a result.

73% of the students stated that participating in the Ready2Drive Expo changed the way they thought about road safety. Of this group, more than half stated that they had become more aware of the consequences of drinking and driving. Other comments focused on the importance of seat belts, dangers of driving, importance of road rules, consequences of car crashes and the importance of wearing the right safety gear on scooters.

A large majority of the students could recall at least one of the key safety messages from each of the six modules that they completed. Recall was highest for the effects of alcohol (92%), in particular the danger of drinking and driving and the effects of alcohol on vision, reactions and coordination. Recall was second highest (89%) for seatbelt use with the main messages being the high impacts of low speed crashes and the importance of checking seatbelts are put on properly.

61% of the students who took part in the event said they would change their behaviour as a result of what they had learnt there. Most stated that they would not drink and drive. A smaller number of students stated that they would be more responsible and careful of their own and others’ safety and that they would always wear a seatbelt.

When asked what they enjoyed about the event almost all of the students pointed to the “beer goggles” (Fatal Vision) activity because it was fun, interactive and a good way of learning about the effects of alcohol. The least popular activity was the booze bus visit because it just involved a talk and students thought it would have been more enjoyable to be breathalysed or take part in some kind of activity.

A copy of the full evaluation report is available at: <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/STUDENT%20EVALUATION%20READY%20%20DRIVE%202010.pdf/view>



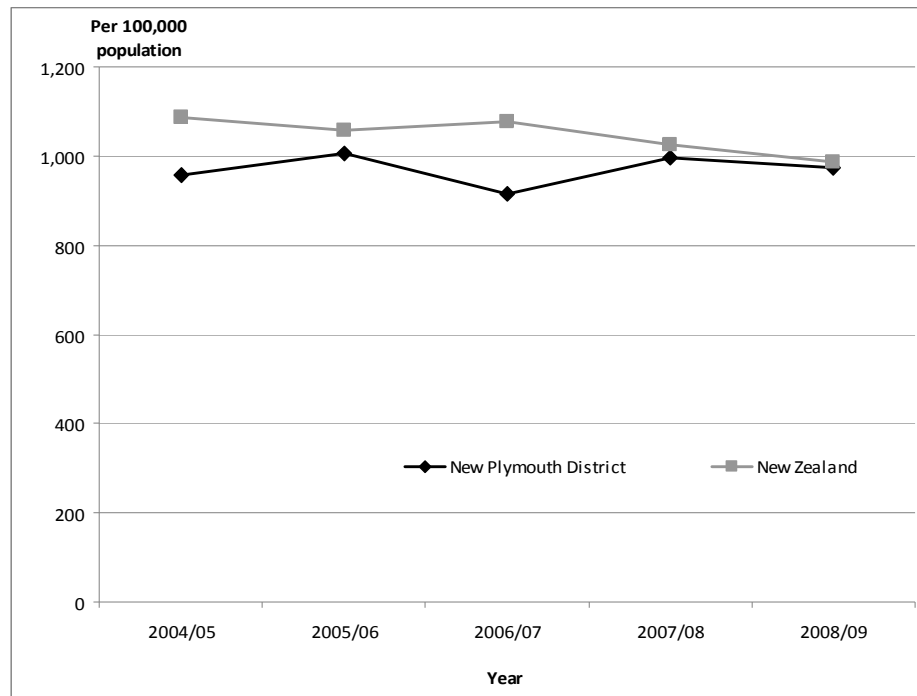
CASE STUDY 5 – Reducing Workplace Injuries

INJURY DATA

In New Plymouth District in the five financial years to 2008/09, on average each year there were 615 new entitlement claims for workplace injuries. In the financial year 2004/05, the age-standardised rate of ACC new entitlement claims for workplace injuries was 957 per 100,000 (figure 6). This was 12 percent lower than the national workplace injury claim rate (1087 per 100,000). In the four subsequent years the New Plymouth District rate rose and fell without indicating any clear overall direction. The national claim rate dropped over these four years and by 2008/09 was almost the same as the New Plymouth rate.

Figure 6- ACC New Entitlement Claims for Workplace Injuries (People Aged 10+)

New Plymouth District and New Zealand, Five year trend: 2004/05–2008/09

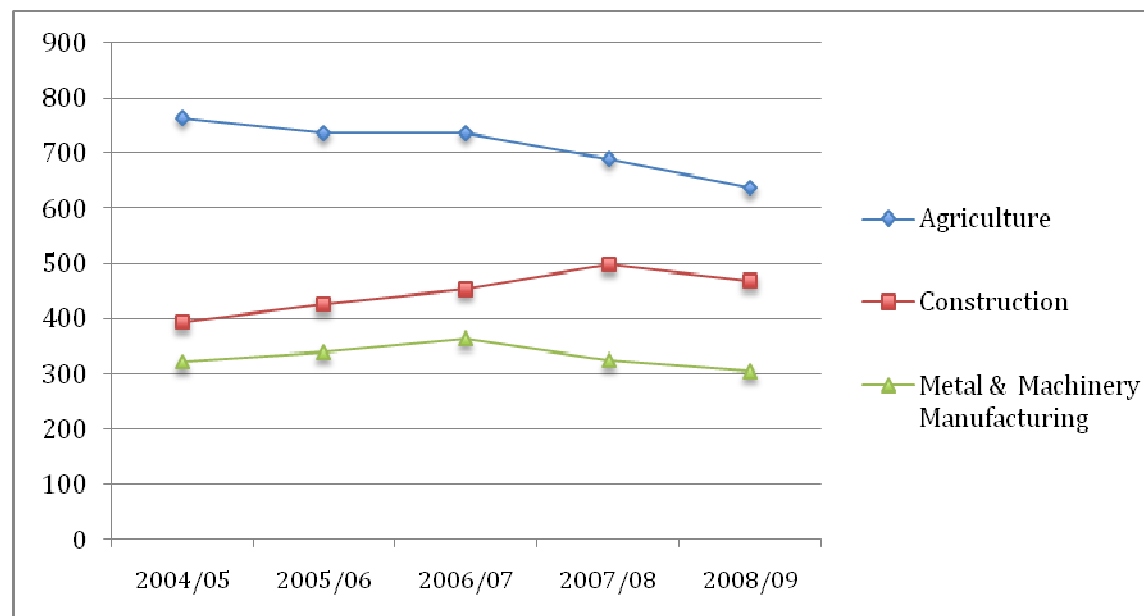


CASE STUDY 5 – Reducing Workplace Injuries (continued)

Agriculture, Construction and Manufacturing have been identified as statistically high-risk industries for workplace injuries and these areas have been the focus of much of the collaborative workplace injury prevention activity in the district. Numbers of ACC claims (all claims) for workplace injuries has shown a steady decline in the agricultural sector from 764 in 2004/05 to 636 in 2008/09. ACC entitlement claims were increasing in the construction and manufacturing sector but the rate of claims has shown a fall in manufacturing since 2006/07 and construction since 2007/08 (figure 7).

Figure 7 – Total number of ACC Claims (all claims) for Workplace Injuries by high risk industry

New Plymouth District, Five year trend: 2004/05–2008/09



CASE STUDY 5 – Reducing Workplace Injuries (continued)

EVALUATION FINDINGS

Trades Apprentice Challenge

The Trades Apprentice Safety Challenge is a practical safety competition held at the Taranaki HSE Centre each year, aimed at Trades Apprentices working primarily in the construction, engineering, and oil & gas industry. The competition was adapted from a similar project aimed at agricultural students (the Taranaki Secondary Schools Agricultural Team Challenge). The competition involves teams of 4 trades apprentices taking part in a number of practical exercises for which they are awarded points for safety knowledge and skills (e.g. completing a hazard ID, selecting appropriate PPE, team work and answering safety related questions). The activities covered topics such as manual handling, lifting/scaffolding, road safety, first aid, physical fitness, chemical handling, fire safety and electrical safety.

Evaluation was carried out using a feedback form completed by the trades apprentices after the event. Verbal feedback from activity leaders was also recorded during a de-brief session held at the end of the event and a 10P Evaluation Report was completed.

Evaluation feedback from the apprentices suggests that they found the activities relevant and informative. The activity reinforced learning and highlighted that they already had a good level of safety knowledge but needed to remember to apply it. A number of the activity facilitators found that the activity provided a valuable opportunity for them to connect with a typically 'hard to reach group' and undertake some focused educational work with them. Some facilitators gained useful feedback that can be used to inform their education campaigns in future.

The small group size (4 apprentices per team) allowed focused educational work to be undertaken with the participants. Feedback from the participants suggests that the activities reinforced existing knowledge and highlighted that they already possessed a good level of health and safety knowledge but needed reminders to use it. Most teams struggled with the first aid activity and acknowledged that this was an area they needed to work on. 4 free first aid courses were awarded as a spot prize to the team that scored lowest in this area.

There has been some anecdotal evidence about the value of the first aid activity to one of the teams who were faced with a serious incident a month after the Trades Apprentice Challenge event. (This is outlined in Criteria 2, Case Study 6). It was pleasing to see that the team who scored lowest in the first activity in 2009 (and went on to complete the free first aid course) returned to the 2010 competition and scored highest in that activity.

A copy of the evaluation report is available at <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/10P%20Trades%20Apprentice%20Challenge.pdf>



CASE STUDY 5 – Reducing Workplace Injuries (continued)

Taranaki Secondary Schools Agricultural Safety Challenge

The Taranaki Secondary Schools Agricultural Safety Challenge (Criteria 3, Case Study 3) is a hands-on, practical event that aims to increase students' awareness of agricultural hazards and safe farming practices. Teams, up of four students from secondary schools across Taranaki undertake safety challenges focusing on tractor driving, use of firearms, ATV driving, chemical handling, fire safety, livestock handling, first aid and working at height. Teams are marked on their safety knowledge and skills and provided with feedback about their performance at the end of each session.

The small number of participants made it possible to evaluate the programme using focus group interviews. Five teams (20 students) were interviewed in their team groups at their schools after the competition. The interviews focused on attitudes to safety, knowledge, confidence and practice.

Key findings from the evaluation were:

- 100% of participants interviewed believe they benefited by participating in the competition
- 87% of participants interviewed learned at least one important piece of safety information
- 81% have adopted at least one safer practice
- 56% discussed safety issues at home after participating in the competition

In terms of attitudes to safety and safety knowledge, 62% reported being more safety conscious as a result of the competition and 87% were able to describe at least one thing that they learned on the day (mostly around chemical handling). Almost half of those interviewed felt that the event left them feeling more confident about working on farms and that their confidence was reinforced by the competition.

In terms of practice, 81% of the students were able to describe something they do differently now as a result of attending the competition (in particular with reference to safer use of chemicals and safe use of tractors). For example, one student reported that, as a result of the first aid activity, he was able to provide appropriate first aid to his brother who suffered a serious laceration on a piece of roof iron after the event. 56% of the students talked about what they had learned at the event when they got home (mainly with their fathers). Responses to this were mixed with some parents expressing little interest, although most were interested and a small number commented that they were surprised at what they had learned. One student reported that his father had stopped mixing chemicals haphazardly since the student had discussed chemical safety with him.

The evaluation indicated that the Agricultural Team Challenge was a very effective strategy for raising awareness, increasing knowledge and positively influencing behaviour in relation to safe farming practice. The report concluded that there is scope for this strategy to be introduced to other areas or for it to be extended within Taranaki to include other than school teams. Indeed this has taken place locally with the introduction of similar Challenge events at the Taranaki HSE Centre.

A copy of the 1998 evaluation report for the Agricultural Safety Challenge is available at: <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/Agricultural%20Challeng%20Evaluation%20Report.pdf/view>



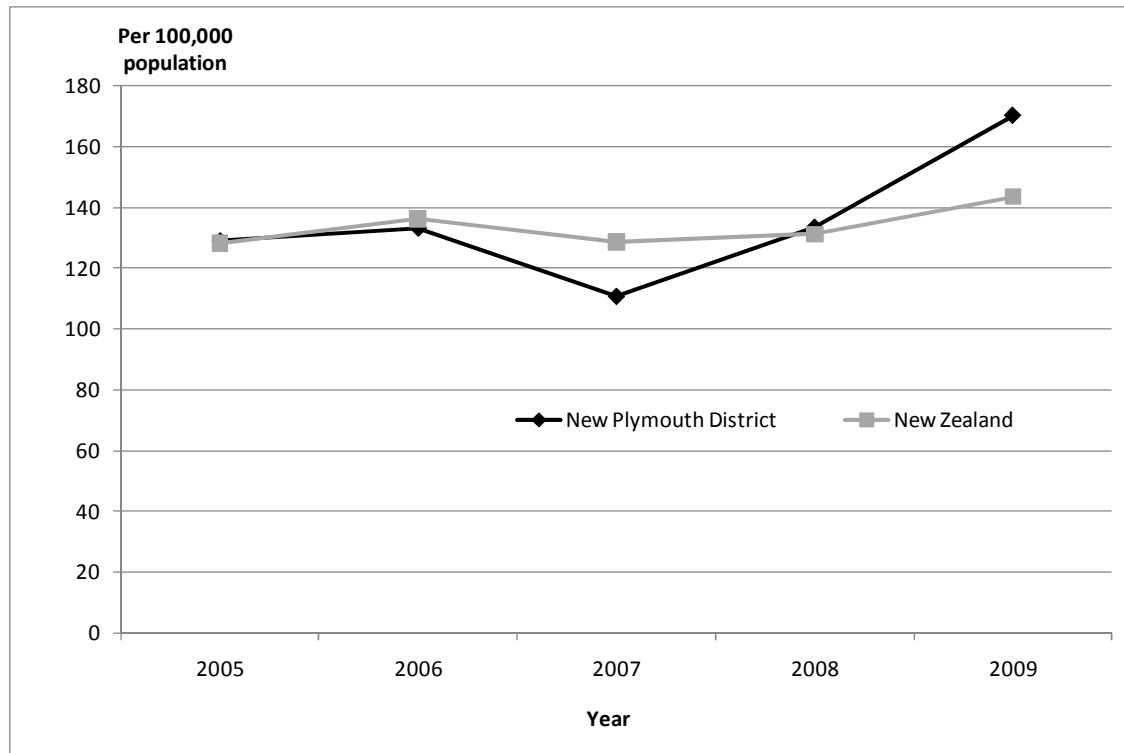
CASE STUDY 6 – Programmes to Reduce Suicide

INJURY DATA

In New Plymouth District between 2005 and 2009, on average each year there were 91 public hospitalisations for suicides / self-harm. Over the same period, rates of public hospitalisation for suicides / self-harm in New Plymouth District were generally similar to the national average. Only in 2009 did the New Plymouth rate exceed the national average.

Figure 8 - Public Hospitalisation for Suicide / Self Harm

New Plymouth District and New Zealand, Five year trend: 2005–2009



Deaths from suicide / self-harm

Ministry of Health mortality data records a total of 39 suicide deaths for the New Plymouth District population in the five years 2003-2007. This was an average of 7.8 suicide deaths per year. The highest number of suicide deaths was in 2005 (10 deaths) and the lowest in 2003 (five deaths).

CASE STUDY 6 – Programmes to Reduce Suicide (continued)

EVALUATION FINDINGS

ASIST (Applied Suicide Intervention Skills Training)

ASIST is a 2 days skills-based workshop that responds to an identified need for enhanced suicide intervention knowledge and competence. The workshops help increase people's ability to recognise when someone may be at risk of suicide and reach out in a supportive way that links them with further resources and help. The importance of linking people to informal supports (such as family and friends) and options for professional help is emphasised. Workshop participants include people concerned about family members or friends, along with those in public contact, volunteer or professional helping roles.

ASIST is an internationally run programme and has been extensively evaluated. However, individual workshops are evaluated using participant questionnaires to ensure quality is maintained and to identify areas for improvement.

Evaluations of the ASIST programme in Taranaki have found that the majority of participants leave the workshop feeling more aware of signs of suicide risk, more able to ask directly about thoughts of suicide, more able to discuss the issue with them and able to review immediate suicide risk and help reduce that risk. The majority of participants also gained greater understanding of their own attitudes and experiences and how these affect helping a person at risk.

When asked what they would do differently as a result of the workshops participants quoted the following kinds of responses:

- “Ask the question”, i.e. ask a person showing signs of suicide risk whether they are thinking about suicide
- Be more aware of verbal and non-verbal messages that indicate someone is at risk and act upon them
- Listen more and give the time that is needed to discuss the issue
- Be more aware of asking for help when it is needed
- Promote ASIST and integrate suicide prevention into their day-to-day work

100% of participants consistently state that they will recommend the training to others and it is commonly suggested that the programme should be made more available and run more frequently.

A copy of an evaluation report from one of the local ASIST workshops is available at <http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/ASIST%20Stratford%202008%20Evaluation.pdf/view>



CASE STUDY 7 – Programmes to Reduce Crime and Violence

CRIME STATISTICS

Recorded Crime

In New Plymouth District between 2005 and 2009, on average each year there were 6854 recorded offences. The highest number of offences (7173) was recorded in 2008 and the lowest number (6111) was recorded in 2005. All areas of offending fell last year, apart from violent crime which rose 10.9%. (Figure 9).

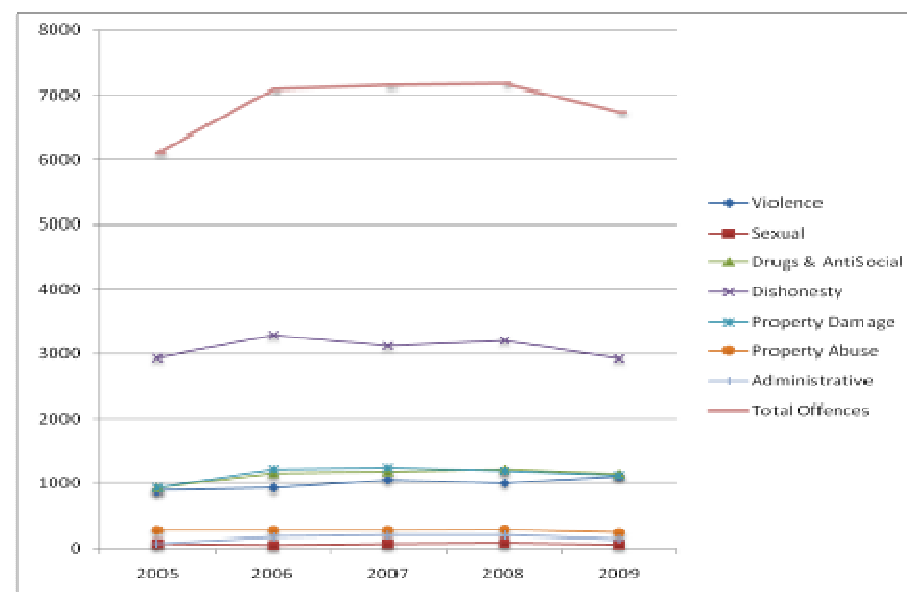
There was an overall 6% drop in recorded offences 2008 to 2009, at a time when the national rate rose by 4.6%. In 2009 the crime resolution rate sat at 53%, above the national resolution rate of 48% (Source: New Plymouth Police).

As with other injury and safety statistics, recorded crime figures should be treated with caution. Rates of recorded crime does not necessarily indicate actual crime levels. Many crimes remain unreported for a variety of reasons, and recorded levels of crime will also reflect changes in legislation, amendments to existing legislation and coding practices. Some recorded crimes may increase due to media campaigns that encourage increase reporting (e.g. family violence campaigns) but do not necessarily mean that actual rates of crime have risen. Similarly fear of crime may be high, and perceptions of safety within community may be low, as a result of media reporting about crime or previous experience of crime as opposed to actual crime figures.

New Plymouth Annual Recorded Offences: 2005 - 2009

Offence	2005	2006	2007	2008	2009
Violence	890	929	1053	999	1108
Sexual	75	57	77	93	68
Drugs & Anti-Social	929	1158	1180	1218	1146
Dishonesty	2938	3288	3124	3202	2931
Property Damage	928	1216	1240	1189	1118
Property Abuse	272	269	274	278	232
Administrative	79	178	200	194	142
Total Offences	6111	7095	7148	7173	6745

Figure 9 – Annual Recorded Offences in New Plymouth District, five year trend: 2005-2009



CASE STUDY 7 – Programmes to Reduce Crime and Violence (continued)

Perceptions of Safety

New Plymouth District Council commissions an annual NRB Communitrak Survey by the National Research Bureau to identify public perceptions of council services and opinions on council performance and outcomes. The survey involves around 400 telephone interviews with randomly selected residents in New Plymouth with appropriate sampling to ensure an even balance of male and female respondents, age groups and ward representation.

The findings of the NRB Communitrak Survey over the last 3 years have shown that the percentage of respondents who consider the New Plymouth CBD at night to be 'safe' or 'very safe' have increased year on year. The percentage of respondents who consider the CBD at night to be 'very unsafe' has dropped from 20% in 2008 to 4% in 2010. The percentage of respondents who consider the CBD to be 'unsafe' has risen slightly since 2009 (from 26% in 2009 to 30% in 2010) but remains significantly lower than the figure of 2008 (38%).

NRB Survey Findings – Perceptions of safety in New Plymouth CBD at night (2008-2010)

	2008	2009	2010
Very Safe	3%	4%	6%
Safe	18%	32%	33%
Neither safe nor unsafe	12%	17%	16%
Unsafe	38%	26%	30%
Very unsafe	20%	7%	4%
Don't know	9%	14%	10%

Note: Figures do not add to 100% due to rounding.

In terms of perceptions of safety across the whole of New Plymouth District in 2010, 37% of residents reported feeling that the district is 'definitely' a safe place to live (an increase on the 2009 figure of 34%), 61% reported feeling that the district is 'mostly' a safe place to live (a decrease on the 2009 figure of 64%) and 2% reported feeling it was 'not really' safe (a slight increase on the 2009 figure of 1%).

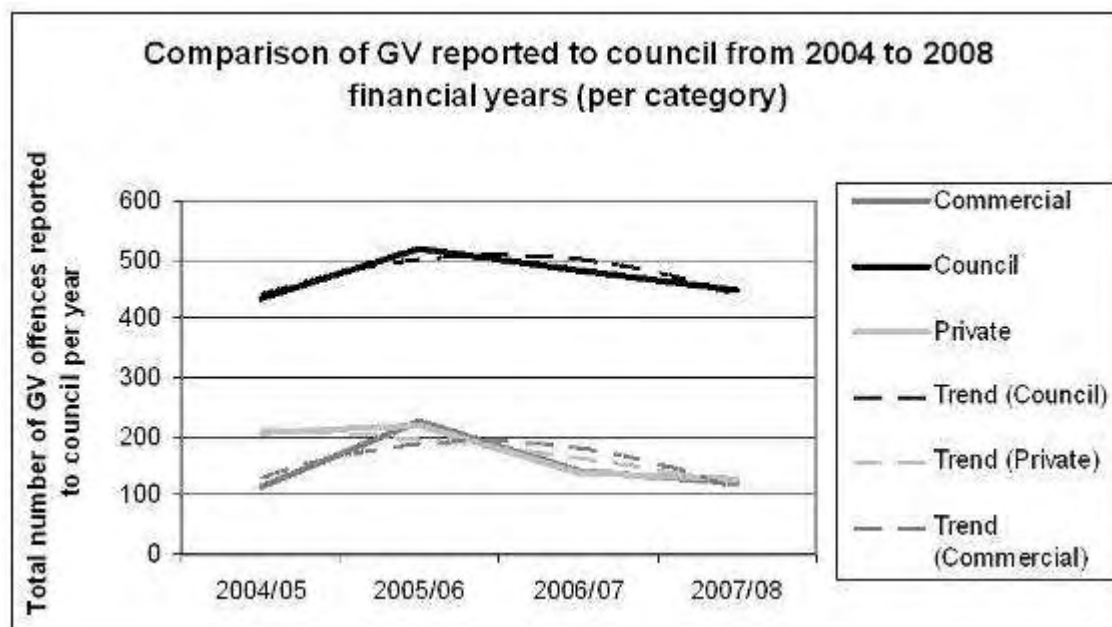


CASE STUDY 7 – Programmes to Reduce Crime and Violence (continued)

Graffiti Vandalism

Graffiti Vandalism reported to the Council over the past four years can be tentatively said to be trending downwards, after a peak in 2005/06. Analysis and interpretation of this data suggests that the first and third (04/05 & 06/07) years have remained stable for levels of graffiti vandalism within the district, with a distinct peak in the second year of operation (05/06) as the service became more widely known. The data suggests that the most recent year (07/08), in which various graffiti vandalism reduction projects have been run, has led to a decrease in overall levels of graffiti reported to council.

Figure 10 – Graffiti Vandalism offences reported to New Plymouth District Council (2004-2008)



CASE STUDY 7 – Programmes to Reduce Crime and Violence (continued)

EVALUATION FINDINGS

Graffiti Free New Plymouth

This evaluation focused on the effectiveness of council systems for addressing graffiti vandalism (GV) and how specific projects undertaken in 2007/08 have impacted on the level of GV within the New Plymouth District. Initiatives included the establishment of a collaborative community forum to respond to GV, an anti-graffiti audit/stocktake in the district, Marfell specific projects aimed at increasing community pride in public spaces, graffiti art workshops, voluntary restrictions on sale of spray cans to youth under 18 (now passed into law) and the trial of a 'legal' wall at East End Skatepark for use by graffiti artists.

Information from quantitative data sources were first analysed to provide an understanding of the GV problem within the district and also to provide an understanding of the limitations of existing recording systems.

A comparison was made between 2006/07 and 2007/08 financial years, to assist in the evaluation of GV related projects.

Data sources included:

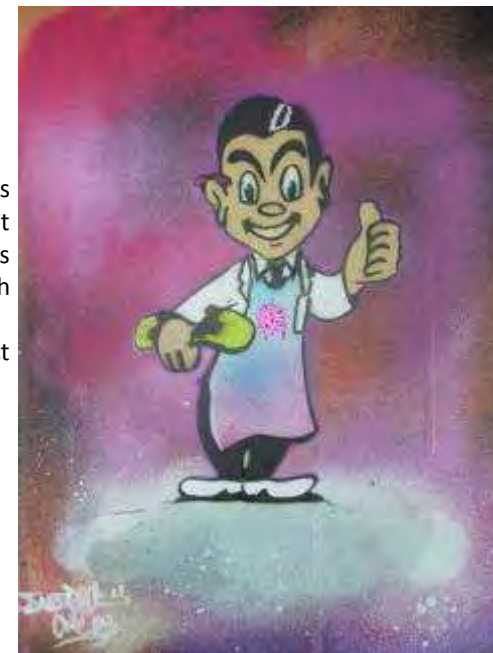
- GV reported to council for removal
- Cost of council GV removal service
- Police statistics

Evaluation on the effectiveness of council systems was also sought through discussion with key stakeholders.

Analysis of reported GV incidents highlighted that school holidays, particular during the summer, were high risk periods for GV. Targets for GV remain relatively constant although the recent falls in reported GV has led to reductions in clean up costs for council. Analysis of the effectiveness of GV projects in 2007/8 was carried out by comparing the timing of GV reduction projects to levels of removal requests through the council service request system. The timing of each project was tracked against the level of GV reported to council per category of Private, Commercial and Council (Figure 11, below).

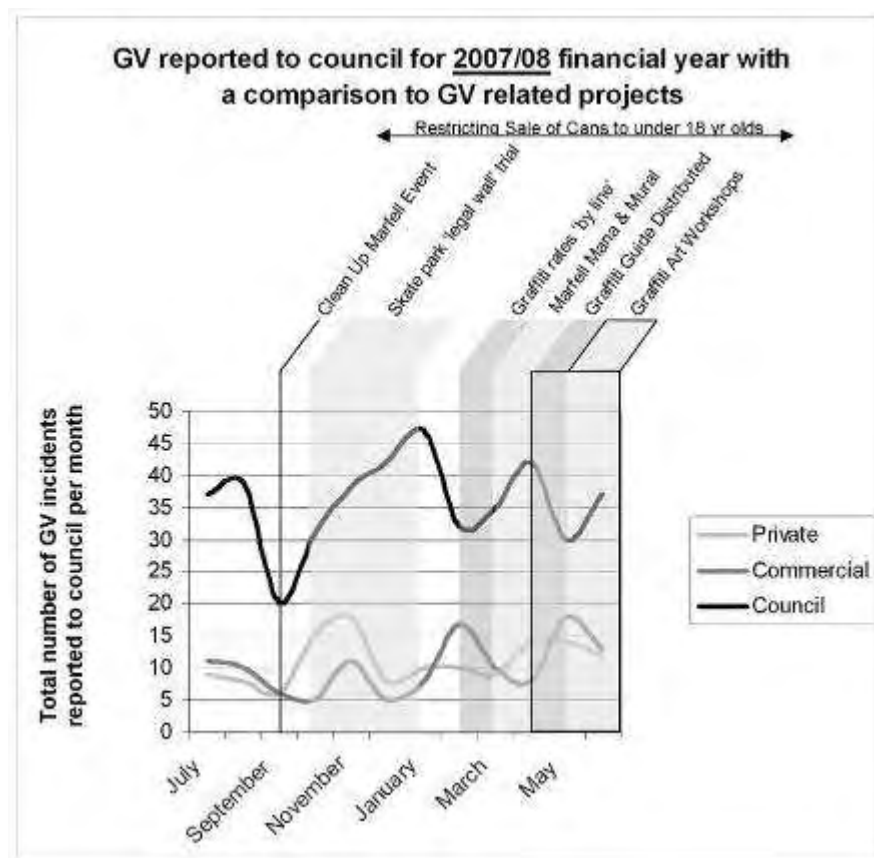
Those projects associated with increasing civic pride in Marfell were found to coincide with falls in the number of reported GV offences, including the target hardening of a graffiti prone wall on which a community mural was painted. The graffiti art workshops did not appear to have an impact on graffiti rates although the 'legal wall' did lead to an increase in graffiti at that site. Due to the timing of other projects it was not possible to determine the impact of the voluntary sales restriction of spray cans to under 18's although an increase in graffiti using vivid pens was noted (with an associated decrease in clean up costs). Projects that raised ratepayers awareness of the Council's graffiti removal service (e.g. 'rates by line' project, graffiti removal guide) led to an expected increase in reported incidents.

Finally, while not directly impacting on GV within the district, feedback from key stakeholder and partners suggested that the community graffiti forum greatly assists in collaboration of projects and strengthens the outcomes achieved through consultation.



CASE STUDY 7 – Programmes to Reduce Crime and Violence (continued)

Figure 11 – Graffiti Vandalism offences reported to New Plymouth District Council (2007/08) linked to GV related projects



CASE STUDY 7 – Programmes to Reduce Crime and Violence (continued)

WAVES Creative Youth Holiday Programme

The WAVES Creative Youth Holiday programme aims to provide positive youth development opportunities for young people identified as being 'at risk'. Reasons for being considered at risk included a lack of parental supervision, misuse of drugs/alcohol, a past history of physical violence, engagement in anti-social behaviour or not participating in mainstream school or employment. A range of workshops are on offer during the programme including graffiti art, film-making, music and weaving. The workshops are run during the week of the school holiday and demand outstrips supply.

Evaluation of the programme was carried out using a questionnaire and small focus group interviews. The evaluation also utilised service information such as numbers of young people accessing other youth services or referred on to other organisations (e.g. for counseling).

The evaluation of the 2009 programme found an increase in the numbers of whanau involved with their young person's progress. It also found that greater numbers of whanau were self referring into counselling for family members with the WAVES clinical psychologist.

The evaluation also looked at criminal behaviour and varying levels of past trouble with police through a pre and post evaluation of the programmes they attended. The evaluation found a clear reduction in criminal activity especially with the more recidivist offenders. This was considered to be linked to the trusting relationships that had been built up with the young people and them expressing that they do not want to let the WAVES staff down. A group of 10 recidivist offenders that had all spent time in prison had been 'jail free' for over 5 months at the point the evaluation was carried out. They had attended court for minor disorderly offences, but continued to receive weekly support from the WAVES clinical psychologist and had entered into contracts of behaviour in order to continue their involvement with the WAVES programme.

The evaluation found that these young people had become more productive, self sufficient and reliable since their emotional and behavioural development had been addressed. All of the participants have continued to use the service at WAVES for their Primary Health Care needs.

Evaluation was also carried out with staff involved in delivery of the programmes. Staff commented that watching the progress and success of the young people in the programme had been a highlight. They felt that the workshops improved the confidence of the young people who participated and provided a means of expressing themselves. Their engagement with other health services at WAVES was seen as a positive step, particularly as many of them had received no healthcare for many years.

A copy of the full evaluation report is available at

http://www.safetaranaki.org.nz/injury-prevention/npis/evaluation-reports/1-957835-Ministry_of_Justice_-_Creative_Youth_Holidays_-_Evaluation%20on_report_from_Waves.pdf/view



CASE STUDY 8 – Programmes to Reduce Family Violence

FAMILY VIOLENCE STATISTICS

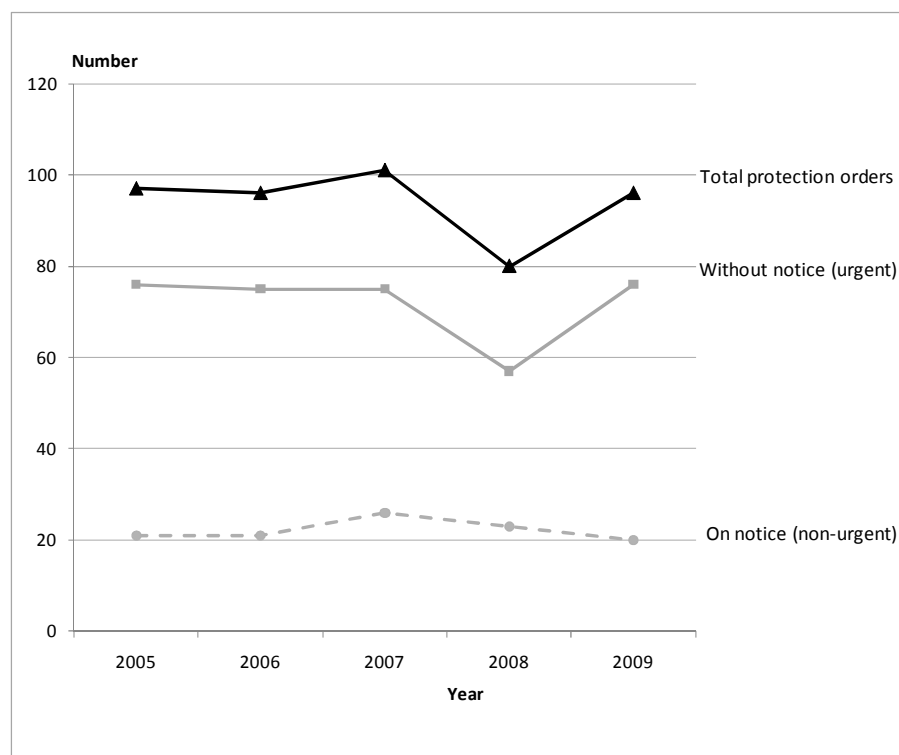
Individuals are able to apply for a protection order against someone they have a close personal relationship with (e.g. family member), or a person with whom they share accommodation. This is to address physical, psychological or sexual abuse they are experiencing from that person.

In the period 2005–2009, a total of 470 protection orders were filed in the New Plymouth Family Court. This was an average of 94 protection orders per year.

Of these, just over three-quarters (76 percent) were ‘without notice’ (urgent) protection orders. The rest were ‘on notice’ (non-urgent) protection orders. In 2005, there were 76 urgent notice orders filed. The number of urgent notice orders remained steady until 2008 when they dropped to 57, increasing back up to 76 in 2009. The number of non-urgent notices fluctuated only slightly over the period with the highest recorded in 2007 (26) and lowest in 2009 (20) (figure 12).

Figure 12 - Protection Orders Filed

New Plymouth Family Court, Five year trend: 2005–2009



In New Plymouth during the five-years from 2004–2008, a total of 76 people were convicted of breaching protection orders (Statistics New Zealand Table Builder, Ministry of Justice court data).

The numbers of apprehensions for breach of protection orders resulting in prosecution has increased since 2006/07. In 2006/07, 85.3% of resolutions involved prosecution and 13.3% resulted in a warning. In 2008/09, 90.5% of resolutions involved prosecution with 8.6% warnings being issued (New Plymouth Police).

Indeed, New Plymouth Police led the country with the highest measure of successful convictions for ‘breach of protection order’ and ‘male assaults female’ offences in the 2008/09 year.

CASE STUDY 8 – Programmes to Reduce Family Violence (continued)

Domestic Assaults

In the New Plymouth Policing Area from 2005–2009, a total of 163 Police apprehensions for minor common domestic assaults were recorded. This included apprehensions involving firearms or other weapons, as well as manual assaults. Most of these apprehensions (139) were resolved – almost always through prosecutions or the issuing of warnings/cautions.

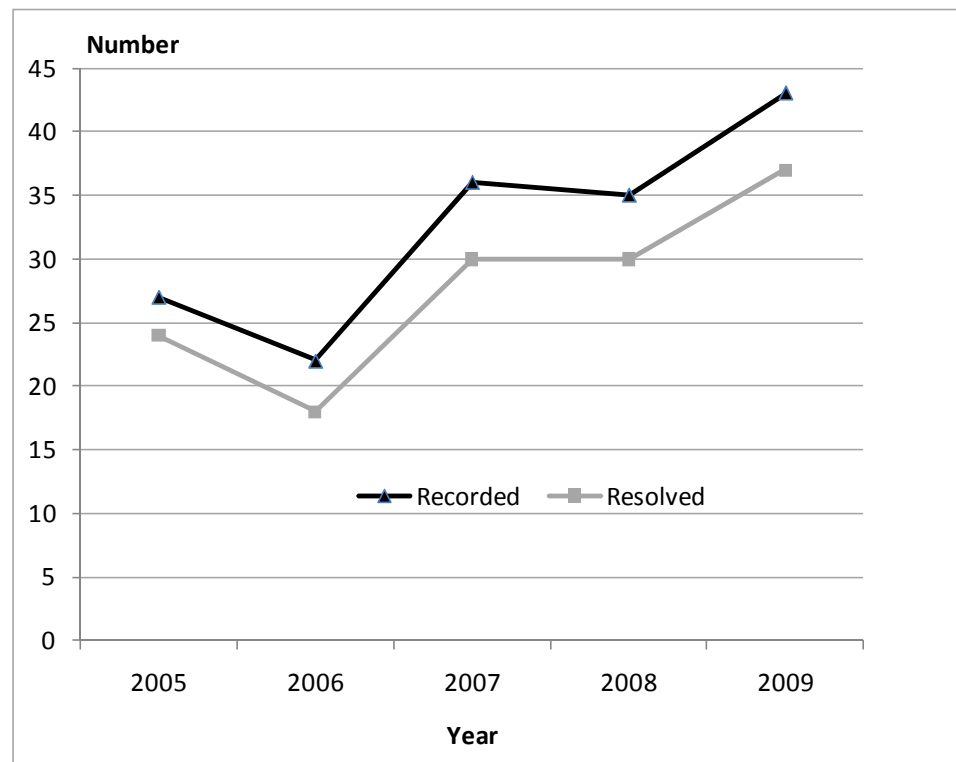
Over the five year period, the number of apprehensions for minor common domestic assaults increased from 27 in 2005 to 43 in 2009 (figure 13). The lowest number of apprehensions was recorded in 2006 (22).

The increase in police apprehensions has occurred at a time when public awareness of family violence has been actively raised through both national and local media campaigns (e.g. It's Not OK campaign). Part of this campaign has included key messages around seeking help, both as a victim and a perpetrator. The rise in reporting of family violence related offences, and associated resolutions, is seen locally as a success indicator in relation to the family violence awareness campaigns rather than an indication that family violence is on the increase. It is likely that most cases of family violence are never reported to agencies.

Due to this, any trends in recorded offences are probably not indicative of actual offences taking place. The sensitive and often covert nature of family violence means that routine data only captures those cases that are drawn to official attention. The reality is that the actual incidence of family violence is far higher than the figures suggest.

Figure 13 - Police Apprehensions for Minor Common Domestic Assaults

Recorded and Resolved, for New Plymouth Policing Area, Five year trend: 2005–2009



CASE STUDY 8 – Programmes to Reduce Family Violence (continued)

EVALUATION FINDINGS

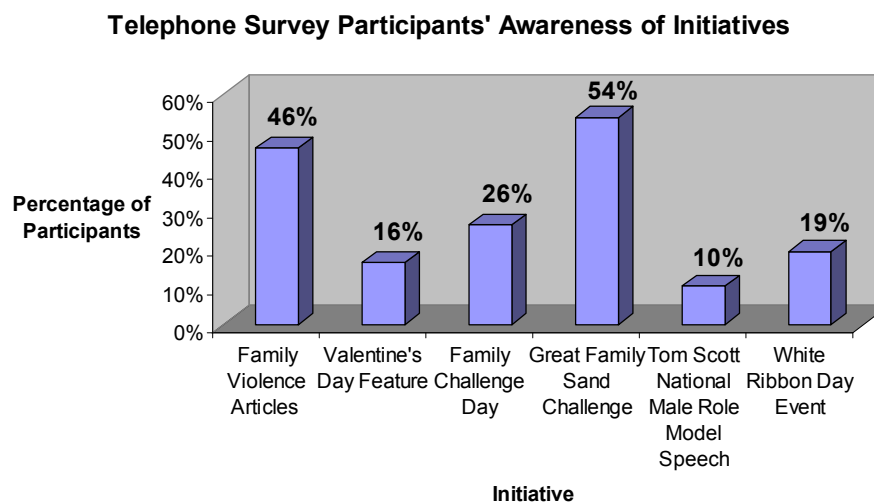
Family Violence Social Marketing Campaign

An evaluation was carried out in 2008 to assess the effectiveness of Family Violence Prevention projects undertaken by the New Plymouth Family Violence Focus Group during 2007 and 2008. The projects were described as “a multi-strategy social marketing campaign to raise awareness of family violence issues, influence public attitudes to family violence and support changes in behaviour through positive role modelling, community engagement and promotion of services”. Another evaluation, this time of the projects undertaken in 2009 and 2010 by the Taranaki Safe Families Collaborative, is currently underway and due to be released in September.

The 2008 evaluation looked at the effectiveness of a number of projects including a local media campaign, family fun day events, a national ‘role model’ presentation, White Ribbon Day events and training for local service providers. Evaluation methods included a survey published in the community newspaper and a random telephone survey. The evaluation also included verbal feedback from those who attended community events and information on feedback forms completed by service providers who undertook the training activity.

The telephone survey revealed that around half of those questioned were aware of the Family Sand Challenge event and local media articles, with a smaller number being aware of other activities.

Figure 14 – Findings of telephone survey to determine public awareness of family violence prevention initiatives



CASE STUDY 8 – Programmes to Reduce Family Violence (continued)

Family Violence Social Marketing Campaign

When asked about their level of engagement with the initiatives, the highest level of engagement (18%) was with the media articles which respondents commented were interesting, informative and, due to their frequency, were often followed regularly. Qualitative analysis of feedback on the articles showed that a number of those who read them had learnt more about family violence, its effects and its prevalence. Elder abuse, sexual abuse and verbal abuse were the most commonly recalled topics.

Many respondents commented that raising awareness of family violence is important and should continue and that the articles played an important role in increasing understanding of the issue and its impact. Of those who had read the articles, 78% either agreed or strongly agreed that their awareness of the different forms of family violence had been increased. 83.5% of those who had read the articles agreed or strongly agreed that their understanding of the impact of family violence had been increased. 83.5% of those who had read the articles also agreed or strongly agreed that the articles promoted support services available locally.



3% of those questioned had participated in the Family Sand Challenge event (at Ngamotu Beach) and did so because they were free, fun and well marketed. Two newspaper survey respondents had attended the Family Challenge Fun day (at Yarrows Stadium) and commented that the event was safe and supportive, was subtle in terms of the family violence message and successful in attracting vulnerable families. In 2007 around 500 participants attended the Family Sand Challenge and 600-700 attended the Family Challenge Fun Day suggesting that marketing and promotion of these events was very successful. Year on year the numbers attending these events have increased with some events now attracting over 1000 people. Feedback collected from participants who attended the events was analysed with key themes about the success of the event being the fact that it is free, child orientated and very enjoyable. Many families commented that they had not done anything like this with their children before and would definitely attend again. Comments were also received about the subtlety of the family violence messages in the activities and how effective this was at raising awareness of violence among children and families.



Other findings of the evaluation suggested that the 'Role Model' presentation (by Tom Scott) was probably not cost effective given the numbers that attended (65), White Ribbon Day provided an opportunity to raise awareness among the public, many of whom are unaware of what White Ribbon Day stands for and that the service providers training day was valued by those who attended and met the objective of strengthening local service providers through ongoing professional development.

Criteria Six

Ongoing participation in national and international Safe Communities networks.



New Plymouth District and the New Plymouth injurySafe Trust partners are committed to participation in national and international Safe Community networks, both to share their knowledge with other communities but also to benefit from the valuable experience that other communities have to offer. This participation has taken many forms including contribution to national and international newsletters and publications, attendance at networking events, involvement in safety conferences both nationally and internationally, support and informal mentoring for newly emerging safe communities, sharing information through our newsletters and website, hosting visitors from other communities and participation in national awards. Some examples of this participation are listed below and, while not an exhaustive list, it demonstrates the range and extent of involvement that our community has across the Safe Community network.

Contribution to national and international newsletters and publications

New Plymouth injurySafe and other groups, such as Kidsafe Taranaki, submit articles to most issues of IP News and IPNANZ Update newsletters. We feel a sense of pride in our Safe Community programme and feel it is important to share what we are doing with other communities. We are often contacted by other communities who have read one of our articles and are keen to replicate a project in their area and are seeking advice and guidance to do this. We contribute also to other national newsletters and magazines (both injury prevention and more mainstream publications). For example, the AA Motorvator magazine featured an article on our KIDDS Road Safety programme, Youth Access to Alcohol articles in the national ALAC newsletter, feature article on Trades Apprentice Challenge in the MasterBuilder magazine, Taranaki HSE Centre feature in SafeGuard magazine, contributions to the national Chain Link cycling magazine and articles on Taranaki based suicide prevention activities in the Dairy NZ newsletter and Straight Furrow rural newspaper. We have also submitted an article to the WHO Collaborating Centre Safe Community Monthly Newsletter. We are committed to making regular contributions to this international newsletter in future.

Some examples of these newsletter and magazine articles can be found at the following links:

<http://www.safetaranaki.org.nz/newsletters> (NPIS Update newsletters)

<http://www.alcohol.org.nz/InpowerFiles%5CALACsMagazine%5CDocumentWithImage.Document.1011.7d381463-ddf7-42fc-8b2d-3678a2ba219a.pdf> (page 8 - Taranaki YATA group article)

<http://www.alcohol.org.nz/InpowerFiles%5CALACsMagazine%5CAlcohol.orgDec2009.pdf> (page 14 – Alcohol Strategy)

<http://ipnanz.org.nz/resources/update%2082.htm> (Kaumatua Wellbeing Day article)

<http://www.nzips.m1.co.nz/A.asp?P=149.1.63> (Family violence and road safety project reports)



Attendance at Safe Community Networking Events

The Safe Community Programme Manager attends the SCFNZ annual networking events and has presented at these events. Involvement in this networking group has proved very valuable in enabling links between safe community coordinators around the country to be developed and maintained. The events also provide an opportunity to find out more about best practice injury prevention initiatives and to explore opportunities for these to be implemented at a local level. For example, in response to a presentation by the Director of SPINZ (Suicide Prevention Information New Zealand) at the 2009 SCFNZ networking day our region went on to introduce the QPR (Question, Persuade, Refer) on-line training programme across Taranaki. Members of New Plymouth injurySafe and other local network groups have also provided representation on a number of national groups including the NZIPS Stakeholder Reference Group, the National Falls Strategy Advisory Group, IPNANZ and other groups.

Our district has always participated in the SCFNZ Regional Forum programme. For example, we have hosted regional forums in our area (the most recent being the ALAC/SCFNZ Alcohol Forum in 2009). We have also been well supported by the Safe Communities Foundation team who have presented at our own events, including the NPIS Strategic Planning & Consultation forum in 2008 and our Keeping Young Workers Safe seminar in 2009.



Involvement in Safety Conferences

Our district has been well represented at a number of national conferences including the bi-annual IPNANZ Conference (2005, 2007, 2009), the 17th International Safe Community Conference in Christchurch (2008), the SPINZ Suicide Prevention Symposium (2007) and ALAC National Conference (2010). Representatives from local industry also frequently present at national workplace safety conferences. In 2007 funding from Roadsafes Taranaki enabled five local children and their teacher to attend the IPNANZ conference to present on the KIDDS project.

Over the last 2 years organisations from our community have also contributed to safety forums and events outside of our region which, although not directly connected to safety, play an important role in raising awareness of injury issues. An example of this are the 'Stress in Rural Communities' presentations delivered by Like Minds Taranaki to Rural Support Trust and Dairy NZ forums around the country. These presentations have served to share the work that we are doing on suicide prevention in rural communities and have led to Like Minds Taranaki being contracted to deliver these presentations at a national level as part of a mental health promotion initiative between the Rural Support Trust and Dairy NZ. These presentations have coincided with an increase in reporting on mental health issues, and suicide prevention in particular, in mainstream rural sector newsletters and other publications.

This year we have had safety-related abstracts accepted for presentation at the NZISM/ NZOHNA Occupational Health Conference (New Plymouth, September); the Public Health Association Conference (Waikato, September) and the World Safety Conference (London, September).

We have also submitted an abstract for the 4th Australian and New Zealand Falls Prevention Society Conference in Dunedin in November 2010 and are waiting to find out if our abstract has been accepted.



Support and Informal Mentoring for other Safe Communities

Our community has provided support for other Safe Communities in a number of ways. As well as responding to regular email and telephone queries from Safe Communities at an earlier stage of development than us, we have hosted visits from Safe Community Coordinators (and other safety representatives) who wish to find out more about what is happening in our district and have visited other communities to enhance our own learning. We always welcome representatives from other areas at our local events and positively encourage them to come and visit New Plymouth District and meet those working on safety projects in our area. For example, just recently we hosted a team from Rotorua who were keen to find out more about the Taranaki HSE Centre and how the project operates and, last year, we had a workplace team from Rotorua participate in our Business House Safety Challenge event.

The Safe Community Programme Manager has presented to groups in other areas to outline the process and benefits of Safe Community accreditation. For example, in 2009 the Programme Manager presented at the Rotorua and Taupo workplace safety forums and, later in the year, presented to a workplace group in Rotorua who were keen to run their own version of the Trades Apprentice Safety Challenge. We readily share our strategic information (e.g. Trust Deed, Strategic Plan, Action Plans) with other communities who may be looking at different models for establishing their Safe Community steering group.

In terms of formal mentoring, two injury prevention staff in New Plymouth have participated in the IPNANZ Mentoring Training and provided mentoring to local injury prevention professionals last year.

Two members of the NPIS Trust also participate in the Central Taranaki Safe Community Trust based in our neighbouring Stratford District.



Sharing Information

Projects taking place in our Safe Community programme are regularly featured in our NPIS Update Newsletter which is distributed widely within our own region, but also across the country through various networks including ACC programme managers, Safe Community Coordinators, IPNANZ and others. We believe the key to the success of our newsletter (which was confirmed following a recent evaluation survey) is that it is kept brief, it is regular, it focuses on local people and stories, and it keeps people up to date with upcoming events and training opportunities. Our newsletters are available at: <http://www.safetaranaki.org.nz/newsletters>. In addition we distribute a quarterly falls prevention network newsletter called Keeping Up that promotes best practice and profiles local falls prevention services.

In 2009 we also launched our new 'one stop shop' Safe Community website www.safetaranaki.org.nz. Although the website largely focuses on New Plymouth District it does provide a forum for sharing information about regional networks and projects. The choice of website name reflects our longer term vision to promote a 'Safe Taranaki', beyond the boundary of our own district. The website expands on our original website, which focused on New Plymouth injurySafe Trust, to incorporate the wider concept of a virtual safety resource centre for the district. Information on the site focuses on a range of safety topics and provides information on local strategies, groups, projects and resources. It also provides a place for smaller and less formal groups to store information about their projects. It also enables our district to continually expand the concept of 'safety' by adding topics such as sun safety, cyber safety and mountain safety.

Our local media are incredibly supportive of the safety promotion work that is undertaken locally and articles relating to safety issues feature in our newspapers most weeks. Our local radio station also provide regular opportunities for us to share safety messages through interviews related to our news stories. We also readily contribute to national media enquiries when they arise. For example, during our recent 'Grim Reaper Intersection Campaign' the Safe Community Programme Manager took part in a live radio interview with Radio New Zealand and a Christchurch based radio station.

In addition to this, our community has informal information sharing arrangements around the world. For example, we share our newsletters and evaluation reports with Cairns Safe Community and exchange falls prevention information with falls coordinators based in Australia, America and the UK.

National Awards

Our district, and indeed our region, has been well represented at the annual Safety NZ Week *Injury Prevention and Community Safety Awards* which ran from 2005 to 2008. A number of our programmes have been selected as finalists, highly commended and even winners including our Youth Access to Alcohol programme and various Falls Prevention initiatives. We have won the Category 3 section twice in recognition of our use of national strategy in the development of our local initiatives. We also take the opportunity to enter other safety related awards and have won awards at the NZ Workplace Health & Safety Awards (ACC Thinksafe Best Leadership of an Industry Sector 2006) for the Taranaki HSE Centre, Road Safety Trust Innovation and Achievement Awards 2008 (Education Category) for our KIDDS road safety project and the Joined Up Local Government Award (SOLGM Awards 2010) for our Alcohol Strategy among others.



International Recognition

As a district, New Plymouth has received national and recognition over the last two years that is worthy of mention in this application. New Plymouth has been formally recognised for a impressive number of achievements over the last five years:

2005: Ministry for the Environment Year of the Built Environment Awards – highly commended for the Coastal Walkway

2006: Highly Commended in the NZ Community Safety and Injury Prevention Awards

2006: The Supreme Award in the 2006 New Zealand Institute of Builders Awards of Excellence, awarded to Fletcher Construction Taranaki for the Coastal Walkway. The judges noted the design and construction challenges on a long, exposed site

2006: New Zealand Institute of Landscape Architects Awards' George Mason Supreme Award and the Rural/Park/Recreation Design Gold Award, for the Coastal Walkway (awarded to Isthmus and Richard Bain Landscape Architect)

2007: Taranaki Regional Council Environmental Award for the Herekawe Walkway project. (Awarded to NPDC, Dow Agrosiences, Shell, Methanex, Taranaki Tree Trust and A J Cowley)

2008: A New Zealand Diversity Action Award from the Human Rights Commission for NPDC's outstanding contribution to race relations

2008: Youth in Local Government Supreme Award 2008 and the Active Citizens Award category for the Youth Strategy

2008: Runner up for the Partnership Work Award category in the Youth in Local Government Awards for the Youth Strategy

2008: Named New Zealand's Top Town by North & South magazine

2008: Best Cycle Facility Project at the Gemini Cycle-Friendly Awards for the Coastal Walkway

And, in 2008, at the International Liveable Communities (LivCom) Awards:

- A Whole City Award (Gold) as the Best City of our size in the world (20,001-75,000 population category)
- The Sustainable Projects Award (Gold) for the Coastal Walkway
- A Community Sustainability award.



International Recognition...and time to say Goodbye...

Most recently our Mayor, Peter Tennent, has recently been announced as reaching the shortlist for World Mayor for 2010. He is one of a shortlist of 25 Mayors from Australasia, Canada, USA, Latin America, Europe and Asia, selected from an original 840 nominations. The World Mayor Awards is run by City Mayors, an international think tank on urban affairs, and honours Mayors with the vision, passion and skills to make their cities incredible places to live in, work in and visit.

As our Mayor prepares to step down from his role when the local body elections take place in October 2010, it is timely to acknowledge the immense support, enthusiasm, passion and pride that Mayor Peter Tennent has encouraged within our community. For those working in community safety in our district his recognition and support of the work that is taking place has been unwavering and hugely valued. Mayor Pete attends most of our functions and events, both in a formal capacity and, often, through an informal visit just 'dropping in' to see how we're doing.

As Mayor Peter Tennent looks forward to a new chapter in his life, we are sure that he will take away a sense of pride that he was our Mayor when we were first accredited as an International Safe Community in 2005, and again when we applied for re-accreditation in 2010.

Thank you Mayor Pete. Good luck, and remember you will always be welcome to 'drop in' at our community safety events in future!



Looking to the Future

Taking the next steps on our Safe Community journey towards our vision of
a whole of community free from harm...



New Plymouth District Safe and Secure Community Strategy 2010-2020

The New Plymouth Safe and Secure Community Strategy 2010-2020 has been developed over the last year, along with the innovative industry led initiative Be Safe Taranaki, and represents the next step on our Safe Community journey. The Strategy establishes our community's vision for maintaining and enhancing New Plymouth District as a safe place to live, work and visit.

The purpose of the strategy is to provide an overarching umbrella that brings together existing strategies and partnership in a way that enhances their ability to be effective and reduces the potential for duplication, overlap and missed opportunities. It also provides opportunities for the formal inclusion of new and existing safety networks (e.g. emergency planning, drugs, gambling) into the district's Safe Community model and to identify the potential for greater joint working.

The strategy is underpinned by nine guiding values:

- A whole of community strategy
- Integrated and holistic
- Collaborative partnerships and building community capacity
- Stakeholder commitment and community participation in decision making
- Evidence focussed and attention to underlying causes
- Promoting co-existence, cooperation and connectedness
- Harm minimisation, personal responsibility and the promotion of a safety culture
- Equity of response
- Resource optimisation

The vision of the strategy is for New Plymouth District to be 'A whole of community free from harm', with the following objectives:

- Reducing levels of crime
- Improving overall feelings of safety
- Increasing actual level of safety
- Embedding a safety culture and growing the knowledge and capacity of people and organisations to respond
- Delivering effective and improved coordinated interventions



Community Safety Strategy Action Plan & Goals

The Strategy has led to the development of an Action Plan by those agencies and organisations involved in the delivery of community safety matters in the district. The action plan aims to address gaps in current responses to community safety issues in New Plymouth District. And it primarily incorporates actions where a coordinated and holistic approach can positively influence the outcomes for a broad range of community safety concerns in the community.

The strategy and associated action plan take a 'horizontal approach' to addressing community safety needs by identifying opportunities for greater collaboration and integrated working across safety areas. For this reason the goals identified within the action plan are not linked to particular safety themes but rather towards achieving greater coordination and joint working across local agencies and networks:

- To develop and enhance an integrated approach to community safety
- To improve access to quality information and signposting for organisations and individuals within the community
- To foster a whole of community approach to improving community safety
- To improve the coordination and effectiveness of community safety programming and promotions
- To minimise the harm caused by drug misuse in our community
- To reduce the incidence of family violence
- To minimise the harm caused by problem gambling
- To foster initiatives that support safe sustainable communities
- To support communities to feel safe and take ownership of their communities
- To improve the overall safety of our road users
- To transform community spaces to increase safety and wellbeing
- To improve the awareness and responsiveness of the community to family violence
- To improve the overall safety of our road users and workplaces
- To improve the overall safety of our employees and workplaces
- To improve the preparedness of communities to respond to emergency

Evaluating the Strategy

Each of the five objectives of the Safe and Secure Community Strategy will be evaluated according to their process and impact measures. Process measures assess the extent to which the objectives and actions identified in the strategy have been completed while impact measures assess the extent to which broader societal trends and characteristics relevant to the strategy have changed.

Our performance will be assessed against a range of high level outcomes measures which sit alongside the action plan in the Safe and Secure Community Strategy as well as strategy partners' individual supporting programmes and plans. Outputs delivered from each of the actions will be assessed according to the actual impact they have had on the achievement of the outcome measure.

The Strategy is long term (10 years) reflecting the fact that changes in injury and safety trends can take many years to actualise and therefore require long term commitment from partners.

The Strategy is currently in draft form and is about to be released for community consultation. To view a copy of the strategy please visit <http://www.safetaranaki.org.nz/injury-prevention/npis/documents/NP%20Safe%20and%20Secure%20Community%20Strategy%20%202010-2020.pdf/view>



APPENDIX ONE: NPIS Strategic Plan 2008-2011 (Summary)



NPIS Strategic Plan 2008-11

A full copy of our Strategic Plan 2008-11 can be found at :
www.npis.org.nzplanning.htm

Planned strategies for the next 3 years (2008-11):

- Deliver at least one annual seminar to highlight and address injury issues
- Develop and implement a regional Falls Prevention Strategy for older adults
- Work with local partners to support implementation of recommendations from the NPIS Suicide Prevention Needs Assessment
- Develop a Safe Community website for the New Plymouth District that will serve as a 'virtual resource centre' for injury prevention and community safety
- Support the development of effective interventions by Maori to address the injury and safety issues identified in the Taranaki Maori Participatory Action Research project
- Seek funding for 2011 Community Based Injury Prevention Needs Assessment
- Evaluate effectiveness of our strategic partnerships and networks with others working towards safety in the district
- Prepare New Plymouth District for WHO Safe Community re-accreditation

Contact Details to go here

NPIS

NEW PLYMOUTH INJURY SAFE

NPIS New Plymouth Injury Safe - Strategic Plan 2008-11 SUMMARY

New Plymouth District – An International Safe Community

In 2005, New Plymouth Injury Safe and the New Plymouth District Council, made a successful application to Safe Communities Foundation New Zealand (SCFNZ) that resulted in New Plymouth District being designated as an International Safe Community based on the World Health Organisation (WHO) framework for safe communities.

Safe Communities is a World Health Organisation (WHO) concept that recognises safety as a "universal concern" and a responsibility for all.

The Safe Communities model creates an infrastructure in local communities to increase action on injury prevention and safety promotion through the building of local partnerships. Accreditation as a Safe Community provides recognition for the efforts of the various organisations and individuals working together to design and implement strategies to promote safety and reduce the incidence and/or severity of injury in their population.

NPIS incorporates WHO Safe Community criteria as underpinning principles that guide its ongoing planning and development.



NPIS

NEW PLYMOUTH INJURY SAFE



New Plymouth injury Safe Trust (NPIS)

NPIS represents a coalition of local organisations and groups with an interest in injury prevention and community safety within the New Plymouth District. The group was established as an informal coalition in 2001 and formalised their structure by registering as a Charitable Trust in 2006.

The current core partners of New Plymouth injury Safe are:

- Tui Ora Ltd.
- Taranaki District Health Board (Health Promotion Unit)
- New Plymouth District Council
- Kidsafe Taranaki Trust
- Accident Compensation Corporation (ACC)
- New Plymouth Police
- Department of Labour

Most of the organisations represented in NPIS are also involved in service delivery activities or in networks of service providers. By this means, NPIS links directly with working groups and project teams and is able to ensure that priorities are being addressed, duplication avoided and gaps in service delivery identified.

SHARED VISION

The organisations represented in the NPIS group are each committed to a shared vision of community safety:

"New Plymouth District, a safe community without the burden of injury"

Purpose of NPIS

To achieve a positive safety culture and create safer environments for all people within the New Plymouth District.

- To monitor injury issues in New Plymouth District and provide information on needs, priorities and programmes
- To establish effective partnerships with others working towards improving safety in New Plymouth District
- To raise awareness, commitment and motivation to improve injury prevention within organisations and throughout the community
- To guide and support the development of plans for effective injury prevention interventions at a community level within the framework of the National Injury Prevention Strategy
- To assist New Plymouth District to meet the WHO criteria for Safe Communities



New Zealand Injury Prevention Strategy

NPIS uses the New Zealand Injury Prevention Strategy as a strategic framework by reflecting the Strategy's goals and objectives. The group recognises a shared responsibility with Government and the community for achieving the NZIPS vision for "A safe New Zealand, becoming injury free" at a local level through its implementation of the NPS Strategic Plan 2008-11.

Community Needs Assessment

NPIS carried out a Community Injury Prevention Needs Assessment every 5 years and uses the findings of this to inform its injury prevention priorities. The first Needs Assessment was completed in 2001, and then repeated in 2006.

A key aim of the needs assessment is to identify the types of injuries, population groups and injury locations that should be given priority by a community injury prevention programme in the context of existing injury prevention programmes and activities within our district. This injury is also used to help monitor progress in reducing the incidence and severity of injury in the District.

The members of NPIS continue to work together to achieve improvement in safety in the district based on the information and recommendations provided by the needs assessment. There is an ongoing commitment to repeating the needs assessment process every

Priority Issues

Community priorities and statistical injury data from the Community Based Needs Assessment have both been analysed within the context of existing injury prevention programmes and activities being carried out within the district.

This analysis has led to the selection of five priority areas that will inform the main work programme of New Plymouth injury Safe over the next three years:

- Reducing Intentional Injuries
- Promoting Home Safety
- Reducing Injury to Maori
- Promoting Workplace Safety
- Reducing the impact of Alcohol-Related Harm



When having Mates is important

BY YVETTE BATTEN

DIFFICULT times for men can now be turned upside down through a new support group existing in New Plymouth and Taranaki.

Mates, a free self-development programme, is all about empowering men through trying circumstances including depression, relationship breakdown and grief.

"It allows them to work through their own problems by talking, listening and supporting each other in a group setting."

"We're not a therapy group," says group founder Kerry Ballagay. "We provide a place of trust where they can come and talk about what ever they want to talk about in a place in total confidence with other men."

"They are part of themselves reflected in the stories from other men."

"That helps them to move on in life."

Mr Ballagay has more than 25 years of experience in the self-development and counselling field. During that time he worked for Lifeline for seven years.

After his own relationship broke up he realised there was nothing out there to help men through their life changes.

At 12 years ago, while living in Central Coast, alone (today in Australia), he founded the Mates programme. "We found that, over the years, we've had many men



For when it's a little heavy, Ballagay is starting a support group for men called Mates, to help them feel less alone in difficult times.

▶ COUNTING THE COST

■ More than 500 people deliberately hid themselves last year in New Zealand, nearly 10 each week.

■ There are more than 5000 attempted suicides each year, nearly 100 each week.

Family violence is not OK – make the call

TARANAKI IS a place where family violence is not OK.

That is the message of a month-long awareness campaign under way now.

New Plymouth District Council, in partnership with Taranaki Safe Families Trust (TSFT), is leading the campaign that encourages people to take action against family violence.

"Family violence is a community problem and we're encouraging the community to take action when they know something is happening," says Community Development Adviser Craig Campbell-Smith.

"It takes just one person to speak up – whether to challenge behaviour, support a family member or friend or contact a community agency – for action to begin to stop the violence."

"No one should be frightened by someone in their family."

Taranaki Safe Families Coordinator Marion James says family violence is a significant problem in New Zealand.

"In New Plymouth at least 120 people are being harmed by family violence each month," she says.

"It's probable that you or someone close to you knows someone who is affected by violence in the home. If you know about it, don't ignore it – make the call."

The campaign encourages families, whānau, friends, team mates, workmates and neighbours to take action.

"It's about giving and receiving help, about noticing when things start to go wrong



Taking the message to the community about stopping family violence are (l-r) Coileen Tuuta, Mayor Peter Tennent, Betty Leung and Vance Hoskins. Photo: Frame Photographics.

and supporting people to get the help they need," says Marion.

"If someone tells you they feel unsafe, believe them. If someone tells you they are worried about their own behaviour, listen to them."

Fronting the local campaign are Mayor Peter Tennent, community advocate and volunteer Betty Leung, young volunteer and sportsman Vance Hoskins and TSFT Community Trust Chairperson Coileen Tuuta.

The anti-family violence campaign is part

families up to the challenge



Wonder: Five-year-old Katie Holmes has



Assault easy: Two-year-old Sarah Penna's father doesn't let size get in the way of her fun, as she races through the police assault course.



Too much fun: Star baby Emma Finer was so tired from her family challenge day, she fell asleep looking through her goody bag on the way home.



Police assault course: Children and adults participated in a police assault course during the family challenge day.

hands-on safety challenges

Constance St. It included challenges in fire safety, chemical handling, first aid, road safety and safety around the home.

"It's an opportunity for them to test

The day was designed for Gateway programme students, who spend one day of their school week doing practical work experience. Each team of four had 20 minutes to complete each task. There m Spotswood College, Hawera High and two outh Boy's High.

petition style event 'e fun,'" Channa says. won.

Waitara keeps community officer

BY YVETTE BATTEN



Here to stay: Mark Stevenson is here to stay at his position as the community contact in Waitara for the next year.

WAITARA has kept the community contact role to help the police and the community work together.

Mark Stevenson was appointed to the position one year ago last November. When police officers are on duty, he is the first point of contact for the community.

But he had made such an impact in the community that, when his term was up, he was asked to stay.

"It was a relief to have someone who knew the community and was willing to help," says Stevenson.

"I want to be a police officer, and I want to be a community contact."

Waitara police officer Mark Stevenson was the first to be appointed to the position one year ago last November. When police officers are on duty, he is the first point of contact for the community.

But he had made such an impact in the community that, when his term was up, he was asked to stay.

"It was a relief to have someone who knew the community and was willing to help," says Stevenson.

"I want to be a police officer, and I want to be a community contact."

Work continues on improving our safety

GOOD PROGRESS is being made in making the district a safer place to live.

However, there is a lot more work to be done in combating our highest-risk areas for injury and harm.

Right now various agencies in New Plymouth are working together to have the district recognised as an International Safe Community by the Safe Communities Foundation of New Zealand.

Since being first accredited five years ago, the district has seen fewer falls-related injuries among the over-65s, fewer poisoning among the under-fives, and workplace injury numbers that are tracking below the national average.

"These are very promising trends, and we want to build on them while also making inroads into more areas where injury and harm are prevalent – such as road safety, alcohol harm and family violence," says New Plymouth InjurySafe Programme Manager Channa Perry.

Being an International Safe Community doesn't mean that we never have people being harmed or injured, says NPDC Manager Community Development Leighann Littlewood.

"Rather, it means that we know what the biggest risks are in our community and

together to make inroads into a problem such as community safety."

The focus on improving the district's alcohol injury statistics include the implementation of one-way door policies, alcohol accords and the Mellow Yellow scheme in central New Plymouth, and NPDC's award-winning Alcohol Strategy (the joined up Local Government category at the 2009 Local Government Excellence Awards).

The Council is also working on crime prevention through designing spaces that enhance safety, such as the removal of some vegetation to improve sight-lines in

St Victor Davies Park and along the path between Courtenay Street and the Vivian Street Car Park in 2006. Much of the current community redesign in Marfell is based on the same approach.

The agencies that are working together to improve our injury and harm statistics are part of a coalition group called New Plymouth InjurySafe. They comprise the Taranaki District Health Board, Department of Labour, Tui Ora, ACC, Kaitiaki Taranaki, NPDC, New Plymouth Fire Service, New Plymouth Police and the three regional primary health organisations.



Chemical safety: Spotswood College students, from left, Clarissa Kepa, Matthew Ridgewell-Lang, Shannon Collins, and Daniel Watt learn how to use chemicals safely.

Photo: YVETTE BATTEN

It's best practice for the worst scenario

BY YVETTE BATTEN

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IT MAY seem like health and safety overkill, but it really does teach a valuable lesson.

The second Trade Apprentice Challenge, in which various apprentice trades compete in hands-on safety tasks, was held recently.

For the third-placed Clelands Construction team the course had additional importance. Within a month of coming second in the inaugural contest last year, the team had to put its newly-learned skills into practice when there was a fall at a construction site.

"The team said, having gone through that [first aid] activity recently, it was fresh in their

ambulance crew, which attended the accident, commended it on a job well done.

First aid is just one of the things teams are taught about and tested on during the one-day challenge, held again this year at the Taranaki HSE Centre on Constance St, New Plymouth.

Nine teams of four, which came from the construction, engineering and electrical industry, competed for the top spot.

Many of the team-members were of the 18 to 25-year-old age group.

Other tasks included fitness, fire safety, site hazard identification and a new task on personal safety, run in co-operation with the police.

In the activity participants witnessed a violent customer and were assessed on how they

While it doesn't prevent the injury it prevents that potential situation from becoming a lot worse.

Channa Perry

for them to speak to police about how best to deal with an incident like that," Ms Perry said.

The winning teams were: first place Tenix, second place Bell Building and third place Clelands. The winners received the Masterbuilder's Safety Shield, safety gear and \$50 Rebel Sports vouchers.

The Tenix team, made up of three apprentice linemen Tamie Ngaia, James Prime and Tony Julian, had not entered the competition before.



Crossing watch starts

BY YVETTE BATTEN

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DRIVERS had better be careful around pedestrian crossings – the police could be watching.

After a tremendous response to an article published in the *Motus* recently, about lack of driver courtesy at crossings, the police are going to take action.

"We get complaints on occasions but that [the seemingly random] nature of it would like it's rather a rampant problem," a surprised road police Sergeant Pat Duffy says.

About two months ago the police started monitoring intersections for stop sign and red-light runners with a hand-held high-definition video camera. They just need to get there early and not hurt anyone on the way," he says.

"But [after] reading those articles we obviously need to look at pedestrian crossings as well," he says.

And they're going to start by randomly monitoring crossings highlighted by *Motus* readers in the *Letters to the Editor*.

Problem crossings include Tukapa St (near David St), crossings at the Egmont St and Anki St intersections, crossings along Constance Ave, at Motuna and at Frederick St (outside the police station).

Mr Duffy has a message for pedestrians.

as they're the ones that are most likely to get hurt," he says.

"Don't assume that cars have seen you and don't assume that cars are going to stop for you."

He commended *Motus* columnist Merie West for his practice of not stepping onto the road until he knows that the cars have stopped.

"It's better to be safe than sorry."

Disgruntled pedestrians always have the option of taking down the number plate of uncooperative or unsafe drivers, which the police can then follow up.

His message to drivers is simple: "This needs to relax."

"We're only talking a few seconds here."

"The roads aren't a race track, they're not making up any time. They don't need to make time. They just need to get there safely and not hurt anyone on the way," he says.

More reaction: Page 2



We'll be watching: Road police Sergeant Pat Duffy at the crossing outside the New Plymouth station with one of the new cameras.

Fears of cycling

BY YVETTE BATTEN

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IS NOT safe for St John Bosco School pupils to cycle to school.

This was one of the main messages that came out of a pupil project into why children don't go to school.

Parent volunteer Mary O'Brien says the project, funded by Cycling Advocacy Network, was out with some interesting outcomes.

"The idea of the project was to encourage children to cycle. What we realised about it was that we couldn't do that," she says.

The roads were too dangerous and they can't go on the sidewalks because it is illegal.

"The kids love cycling, but first of all they're not allowed to go on the road because of parents and second they're not safe on the road."

St John Bosco School has had ongoing problems coping for years with the sheer number of cars before and after school. The survey revealed that 75% of pupils travel

to and leave school each day by car.

The project took two months of hard work where about 10 children from different classrooms, and volunteer parents, researched, did surveys and monitored the school's surrounding roads.

They highlighted several safety issues including cars were too fast, roads were hard to cross and glass on the roads.

Their solutions to the problems included islands in the middle of regularly crossed roads, possible pedestrian crossing sites and for cars to slow down around the school.

The group of students presented their findings last week.

New Plymouth District Council road systems engineer Carl Whittleston was there.

"It's great to see some concrete suggestions here," he says. "It's these kind of little projects which we can look at over the next couple of years."

Although he agreed the ideas would be looked into, he made no promises that any of the work would be done.

TOP RIGHT: St John Bosco pupils (from left) Ella Thompson, Lakini Collum and Maxine Collum with their bikes.

One-stop safety website puts prevention first

By BROOKE SHEEHAN

THE latest invention from a New Plymouth charity is set to make the city safer.

New Plymouth Injury Safe yesterday launched its Safe Cam

topics such as problem gambling and even sun safety.

"It's about acknowledging the wide range of safety activity that's going on within this district."

Getting into gear

Full speed ahead:

Francis Douglas Memorial College student Jacob Brophy, 14, is taught the ropes by AA driver training instructor Ian Lanfear.

Mr Lanfear, in conjunction with ACC, was at the school last week teaching basic bike road safety skills to year 10 students who had shown an interest in getting a motorbike or scooter licence.

The skills taught included handling the bike, its functions, basic manoeuvring, the proper safety gear and general advice.

"This is part of what we call the basic handling skills test, which is part of the motorbike training test," says spokeswoman Wendy Lanfear.

The skills learnt by the 24 students who participated in the one-hour course could go towards their licences.



Photo: YVETTE BATTEN

Group still fighting fit

Forty-eight years on, exercise class stretching and marching

By YVETTE BATTEN
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AFTER 48 years the St James Keep Fit exercise group is still going strong. Every Thursday morning the group of 45, mostly 40 and older, meet at St James Church hall to do stretching, marching, deep breathing and movement exercises.

Members come from around New Plymouth and everyone knows everyone's name. That's because many of them have been going for years, some since it was started.

Marion Williams, 78, is one of the original members. "I had just moved into the area and I heard about it and I joined," she says. "I like the company of the people and the ladies."

Marion remembers the days when the group used to do press-ups and the can-can dance for exercise. Now the routine is toned down a little.

Joan Thompson, 90, has been going for 36 years and still goes even though she needs a walk-



Fit and healthy: Joan Thompson, 90, left, and Marion Williams, 78, leading the St James Keep Fit exercise group.

Photo: YVETTE BATTEN

ing stick. She swears the exercise has aided her longevity.

"My husband had a job at the New Plymouth Power Station and I liked to get away from the power station at times," she explains. "I found out about the class and came. It's a wonderful group. We have live music and we enjoy each other's company."

But this is not just an ordinary exercise group, nor does it have strict dietary regimes. It works in swings and roundabouts and the members indulge with a mid-winter Christmas and a Christmas function every year.

The group runs for an hour, and is open to anyone, starting at 10.30am. Entry costs \$2.

Green means go at Marire

By Leon Gray-Lockhart

PRESCRIBING a healthy lifestyle is the aim of a new programme being piloted at Agecare Central Marire.

Launched with a special exercise session at the rest home last Thursday, it is hoped that a new 'Green Prescription' programme will hopefully become a permanent feature of life for the residents of Marire.

"A Green Prescription (GRx) is a medical professional's written advice to their patient to be more active as part of their health management," says Sam Vincent, health co-ordinator for Sport Taranaki.

For Marire residents, this means that, along with taking their regular medication, they will also be participating in regular gentle exercise sessions at the rest home, conducted by people like Sam.

"The residents do functional exercises designed to assist them with simple everyday tasks, like buttoning up clothes, brushing hair and being safe when moving around," she says.

"The staff also learn skills and ultimately, with residents' increased independence and confidence, the staff workload will be lessened."

A Green Prescription can be given by a medical professional to anyone who has or her medical professional feels could benefit from being more active.

"Doctors and Practice Nurses are our main referrers, but specialist clinics such as diabetes, COPD and cardiac also refer to Green Prescription. Green Prescriptions often get issued for diabetes, hypertension, arthritis, weight management and stress and depression."

The Green Prescription programme has been in New Zealand for several years, initially starting out as a phone support service for those who had been referred by trained support staff.

It has since branched out to group support sessions encompassing physical activity and education, all coordinated to empower and motivate those on the programme to take more regular physical activity.

The programme being run at Marire is a first for Taranaki. If it is found to be valuable, it is hoped that fun can be found for it to continue.

"GRx does not replace medical but can be used in conjunction with pharmaceuticals to maximize health benefits," says Sam.



Living with loss: Titia and Apalapa were 14 when she died in a car accident at Te Anau in 2002. Apalapa, 14, and mother of Titia, 17, live for her. Photo: GLENNY

Fatigue stop surprises

TARANAKI motorists are still not getting the message about driving when tired.

A 15-strong road safety contingent stopped 644 cars in Kakarama recently for South Taranaki's first fatigue stop.

Roadsafe co-ordinator Marion Webby says drivers often take risks on the last day of the school holidays.

drivers thought it was OK to drive for more than three hours without a break. It's not OK. One driver thought about 10 hours without a stop was OK.

"It's quite horrendous for us to know there are a lot of people out there who aren't taking rest stops when they should."

Ms Webby says driver exhaustion was the key factor in

Wellbeing day in Waitara



Weaving women: Waitokirangi Tito, left, and Colleen Van den Bos, both of the Te Wananga O Aotearoa weaving group, hard at work. Their demonstration was part of the Kaumatua Wellbeing Day held at Owae Marae in Waitara last week, organised by Mahia Mai A Whai Tara and the New Plymouth Injury Safe Trust.

Activities included tai chi, traditional Maori games, free massages, mobility scooter training, line dancing, health checks and free flu vaccinations.

"All of the buildings are just buzzing with people, which is great," says spokeswoman.

Safety: It's a no-brainer

Jo Apalapa desperately wishes she had made her daughter wear a bike helmet, writes Sue O'Donnell.

Especially in Apalapa is an accident. The grieving mother wants to spread the word about the importance of wearing helmets on quad bikes.

She wants to raise awareness of the dangers of quad bikes, to make parents see that accidents can happen, and to spare other parents the pain of losing a child in an accident.

Ms Apalapa said she became quite nervous she saw photos of the wreckage of people on quad bikes without helmets. The 34-year-old daughter of a 14-year-old son died in a quad bike accident in Te Anau in March 2002. "I'd like to do more to get people, especially children, to wear helmets on quad bikes," she said.

"There are kids nearly riding these machines without helmets. And a farmer up the road who says just on his quad bike without a helmet, on his way to the dairy. People think 'it never happens to us', she said.

The second of Ms Apalapa's five children, Titia, was one of those people killed in a four-wheel quad bike accident in a three-month period in Taranaki that year.

The talented Stratford High School student and her friend were riding together on Te Anau Rd. When a friend riding a quad bike with two passengers on board came by, Titia grabbed hold of it. She was being towed along when she fell from her bike and hit her head.

Titia had passed School Certificate (Mater) in Year 11 and, when the accident, and her last words to her daughter had been cruel and disastrous.

"And I have to live with that," she said. Searching through her daughter's belongings after the accident, Ms Apalapa found a safety poster that had been working on, with a picture of a quad bike rider wearing a helmet.

ACC's safety tips for quad bike operators before and the message that appearance is not insurance.

"Wear a helmet. Other protective gear, such as goggles and gloves, are good, but a helmet is a must. Don't worry if your quad bike doesn't have a helmet. Check their licences. Your own car is to stay alone. "What about if you look like a don't? Put it this way - if there's

ACC says children under 16 should not ride quad bikes. It also points out that quad bikes are not designed to carry passengers.

The organisation says the best seat where the driver is more about as it is control the bike.

"If you've got somebody sitting behind you, you can't move and you can't control the bike properly."

At the October 2002 Inquest into Titia's death, coroner Roger Jinks of New Plymouth, said it was important that people on quad bikes understand and respect their own private property or a public road. Those of those involved in the accident had licences.

"That the deceased had been

