

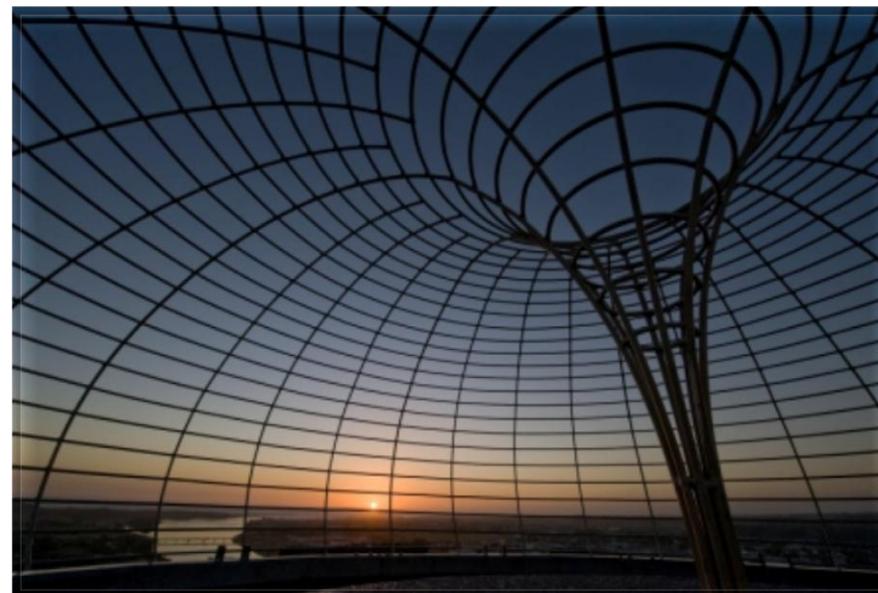
Application for International Safe Community Accreditation

Safer Wanganui



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**Message from the Mayor,
Michael Laws**

As Mayor of the District of Wanganui, I am delighted to support this application.

Everything my Council has done over the last six years has had at its core the intent of creating a safer and healthier community. We have done this by tackling courageously some of the biggest social issues that affect Wanganui's wellbeing, and these should resonate for years to come.

Our Council has also led the way for stronger relationships with key agencies working within the community, to jointly deliver better outcomes for the Wanganui community.

Our Family-Friendly Strategy acts as the over-arching driver for social change in Wanganui. A number of linked initiatives demonstrate our commitment to making a significant difference to community safety and wellbeing.

I'd like to specifically mention two of these. My Council established the Community Taskforce on Youth Wellbeing – a Joint Council/Iwi initiative that is improving life outcomes for at-risk youth in Wanganui, and ultimately for all Wanganui children through the 'For Our Kids' project. We strongly support the collaborative approach taken by our key agencies and partners- getting everyone round

the table, taking joint responsibility for outcomes, *working together*, and that's proving to be successful. We also measure performance and commitment through a tough audit process – using results-based accountability – so we have to put our money where our mouth is.

Secondly, my Council has never been afraid to tackle the tough issues to ensure community safety. Its passing of the Gang Patch bylaw addressed a major safety issue by removing the threat of gang intimidation from our streets. This was no easy process, requiring the passing of a local bill through Parliament to facilitate action at a local level.

This successful application for International Safe Community accreditation represent the next milestone in this community's journey. I trust therefore that you will find that Wanganui, as well as being ready for this next significant step, will leverage its Safe Community status to achieve further stunning results.

Michael Laws
Mayor

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***Message from the Chairperson,
Councillor Ray Stevens***

Wanganui District Council is proud to be leading the Safer Wanganui initiative.

The massive framework of agencies, community partners and groups is already indicating its potential to link everyone working for Wanganui's safety and well-being together, to make sure Wanganui is a safer place for members of the community.

Our community has a number of significant challenges to overcome. We're one of New Zealand's oldest cities, and we also have a contributing district that stretches far up the Whanganui river, and into the rural hinterland. It's not easy to create systems that deliver a high standard of safety and well-being to everyone in the District and yet we are well on the way. The hard work began three years ago, when we set the bar high to achieve International Safe Community accreditation by 2010.

So at that point the rubber hit the road. While the Steering Group was getting organised, along with the key sector groupings, a local services mapping project kicked off – thanks to the Ministry of Social Development's Family and Community Services Group – and the Safety Plan was established. This is not something to put in a drawer and forget about – this plan identifies some challenging

social issues in Wanganui and comes up with an action plan to tackle each of these issues.

It brings our wider community together, using their combined knowledge and expertise, to tackle the real issues relating to education, family violence, road safety, alcohol and other drugs, emergency planning and justice.

I believe the Safer Wanganui project, underpinned by the Safety Plan, will make Wanganui a safer place for us all because it tackles the issues behind the problems and recognises that safety is a universal concern and a community responsibility.

I have experienced the commitment to this important goal, and can't stress too strongly that we will succeed.

Ray Stevens
Chair, Community & Development Committee
Chair, Safer Wanganui

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**Message from the
Kaiwhakahaere, Te Runanga o
Tupoho, John Maihi**

He Whakatauki
He toa taua, he toa pahekeheke
He toa mahi, he toa mau tonu

A champion warrior's life is precarious
But a champion worker lives on



Whanganui / Wanganui

Following a New Zealand Geographic Board decision in 2009, the spellings Wanganui and Whanganui will both be accepted as correct, once the decision is formally gazetted in 2010.

Te Runanga o Tupoho and Te Runanga o Tama Upoko have historic agreements with Wanganui District Council whereby it is formally acknowledged that Te Runanga maintains the Whanganui spelling is correct and that the legal name under the Local Government Act is Wanganui District Council.

For the purposes of this document therefore, the spelling Wanganui is used throughout, although it is acknowledged that community partners may be using dual spellings.

We believe this demonstrates the degree to which this community works together, positively and effectively while maintaining harmony to achieve significant outcomes for all.

Introduction

Wanganui sits alongside the Whanganui River on the west coast of New Zealand's North Island. The history of the city and the district is rich and distinctive, woven together with Tangata Whenua and the river –

*Ko au te awa ko te awa ko au.
I am the river and the river is me.*

Today Wanganui district is home to just over 43,000 residents, 22% of whom are Maori. An internet search on "Wanganui/Whanganui" reveals references to journeys on the River, Wanganui District Council and Wikipedia. Wanganui is a community coming together to promote community safety and injury prevention.

As another step along this path, this document is Safer Wanganui's application to be accredited as a Safe Community. It is has been a long time in the making and never straightforward – bringing together the diverse, and sometimes competing, work of many individuals, agencies, groups and organisations into a unifying collaboration, while celebrating and supporting that individuality and uniqueness.

At high level, Safer Wanganui's vision is obvious; a safe Wanganui, where everyone feels safe to be in and move around the community all the time.

The hard work really started once the question was posed, what does that look like?

What resulted was the Safety Plan and this was launched on one of the Ministry of Social Development's websites in December 2009. This application continues this thread towards International Safe Community accreditation in 2010.

***A safe Wanganui,
where everyone feels safe to be in
and move around the community
all the time.***

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About Wanganui

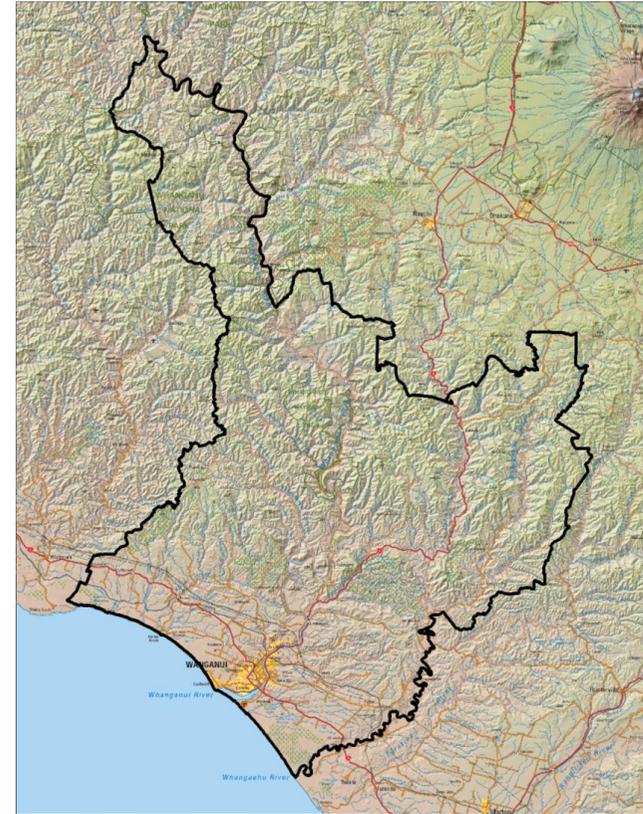
Wanganui is a district of 43,636 (Census, 2006) inhabitants which sits on the west coast of New Zealand's North Island at the mouth of the Whanganui River. At 290 kilometres in length, the Whanganui River is the country's third-longest river. Much of the land to either side of its upper reaches is part of the Whanganui National Park, though the river itself is not.

The territorial land authority is the Wanganui District Council and regional council is Horizons. The district is bordered by four other territorial authorities: Ruapehu District Council to the north, Rangitikei District Council to the east, Stratford District and South Taranaki District Councils to the west.

Wanganui is situated 161 kilometres from New Plymouth and 72 kilometres from Palmerston North, the nearest larger centres. Wellington, New Zealand's capital is 194 kilometres to the south.

The district is catered for by one major tertiary institution and 42 schools with 35 located in the city. Wanganui has one publicly funded hospital with approximately 30 inpatient beds. Wanganui is well placed for recreational opportunities with ready access to the river, beaches, hill areas, ski fields and Whanganui National Park.

Transportation requirements in Wanganui are serviced by a national airport and two state highways.



Territorial Land Authority Map

Source: Wanganui District Council

Tangata Whenua

E rere kau mai te awa nui nei
Mai i te kāhui maunga ki Tangaroa
Ko au te awa
Ko te awa ko au.

The river flows
From the mountains to the sea
I am the river
The river is me.

Kupe

Legendary Polynesian navigator Kupe's early exploration of New Zealand is commemorated in many ancient place names. Kupe landed at Whanganui, known as Te Kaihau-o-Kupe, or 'Kupe's wind-eating', because of the constant winds there. He then took his canoe upriver in search of inhabitants, paddling as far as Kauarapāoa. This was named for one of his men, Arapāoa, who drowned swimming across the river in flood. It is told that, although Kupe heard the bird calls of weka, kōkako and pīwakawaka (fantail), he did not find people. He returned to the river mouth and then made his way to Pātea in south Taranaki, where he planted karaka seed in its sweet soils.



Turi and Ngā Paerangi

On returning to Hawaiki in Polynesia, Kupe described his explorations to his people. Sometime later, Turi, captain of the Aotea canoe, sailed to Pātea, where he made his home. According to tradition, his descendants, who spread into the region, discovered the original people of the land, Ngā Paerangi. The chief Paerangi, from whom they took their name, is said to have preceded Turi by five generations.

The collective name for the people of the river, Ngāti Hau, is in some versions said to have come from Haupipi. He sailed with Turi

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on the Aotea after his original canoe, the Kuruhaupō, was wrecked. In other versions the name is a contraction of Te Āti Haunui-a-Pāpārangi (the people of Haunui-a-Pāpārangi). Haunui-a-Pāpārangi also arrived with Turi, and his descendants settled among the people of Ngā Paerangi.



Tamatea

Another significant ancestor is Tamatea-pōkai-whenua, captain of the Tākitimu canoe and explorer of the Whanganui River. When entering the river, Tamatea sent his servant ashore to find flax for a topknot (pūtiki). The place where flax was found became known as Te Pūtiki-wharanui-a-Tamatea-pōkai-whenua.

Turi came to visit Tamatea, and his daughter Tāneroa fell in love and married Tamatea's brother, Uenga-ariki.

How the Whanganui River was formed

In ancient times three mountains, Ruapehu, Tongariro and Taranaki, lived together in the centre of the North Island, the fish which Māui hauled from the sea. One day Taranaki attempted to carry off Pihanga, the wife of Tongariro. In the ensuing battle Taranaki was defeated and escaped down to Whanganui. As he fled, he carved out the deep furrow of the river. The place where he eventually stopped in loneliness is the site of Mt Taranaki today.

Tamatea then built a canoe, and left his servant at the mouth of the river, while he explored upriver. According to some, this event gave rise to its name, Whanganui (from 'whanga nui', meaning 'long wait'). Others say the name came from Haunui-a-Pāpārangi, and meant 'great harbour' or 'great expanse of water'.

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Children of Tamakehu and Ruaka Tamakehu, a Te Āti Haunui-a-Pāpārangī chief, and his first wife Ruaka had three children: Hinengākau of the upper river, Tama Ūpoko, who settled in the middle reaches, and Tūpoho, associated with the lower Whanganui. Their names are regularly invoked to express the basic unity of the people. This is also emphasised by certain sayings, such as 'te taura whiri a Hinengākau' ('the plaited rope of Hinengākau') which refers to the ties between the people of the river.

Other canoes

Because the river's path from the central North Island's volcanic plateau is gradual and navigable over about 230 kilometres, not only were some 80 pā and village sites built along its banks and cliffs, it also became one of the great arterial routes through the central North Island. This has ensured that other tribes, such as those of the Tainui confederation, Ngāti Raukawa and Ngāti Maniapoto, as well as Ngāti Kahungunu of the Tākitimu canoe and Ngāti Tūwharetoa of the Arawa canoe and the Taranaki Iwi nui tonu Aotea, Kurahaupo and Tokomaru, also contribute to the genealogical history of the river.



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European settlement

The Wanganui region is the third oldest settlement in New Zealand. Its original discovery is attributed to Kupe, New Zealand's legendary discover. Tamatea, Captain of the Takitimu Canoe, fully explored the region, and soon after, attracted by the Whanganui River, Maori settlers came to the region.

The Whanganui River became an important trade and travel route for settled Maori tribes. They built fishing villages on the banks of the Whanganui tidal estuary and permanent pa sites further up the river.

But as Wellington grew in size and number, the New Zealand Company was forced to start negotiating for land from the resident Maori population. They turned to Wanganui and began purchasing the land from the local tribes. The Maori were angered by the influx of European settlers to the land they still claimed their own.

The area around the mouth of the Whanganui was a major site of pre-European Māori settlement. In the 1820s coastal tribes in the area assaulted the Kapiti Island of Ngāti Toa chief Te Rauparaha. Te Rauparaha retaliated in 1830 sacking Putiki Pā and slaughtering the inhabitants. The first European traders arrived in 1831, followed in 1840 by missionaries Octavius Hadfield and Henry Williams who collected signatures for the Treaty of Waitangi.¹ After the New Zealand Company had settled in Wellington the company looked for more suitable places for settlers. Edward Wakefield, son of Edward Gibbon Wakefield, negotiated the sale of 40,000 acres in 1840. A town, originally known as Petre was established at the river mouth shortly after. The name was officially changed to Wanganui on 20 January 1854.

The early years of the new town were problematic. Purchase of land from the local tribes had been haphazard and irregular, and as such many Maori were angered with the influx of Pākehā onto land that they still claimed.

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It was not until the town had been established for eight years that agreements were finally reached between the colonials and local tribes, and some resentment continued. Wanganui grew rapidly after this time, with land being cleared for pasture and by 1860 reached a population of about 2000. The town was a major military centre during the Land Wars of the 1860s, although local Maori at Putiki remained friendly to the town's settlers. In 1871 a town bridge was opened followed six years later by the railway bridge at Aramoho. The town was linked by rail to both New Plymouth and Wellington by 1886.

Wanganui expanded rapidly from 1870 to 1930 and was the lower North Island's second most important town and port, after Wellington. By 1924 it was New Zealand's fifth largest city, noted for its education and cultural institutions. However, by the 1960s population decline and lack of economic growth drove a period of stagnation. Although Wanganui's population in 2006 is almost unchanged from that of 40 years ago, the district survives on its inherited strengths and energy, creativity and commitment of its community.



Community profile

This section gives a brief statistical profile of the Wanganui community. It was produced by Family and Community Services (Ministry of Social Development) in 2009, using information from the 2006 Census. The profile represents a snapshot of the city and its residents.

Population

The Census of Population and Dwelling (2006) recorded a resident population of 43,636, a 1.5% fall from 2001 and against the national trend of a 7.8% growth. This followed an earlier drop of 3.9% between 1996 and 2001. Statistics New Zealand projects a continued decline over the next two decades.

Population of Wanganui District

1996	2001	2006	2011	2021	2031
45,042	43,269	42,636	43,400*	42,400*	40,400*

* Population projections assume medium rates of fertility, mortality and migration.

Source: Statistics New Zealand.

Ethnicity

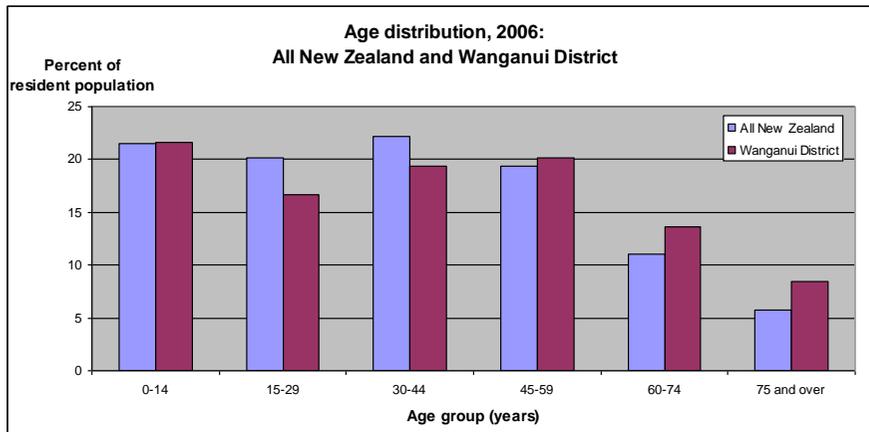
Wanganui has a different ethnic mix when compared to the rest of New Zealand. Almost three-quarters (74%) of residents describe themselves as “European” (68% nationally) and 11% as “New Zealanders”. Maori comprise a considerably larger proportion of Wanganui’s residents when compared nationally – 22% in Wanganui versus 15% nationwide. Only 2% of residents identified themselves as Pacific and Asian, less than that recorded nationally (6% and 9%).

Speakers of Te Reo equated to almost 7% of Wanganui’s population, which is almost twice the national rate of 4%.



Age

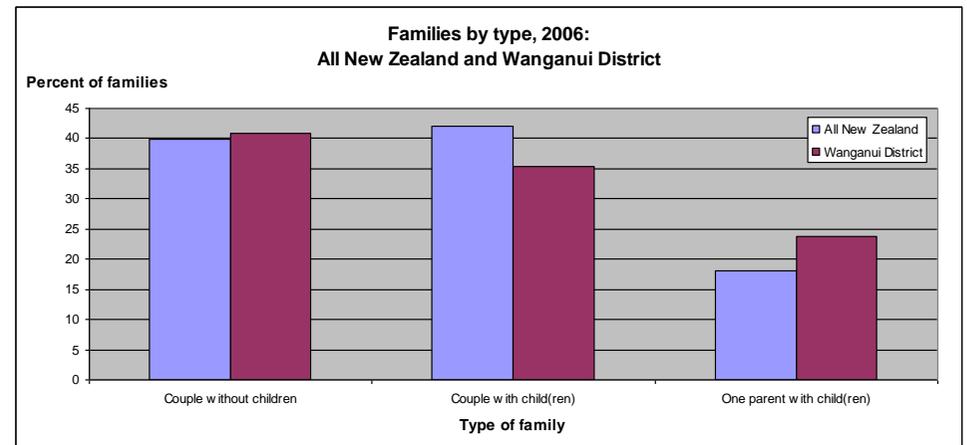
Wanganui's population is markedly older than average with a median age of 39 years in 2006 compared with 35 years across New Zealand. This results from two main factors: adults aged less than 45 years are under-represented and people aged 60 and over are over-represented.



Source: Census of Population and Dwellings, 2006

Families

In 2006, there were 11,350 families in Wanganui. The distribution of family types here differed from the rest of the country, having comparatively fewer couples with children and more one-parent families.



Source: Census of Population and Dwellings, 2006

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Socio-economic Status

The NZDep2006 index of deprivation shows that the residents of Wanganui are more deprived than the country's population as a whole. Across New Zealand, roughly equal numbers of people live in areas at each of the 10 levels of deprivation. This means that 50% of the population lived in deciles 1 to 5 (that is, the less deprived part of the country) in 2006. In Wanganui, just 34% of residents lived in these deciles. 13 of the district's 29 area units had deprivation scores of nine or 10 (that is, the most deprived). Only one area unit in Wanganui was assessed as decile one, among the least socio-economically deprived in the country.

Income

Overall, adult residents of Wanganui had a lower median personal income in 2006 than New Zealanders as a whole - \$19,800 compared to \$24,400. This resulted from residents being over-represented in the income bands from \$10,001 to \$30,000 and under-represented in all income bands over \$30,000.

Again the median family income for those living in Wanganui was less than the national median at \$45,500 locally versus \$59,000 nationally. Maori adults in Wanganui were more likely than non-Maori adults to have personal incomes of \$10,000 or less, 28% compared with 19%.

Household Facilities

Wanganui residents had less access to landline telephones, mobile phones, internet and motor vehicles when compared to the rest of the country.

89% of households had a landline telephone compared with 92% nationally.

68% reported access to a mobile phone versus 74% for the rest of the country.

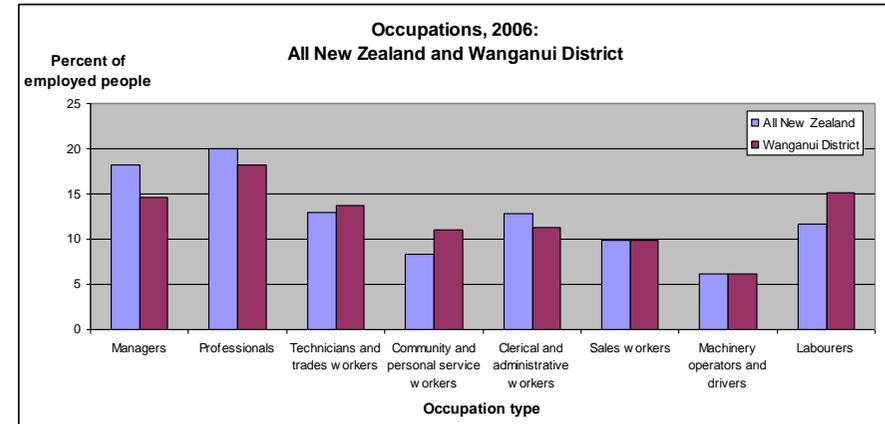
Just 50% had access to the internet locally whereas 61% had access nationally.

89% recorded access to a motor vehicle compared to 92% for the rest of New Zealand.

Employment

At the time of the 2006 Census, approximately 19,040 Wanganui residents were employed. At 58%, this is a lower proportion than the rest of New Zealand (65%). The census also showed that a higher proportion of Wanganui residents were unemployed – 6.6% in Wanganui versus 5.1% nationally.

91% of those who were employed were working in Wanganui. Occupations are shown in the following chart. The top five industries, in terms of employing a higher proportion of residents, were manufacturing, health care and social assistance, retail, education and training and construction.



Source: Census of Population and Dwellings, 2006

Education

Overall, Wanganui residents aged 15 years and over hold fewer qualifications than the rest of New Zealand as a whole. 33% had no educational qualification, which is higher than the 25% recorded nationally. Pleasingly, 26% held post-school certificates or diploma, higher than for the rest of New Zealand (24%). Just 7% held Bachelor's degree or the equivalent compared to 11% nationally.

A considerably higher proportion of Wanganui District's Maori had no educational qualifications – 43% for Maori versus 31% for non-Maori.

Housing

The rate of home ownership in Wanganui is similar to the country as a whole. Just over half (56%) of the district's private households owned their dwelling, while another 12% had their homes in a family trust. 32% did not own the dwelling in which they lived. The majority of rental properties (79%) are owned by the private sector, with Housing New Zealand Corporation a distant second at 15%. Wanganui District Council owned almost 6%. The mean weekly rent was \$140 compared to \$225 nationally.

Births

On average, 583 live births were registered to women living in Wanganui. The district exhibits a pattern of younger childbearing than the rest of New Zealand. Women under 30 years were responsible for 62% of newborns compared to 50% nationally. Teenagers accounted for almost 13% of live births in Wanganui, which is almost double the national rate of 7%.

Life Expectancy

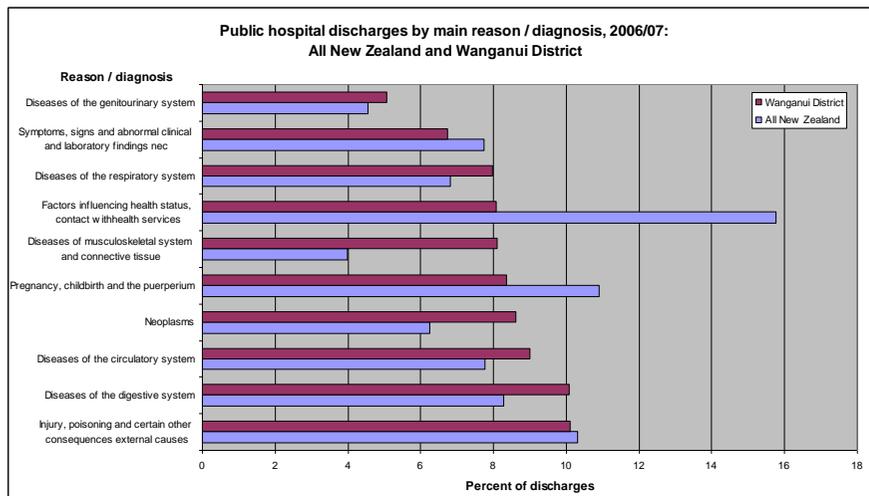
Statistics New Zealand's latest available estimates show that life expectancy in Wanganui District is lower than the national average.

A newborn baby boy has a life expectancy of 75 years in Wanganui (78.2 years for the rest of New Zealand), and a newborn girl can expect to live to 80.9 years (82.4 years nationally).

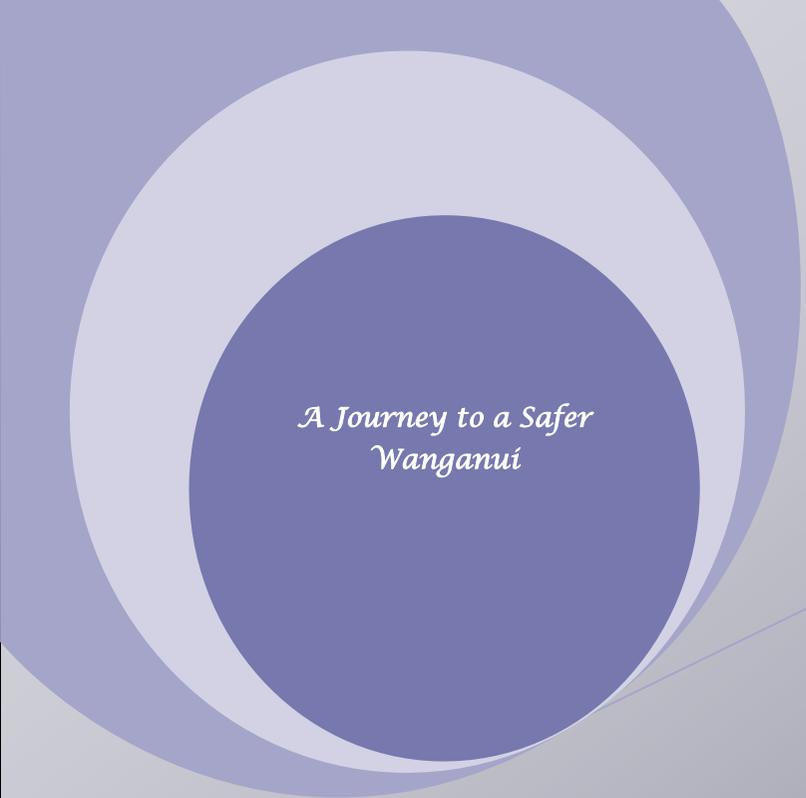
The main causes of death are diseases of the circulatory system (42%) and cancer (28%).

Hospitalisations

In the year ended 30 June 2007, there were approximately 12,030 public hospital discharges of Wanganui residents. This indicated a higher hospitalisation rate than average – 276 discharges per 1,000 residents in Wanganui compared with 212 per 1,000 nationally.



Source: WDHB



*A Journey to a Safer
Wanganui*

CRITERIA 1:

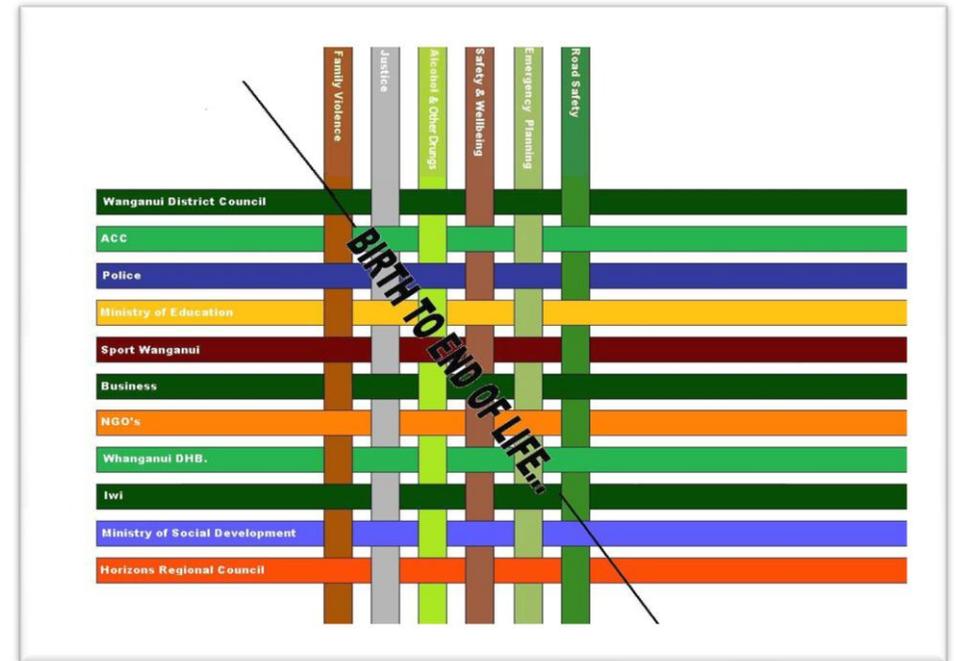
An infrastructure based on partnership and collaboration governed by a cross-sectoral group that is responsible for safety promotion in the community.

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The Safer Wanganui Whariki

This Whariki is the current framework for Wanganui's Safe Community – combined strength is the key: where one strand is not strong, there is a weakness in the fabric of the Wanganui community. The model was finalised following two community meetings, a written survey and many discussions within the Safer Wanganui steering group.

On the left, the Whariki shows the 11 agencies which make up the Safer Wanganui steering group – representatives from Wanganui District Council, ACC, Police, Ministry of Education, Sport Wanganui, Chamber of Commerce (business), Community House (non-Governmental organisations), Whanganui District Health Board, Te Runanga o Tupoho (Iwi), Ministry of Social Development, and Horizons Regional Council.



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Embedded in the Whariki are the following principles:

Safety is a universal concern with all in a community having responsibility for it.

Community safety requires a coordinated and intersectoral approach.

Positive relationships with Iwi are crucial.

Leadership of Safer Wanganui is cross-sectoral.

Working together will support members to achieve their own organisational goals.

Understanding and being responsive to, the specific needs of Wanganui is critical.

The steering group takes a leadership role by:

- **Embedding the criteria for safe communities into business as usual.**
- **Supporting development of the safety plan/strategy.**
- **Working with reference groups and other agencies in line with the safety plan.**
- **Determining any funding allocations.**
- **Monitoring progress against the safety plan/strategy.**
- **Regularly reporting to the Wanganui District Council via the Community Development Committee.**

Safer Wanganui is Council-mandated and community-owned. The steering group has met regularly since its inaugural meeting in February 2009 and is scheduled to meet six-weekly this year in the committee rooms at Wanganui District Council. Agenda and meeting notes are circulated prior to each meeting.

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In addition to the steering group, there are six reference groups, each reflecting a concern in the community (refer to the following table). These include road safety, family violence, safety and well-being (with subsets of home and sport, and work), alcohol and other drugs, emergency planning and justice. These issues have again emerged as discussion and consultation has progressed. Initially youth were identified as a specific area for concern but other age groups were also acknowledged as vulnerable. As a result, the life span was added to the Whariki to represent this. Community feedback also re-stressed the importance of crime prevention and justice, thus a sixth reference was developed in response.

Safer Wanganui is currently reviewing its terms of reference.

The draft terms are yet to be agreed upon but are as follows:

Safer Wanganui Steering Group Terms of reference and membership

Background

In the early 1990s, Wanganui enjoyed the benefits of a thriving Safer Community Council. This was jointly led by the then Mayor and Police Commander. Funding from the Crime Prevention Unit supported provision of a coordinator, who supported the community's projects - for example, Life to the Max and Restorative Justice.

Changes within the Crime Prevention Unit in 2004 signalled the demise of Safer Community Councils around New Zealand, so Wanganui shifted to a Safer Community Advisory Group. This group oversaw the development of a safety plan in 2005. The safety plan was based on interviews with key stakeholders and had one clear outcome - the need to increase the scope of group's work to reflect a more holistic view of safety.

So in 2007, a smaller Safer Community Action Group was formed. This subgroup was tasked by the Safer Community Advisory Group with investigating an appropriate safety model for Wanganui. The model recommended was the World Health Organisation's International Safer Communities model.

A Safe and Healthy Community is one of the community outcomes for Wanganui. The Safer Wanganui steering group is a key mechanism for delivering this community outcome.

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Mandating Body

Wanganui District Council

Purpose of Safer Wanganui Interagency Group

To provide leadership and direction to achieve the Wanganui Safety Plan by working in partnership with all major stakeholders involved in injury prevention and community safety.

Functions

- Support the successful outcome of International Safe Communities accreditation in 2010.
- Develop a safety plan/strategy which facilitates strong collaboration between committed agencies, targeting key contributing factors, and bringing about positive long-term change.
- Work with other agencies and the wider community to monitor the implementation of the Safer Wanganui plan/strategy.
- Receive and consider reports and advice from the member agencies.
- Co-ordinate and leverage the safety efforts of the parent organisations.

- Advocate for Safer Wanganui programmes, projects and initiatives consistent with the Safer Wanganui plan/strategy and parent organisations strategies.

- Develop annual programme, project priorities and milestones consistent with the Wanganui Safety Plan and parent organisations' strategies.
- Work in partnership with and consider advice from the Safer Wanganui reference groups.
- Monitor and report annually on progress made towards the Safer Wanganui vision/goals and on the success of initiatives undertaken.

Reporting structure and process

Safer Wanganui Steering Group will report to the Wanganui District Council's Community Development Committee at least annually.

Safer Wanganui Steering Group will make available a report to the public at least once in each period of 12 months.

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Governance Arrangements

Safer Wanganui Steering Group will be informed by six reference groups which are aligned to each area of the Safety Plan.

- Safety and Wellbeing
- Road Safety
- Family Violence
- Alcohol and Other Drugs
- Justice
- Emergency Planning

Safer Wanganui Steering Group

Safer Wanganui Steering Group comprises the following representatives.

- Councillor, Wanganui District Council
- Branch Manager, Accident Compensation Corporation
- Patient Safety Manager, Whanganui District Health Board
- District Commander, Wanganui Police
- Group Manager, Horizons Regional Council
- Representative, Whanganui Iwi
- Regional Manager, Ministry of Social Development
- Representative, NGO sector
- CEO, Sport Wanganui
- Regional Manager, Ministry of Education
- Representative, Wanganui Chamber of Commerce
- Representatives from each of the Reference Groups

Wider membership of Safer Wanganui

Safer Wanganui Steering Group may call upon other agencies or experts from time to time to assist them carry out the functions of the Safety Plan.

Principals for collaboration

Members of Safer Wanganui will:

- Act honestly and in good faith.
- Recognise the obligations of one another to their clients and stakeholders, including statutory, policy, treaty and accountability obligations.
- Establish mechanisms for communication and information exchange.
- Meet regularly to address issues of mutual concern, identifying common priorities and plan activities.
- Work together to achieve common objectives and milestones.
- Make funding decisions in an open and cooperative manner.

Quorum

A quorum comprises 50% of appointed members.

Frequency

The Safer Wanganui Steering Group will meet on a four to six weekly cycle. This cycle can be reviewed and amended at any time.

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Accountability and Reporting

Each member of the Safer Wanganui Steering Group is accountable to his/her parent organisation.

Members will be expected to facilitate implementation of the Safety Plan, programmes and projects within their organisations as they relate to that organisation's roles and commitments.

Members will be expected to report at each meeting of the Safer Wanganui Steering Group and then, report progress back to their parent organisation following the meeting.

Reference group leaders will report back formally to Safer Wanganui annually.

Information management

The Safer Wanganui Steering Group will adhere to an information/media relations policy.

This is a set of agreed guidelines and procedures which ensures consistency of message in line with the Group's common purpose, as well as a "no surprises" clause, that is:

- Safer Wanganui will provide effective communications to internal and external audiences about its work and progress by:
 - Ensuring alignment and co-ordination of key messages
 - Ensuring a "no-surprises" environment by discussing and agreeing on all media statements in advance,
 - Directing all media requests to Wanganui District Council's Communications Manager for collation and direction to media outlets.

Recording of proceedings

The agenda together with relevant reports and documents will be forwarded to members in sufficient time to enable consideration prior to meetings.

Accurate minutes will be kept of each meeting of the Safer Wanganui Steering Group. The meeting minutes shall be submitted to committee members for ratification at the subsequent meeting. When confirmed, the minutes shall be signed by the Chairperson.

SAFER WANGANUI

WANGANUI DISTRICT COUNCIL

Safer Wanganui
Action Group

Safe Community
Foundation NZ

Safer Wanganui Steering Group

Wanganui District Council	Ministry of Education	Wanganui Police	Horizons Regional Council	Iwi	ACC	Whanganui District Health Board	Sport Wanganui	NGO	Business	Ministry of Social Development
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Reference Groups

Road Safety

WDC
Horizons
Regional Council
Police
Highway Patrol
ACC
NZTA
AA
WDHB

Family Violence

FV Network
FVCMN
Women's Refuge
Victim Support
Courts
Police
CYFS
FACS
WDC
TOIHA

Safety & Wellbeing

ACC, CIP, WDC
Plunket, WDHB
Sport Wanganui
Fire Service
Strengthening Families
Disability Resource
Centre
W&I, NSG, TOIHA
Schools
Community Patrol
CTOYW
Older People Forum

Alcohol & Other Drugs

WYATA
CAYAD
Horizons
Regional Council
WDHB
YMCA
WDC
ACC
Police
Hospitality
Youth Committee

Emergency Planning

WDC
Civil Defence
WDHB
Police
Fire Service
St Johns
Red Cross
MSD
Coastguards
Surf Lifesaving

Justice

Probation
PARS
Police
WDC
Wanganui Prison
Restorative
Justice
YOT
Youth Justice
CYFS
RCF
Maori Wardens

AA: Automobile Association; ACC: Accident Compensation Corporation; CIP: Child Injury Prevention; CTOYW: Community Taskforce on Youth Wellbeing; CYFS: Child, Youth and Family Service; FACS: Family and Community Service; FVCMN: Family Violence Case Monitoring Network; NSG: Neighbourhood Support Group; MSD: Ministry of Social Development; NGO: Non Governmental Organisation; NZTA: New Zealand Transport Agency; RCF: Regional Community Forensics; TOIHA: Te Oranganui Iwi Health Authority; W&I: Work and Income; WDC: Wanganui District Council; WDHB: Whanganui District Health Board; WYATA: Whanganui Youth Access to Alcohol;

SAFER WANGANUI

In some instances, the reference groups were already operating, as follows:

- Whanganui Family Violence Intervention Network (WFIN) was well established in Wanganui and had been operating for many years. The Whanganui Te Rito Project Management Group (TRMG), which has oversight for the Network, oversees a number of projects. It is this collaborative that Safer Wanganui approached and obtained agreement from to be the reference group.
- Wanganui Road Safety Action Planning (RSAP) group had been meeting for several years, led by the district's Road Safety Coordinator. This team of key road safety partners develops an annual plan to improve road safety and readily agreed to be the reference group.
- In essence, the Emergency Planning reference group was already there, in that the Council's (Emergency Manager) hosts a quarterly meeting of key stakeholders, the Wanganui Emergency Management Committee (WEMC). Initially unsure of their role in Safer Wanganui, this group has now taken on the role of reference group.

The remainder of reference groups required development of or "growing" what was in place.

- The Justice reference group is a newly established collaborative with a lot of passion and energy around developing a deeper understanding of the sector and how it impacts the Wanganui community.
- Alcohol and other drugs is the fifth reference group. Currently there is no group that addresses both alcohol and other drugs; rather Whanganui Youth Access to Alcohol (WYATA) has fulfilled the role of reference group.
- Safety and wellbeing covers many issues and, as such, was not in place until January 2010. The Child Injury Prevention (CIP group) acted as a proxy for safety and wellbeing until this time. As the scope of this group is so large, it has two subsets of activity – safety in the home and in sport, and safety at work.

Reference groups have a number of functions:

- A willingness to share, collaborate and communicate.
- Designation of a key person, who attends meetings of Safer Wanganui.
- Embedding the criteria for safe communities into usual practice.

Overarching Result	A safe ¹ Wanganui, where everyone feels safe to be in and move around the community, all the time.
Result for Road Safety	Wanganui people are responsible road users.
Result for Family Violence	Wanganui has increased awareness of what constitutes family violence and its impact, and where to access help.
Result for Safety and Wellbeing	Wanganui working together to create and sustain a healthy and safe environment in which all people are strengthened and nurtured.
Result for Alcohol and Other Drugs	Young people in Wanganui are free from alcohol-related harm.
Result for Emergency Planning	Wanganui people are able to manage for at least three days on their own in times of emergency
Result for Justice	People released from Wanganui Prison and their families/whanau will positively integrate into the Wanganui community
Result for Safer Wanganui	All school aged children and young people are actively engaged in learning.

¹ Safe means freedom from physical, social, spiritual, emotional, psychological, sexual and environmental harm. This includes an awareness of potential harm.

Community Outcomes

The work of Safer Wanganui is also aligned with Wanganui District Council's 10-Year Plan 2009-2019, both in terms of shared goals and a specific aim to achieve International Safe Community accreditation. There are nine community outcomes described in the 10-Year Plan:

1. A healthy community
2. A safe community
3. A prosperous community
4. A well connected community
5. A community where people work well together
6. A community with quality education
7. A community with well developed amenities and recreational opportunities
8. A community with identity
9. An environmentally sustainable community.

Safer Wanganui has relevance with each of these outcomes, as is apparent in the results described for each group above.

Funding for progress to date has come from various stakeholders in Wanganui, for example, ACC, Wanganui District Council and the Ministry for Youth Development jointly funded the launch of the safety plan on December 11th 2009. Additionally the District Council has recently been able to fund a fixed contract for an Administrator to facilitate completion of this application, the audit and designation.

Ultimately Safer Wanganui plans to employ a Safer Wanganui Coordinator to lead the International Safety Community process; support and advance the safety plan; liaise with both steering and reference groups; and manage the funding process. A position description has been drafted and is currently going through the human resources process at Wanganui District Council. It is envisaged that the position will be jointly funded by members of the coalition.



SAFER WANGANUI

Background to the Framework

In the early 1990s, Wanganui enjoyed the benefits of a thriving Safer Community Council run under the auspices of the then Wanganui District Council. Funding from the Crime Prevention Unit (Ministry of Justice) enabled provision of a coordinator who supported the community's crime prevention projects.

Changes within the Crime Prevention Unit in 2004 signalled the demise of Safer Community Councils around New Zealand, and Wanganui responded by creating a more broadly focused Safer Community Advisory Group. Through the Wanganui District Council, this group oversaw the development of a safety plan in 2005. This plan was based on interviews with key stakeholders and had one clear recommendation – the need to increase the scope of the group's work to reflect a more holistic view of safety.

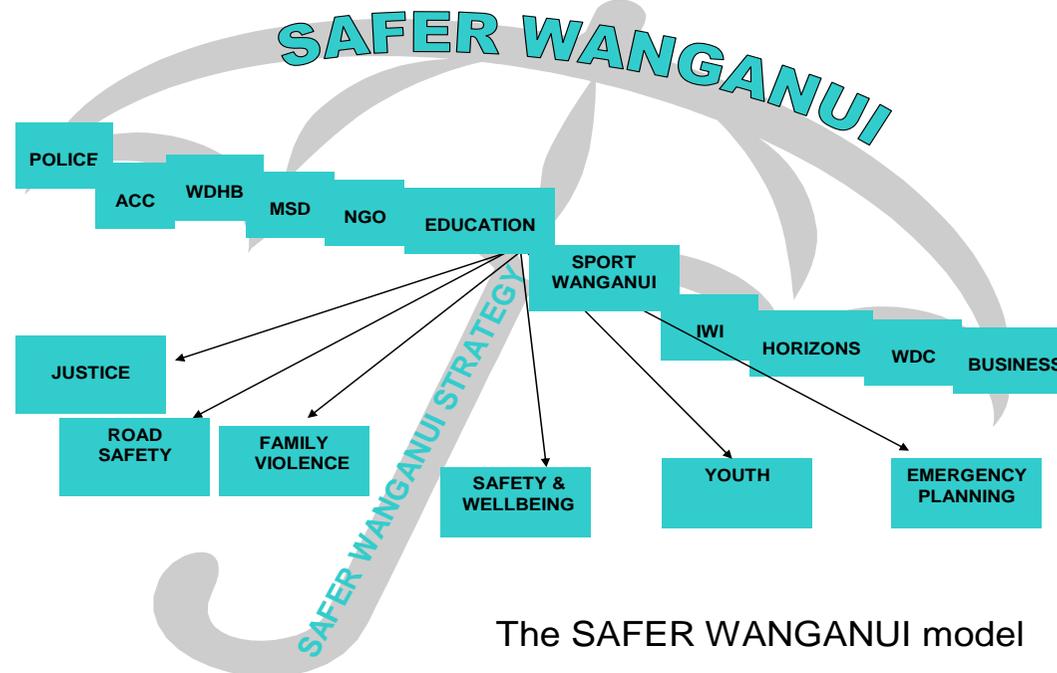
Progress was slow until in 2007, when a smaller action group was formed and tasked to investigate an appropriate safety model for Wanganui. Membership included representatives from Wanganui District Council, Whanganui District Health Board, ACC, Taumata Hauora Trust, Wanganui Police, Ministry of Social Development, Horizons Road Safety and the YMCA. The action group recommended the International Safe Community model and this was mandated by Wanganui District Council in April 2007.

A proposed infrastructure (see below) was developed and presented at a community meeting in November 2007.



SAFER WANGANUI

Proposed model presented at the community meeting, November 2007.



The SAFER WANGANUI model

Over the next 18 months, changes were made to the framework to better reflect the issues identified by the community. However it still showed issues, groups and organisations in silos, not reflecting the level of collaboration and partnership required. Finally the Whariki was adopted as the representation of the Safer Wanganui framework.



*A Journey to a Safer
Wanganui*

CRITERIA 2:

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

SAFER WANGANUI

Wanganui is fortunate to have a wide range of community safety programmes which are inclusive of all ages, environments, situations and both genders. There is a long tradition of volunteer work in Wanganui, making an invaluable and irreplaceable contribution to the community.

Each reference group is responsible for activity within their sector. For example, the Road Safety reference group uses data from the New Zealand Transport Agency. The annual Road Safety Issues for Wanganui uses five years' of crash data to identify the top five road safety issues in the community. Similarly, the Safety and Wellbeing reference group is currently monitoring the rate of new entitlement claims registered with ACC.

This data, in various forms, is then used to determine and prioritise the groups' activities within each sector. Where local data cannot be sourced or is unavailable, reference is made to district or national statistics.

Each reference group draws on membership with considerable expertise in its field of safety, injury and crime prevention, as well as connections with other networks in the community. Safer Wanganui take the broader view, monitoring activity against key indicators.



SAFER WANGANUI

Programmes by Age Group

Children 0-14 years

Young Cyclist of the Year
Child restraint checking clinics
Bike Wise Month
Birthright Wanganui
Incredible Years
S.K.I.P. Wanganui
For Our Kids

Youth 15-24 years:

High on Life
DARE
Driver licensing programmes
The White Water Years
Computer Clubhouse
Make It. Take It.
Underground Youth Fashion Show
Youth Committee
For Our Kids
Wanganui Youth Access to Alcohol

Adults 25-64 years:

Ladies Night at Mitre 10
Club Gold Walking Club
New Zealand Safety Week
Whanganui Workplace Health &
Safety Forum

Older Adults 65+ years:

Modified Tai Chi
Age Concern Expo (2 yrly)
Older People's Forum
Club Gold Walking Club
Senior Gym Circuit
Elder Abuse & Neglect
Prevention
Accredited Visiting Service

In the Following Environments

Home:

NZ Safety Week
Modified Tai Chi for Older Adults
303 Parent Support Centre
Neighbourhood Support Groups
Elder Abuse and Neglect Prevention
Accredited Visiting Service

Sports:

Sport Wanganui
Sport & recreation is part of
Safety & Wellbeing reference
group

Traffic:

Bike Wise
Child restraint checking clinics
Whanganui Learning Centre's driver
licensing programme
Whanganui Road Safety Action Plan
Te Ora Hou's driver licensing
programme
Intersections campaign
Mobility scooter users' safety workshop

Occupational:

Whanganui Workplace Health
& Safety Forum
Health & Safety Practitioners Forums
Workplace Neighbourhood Support

Leisure:

Continuous improvement of public
parks, reserves and playgrounds
Monitoring of playground injuries at
Council-owned facilities
Provision and lighting of a shared
pathway along the Whanganui
River

School:

Injury prevention initiatives in schools &
pre-schools
School road patrol
Walking school buses
Health Promoting Schools

Other:

Provision of "Fix-it" forms for reporting
of unsafe conditions.
Using CPTED principles in planning
Community Patrol
Safety displays at National Children's
Day and Whanau Day
Maori Wardens

SAFER WANGANUI

For the Following Scenarios

Violence prevention (intentional injuries):

Anger Change for Mothers

Intensive home-based Social Work

Free To Be Me

Te Rito Community Action Plan to 2012

Family Violence Intervention Network

Suicide prevention (self-inflicted injuries):

Training provided to agencies on youth and depression

Kai Piki Te Ora

Programmes aiming at “High risk-groups”:

Modified Tai Chi for older adults

Te Ora Hou’s driver licensing programme

Mobility scooter users’ safety workshop

May Day for people with disabilities

For Our Kids

High on Life

Life to the Max

The tables on the following pages present just a small selection drawn from a larger array of projects and programmes operating in Wanganui.

This sample has been selected to reflect the range of safety-focused initiatives in place in Wanganui.

SAFER WANGANUI

Road Safety

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Go By Bike Day Breakfast, Horizons Road Safety	Vulnerable road users	Cyclists & drivers	5 years	All cyclists cycling to/from work on the day	~ 200 cyclists enjoy breakfast each year	Horizons, ACC, Police, Green Bikes Trust, Sustainable Whanganui, Sport Wanganui, Wanganui District Council.
Mayoral Challenge, Horizons Road Safety	Vulnerable road users	Cyclists & drivers	5 years	Cyclists of all ages	~ 230 cyclists have joined the Challenge annually	Horizons, ACC, Police, Green Bikes Trust, Sustainable Whanganui, Sport Wanganui, Wanganui Cycle Club & Wanganui District Council
Child Restraint Checking Clinics, Horizons Road Safety	Safe use of approved child restraints	Caregivers who transport children by car	3 years	All carers of children who transport them by car	Poor level of compliance.	Horizons, C.I.P, SKIP, ACC, Safe2Go, Plunket, TOIHA
Protect your Mates at Intersections, Horizons Road Safety	Driver responsibility for safety at intersections	Young men aged 15-24 years	2 years with 1 year further to run	Billboards installed for 3 month periods at known dangerous intersections	Survey information collected supported the programme.	Wanganui District Council, NZTA.
Young Cyclist of the Year, Police	Cycle safety & skills for Year 8 students	Year 8 students	9 years	All Year 8 students in Wanganui	Representation at regional events resulted in Wanganui children placed.	Police, Horizons, ACC, schools

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Mobility Scooter Safety, Horizons Road Safety	Road safety for mobility scooter users	Users of mobility scooters	5 years	All mobility scooter users in Whanganui	3 mobility scooter safety workshops attracting 20-30 participants	Police, WDC, ACC, Horizons, Age Concern
Ride Forever, ACC	A free online tool to access the motorcycling community	Motorcyclists of all ages and abilities	6 years	Difficult to gauge for Wanganui specifically	Aiming to decrease the number & severity of motorcycle crashes	ACC, Police, retailers, New Zealand Transport Agency

Case Study

Wanganui Young Cyclist of the Year

Wanganui Young Cyclist of the Year is in its tenth year. The competition is open to all primary and intermediate schools in Wanganui with each school selecting their best boy and girl cyclist aged 10 years or older to represent their school.



The competition consists of:

- 20 multi-choice questions based on the bike code
- Practical riding test which includes:
 - Correct hand signalling
 - U-turns
 - Slow riding

The winning boy and girl each receive:

- \$100 voucher for their school
- \$50 voucher for themselves
- Commemorative trophy

The two winners from Wanganui go on to compete at the Regional Final of "Young Cyclist of the Year" usually held in Palmerston North. The regional final is more extensive and takes in a road ride through busy city streets.

The competition is a joint effort between Horizons Regional Council and Police Education Officers and is the culmination of work done by the police staff throughout the year in schools across the region.

Family Violence

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Case Management System	Collaboration between agencies dealing with those who are experiencing family violence.	Any family in Wanganui who is experience, or has recently experience family violence & who meets the criteria for referral usually by way of Police referral after a violent family incident	Since 2009	532 families from Aug 2009 – March 2010 referred.	Engagement level ensuring families are receiving information and addressing areas of concern has gone from 13% Dec 2009 to 29% March 2010.	Women's Refuge, Community Probation, Child Youth & Family, Police, Open Home Foundation, Family Works, Advocate for Children & Young People, Jigsaw Wanganui, Whanganui District Health Board, Work & Income, Whanganui Living Without Violence Trust, Birthright, Tupoho Iwi & Community Social Services Trust, Life to the Max, Strengthening Families.
Free to be Me, Family Works Centre	Family violence	Women and children who have experienced family violence	10 years	Children aged 5 - 14 years and women	Adults and children functioning in more positive ways, contributing more productively at school and in the community.	Ministry of Social Development, Child, Youth & Family, FVIN & Ministry of Justice.

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Anger Change for Mothers, Family Support Services Whanganui Trust	Family relationships, child wellbeing and maternal mental health	Mothers identified as at risk	8 years	Available to women with care of children	More than 200 have completed this programme	WDHB's Community Mental Health and WDHB's Child, Adolescent and Family Service
Intensive Home-Based Social Work, Family Support Services Whanganui Trust	Family and child wellbeing	Families who have complex needs with children in their care	19 years	Any family wishing to use the service	More than 1500 families have participated. 80% demonstrated considerable improvements in child wellbeing. Formal evaluation conducted by Massey University (2002).	FVCMN, Strengthening FamiliesHealth Education and Disability (HEADS) Forum and WRPPO
303 Parent Centre, Jenny Jurgens	Support for parents with children aged 0 – 5 years.	Anyone parenting children aged 0 ~ 5 years, more specifically parents requiring additional support around their parenting.	3 years	Parents with children aged 0 – 5 years & intentionally targeting fathers	As a government pilot, external research & has taken place alongside the programme. To date, results have been encouraging.	FVIN, SKIP, schools & early childhood centres.

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Te Rito Community Action Plan, Whanganui Family Violence Intervention Network	Family violence by taking action in 3 key areas – <ul style="list-style-type: none"> • leadership • changing attitudes & behaviour • service provision 	All members of the community	Since 2007	All members of the community	These include: <ul style="list-style-type: none"> • Design & implementation of the Interagency Case Monitoring System • Annual Street Survey • Design & delivery of 3 year family violence workforce training scheme. • Numerous community events. • Art competitions in Intermediate schools on a family violence theme. • Youth workshop 	38 government & non-government members of the local Whanganui FVIN

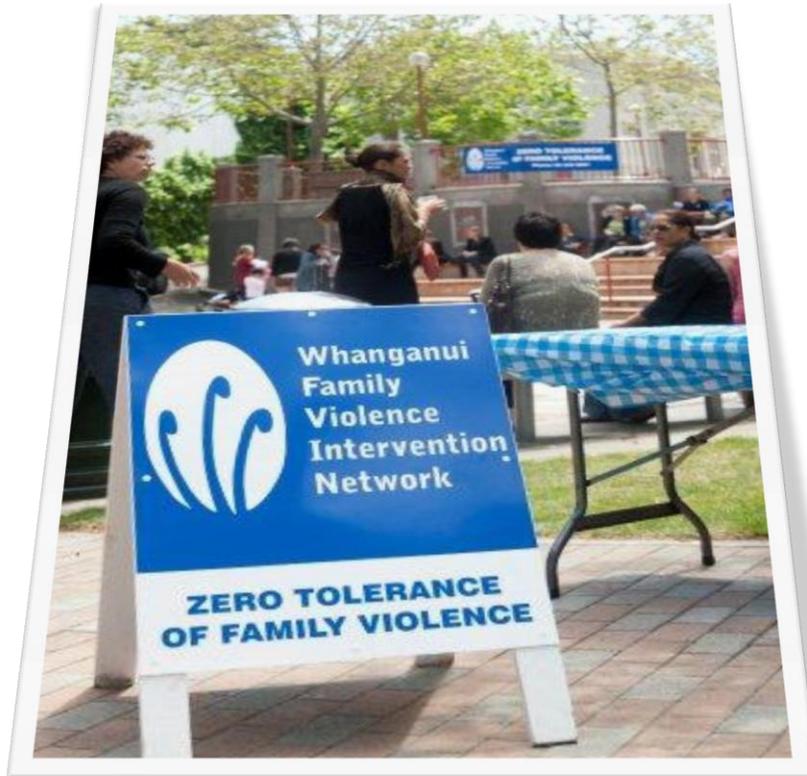
Case Study

Case Management System

The Case Management System is a systematic and coordinated collaborative approach responding to family violence incidents in Whanganui for any family who meets the criteria for referral. This is significant in that it is collaborative rather than sitting within or "owned" by one agency. The focus is kept on child and adult victim safety in all interventions.

Any family in Whanganui who is experiencing, or has recently experienced, family violence and meet the criteria for referral into the Case Management processes, are usually referred by Police after a violent family incident. Since its inception 532 families (August 2009 to March 2010) were assessed by the Case Management System.

The key outcome is the focus on increasing the engagement levels of the families being referred into the Case Management System to ensure they are receiving information and addressing issues of concern. The engagement level from August to December 2009 was 13% but in March 2010 the engagement level was 29%.



Case Study

Te Rito Project Management Group

The Te Rito Project addresses family violence in Whanganui by taking action in three key areas:

1. Leadership - encouraging long term commitment to preventing family violence by working with leaders in the community including:
 - key government and non-government organisations
 - wider community leadership including sports
 - local/regional and central government.

2. Changing Attitudes and Behaviours - motivating community action on attitudes and behaviours to prevent family violence including:
 - helping the community recognise and own the issue
 - organising collaborative community activities focussed on educating to recognise and prevent family violence
 - pursue and use media and speaking opportunities.

3. Community Collaboration and Service Provision to Families - safe effective community collaboration and service provision to families including:
 - overseeing Whanganui Family Violence Intervention Network meeting and actions to keep purpose clear
 - identifying training needs of VIN members and develop training programmes to meet these
 - updating with latest research
 - Case Management system running well
 - gathering statistics
 - looking for sustainable funding for family violence roles
 - supporting service responsiveness for Maori by Maori.

The strengths of the project include:

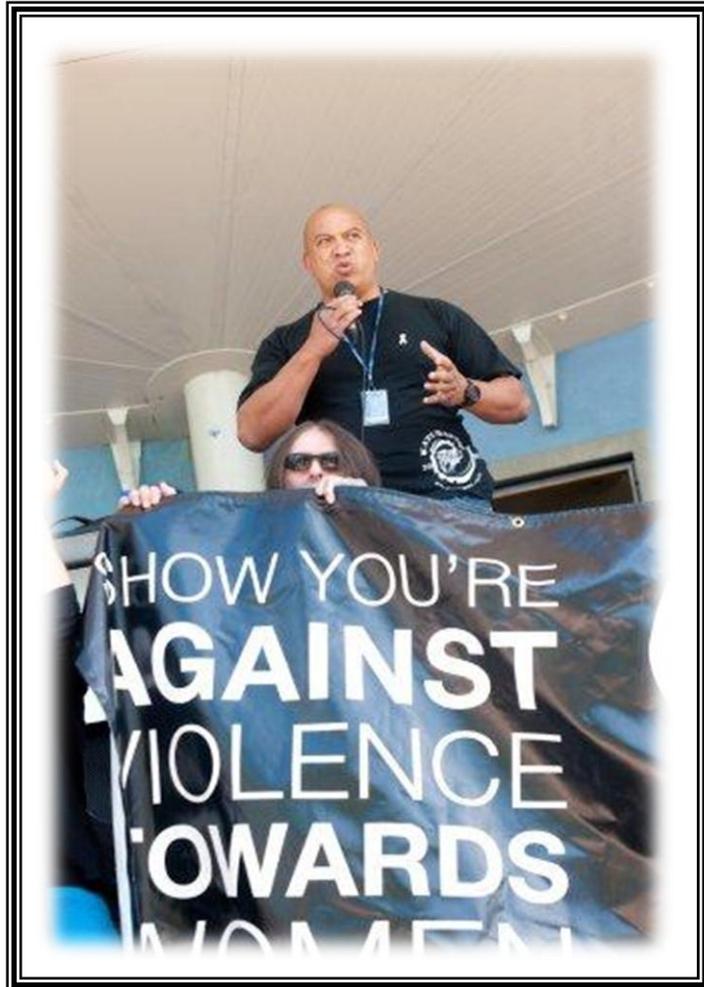
- * Key leaders in the community who are knowledgeable about and committed to preventing family violence collaboratively.
- * Frontline workers who are skilled in recognising and responding to family violence.
- * Community's awareness is raised about what family violence is and how to access help.

SAFER WANGANUI



All 42 members of the Whanganui Family Violence Intervention Network are partners of the Te Rito Project:

- | | | |
|--|--|---|
| 303 Parent Support Centre | Life to the Max | Wai Ora Christian Community Trust |
| Advocate for Children and Young People Who Witness Family Violence | Nga Tai O Te Awa Open Home Foundation | Wanganui Courts - District Court and Family Court |
| Age Concern | Prisoners Aid and Rehabilitation Society | Wanganui Public Health Centre - Whanganui District Health Board |
| Armstrong Barton Barnardos | Plunket - RNZ Plunket Society | Wanganui Restorative Justice |
| Birthright Wanganui Inc | Police | Whanganui Living Without Violence Trust |
| Central Baptist Kindergarten and Early Learning Centres | Relationship Services | Whanganui River Maori Trust Board |
| Christian Social Services Wanganui | Sexual Abuse Healing Centre | Women's Network |
| Child, Youth and Family | SKIP Whanganui | Women's Refuge Whanganui |
| Community Probation Service | Strengthening Families | Work and Income YMCA |
| Family Planning Association | Supporting Families in Mental Illness | Youth Services Trust YWCA |
| Family Works Whanganui | Te Ora Hou | |
| HIPPY Whanganui | Te Puawai Whanau - Te Oranganui | |
| Jigsaw Whanganui | Tupoho Iwi and Community Social Services Trust | |



White Ribbon Day photographs kindly supplied by Dori McCormick (www.dorimccormick.com)

Safety and Wellbeing

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Modified Tai Chi, Sport Wanganui	Falls prevention	Adults aged over 65 years, or 55 years for Maori and Pacific Islanders	Several years	Targeting 100 participant on average, each year	At reassessment, there is a marked improvement in participants at conclusion of the programme.	ACC
For Our Kids, Community Taskforce on Youth Wellbeing	Empowers the community, corporate sector and families to become positive and understanding role models for young people.	All Wanganui residents.	Ongoing	All Wanganui residents.	Increased positive interaction between adults, parents, the community and young people.	Wanganui Iwi, WDC, Police. Youth Sector, Ministry of Education, Ministry of Social Development, WDHB, Child Youth & Family.
Otago Exercise Programme, Handspring Limited	Falls prevention	Adults aged over 80 years (65 for Maori & PI)	2007	Adults aged over 80 years (65 for Maori & PI)	Home visiting to 500+. Proven to reduce falls by 35%.	WDHB, ACC, Handspring
National Children's Day, S.K.I.P Whanganui	Non-commercial day to celebrate how special and important children are.	Families in Wanganui	2000	Families in Wanganui	Good support at both events (Springvale & Castlecliff) on Children's Day.	Jigsaw, Ministry of Justice, Ministry of Social Development, Children's Commissioner, WDC, Castlecliff Beach Society.

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Ageing Positively Expo , Age Concern	Positive ageing & falls prevention	Adults aged over 65 years	3 years	All adults aged over 65 years	Well supported by both visitors and stall holders.	Age Concern, ACC, WDHB
Neighbourhood Support Groups , Neighbourhood Support Coordinator	Crime prevention	Residents of Wanganui	Ongoing	272 groups involving 3287 households 200 businesses	Consistent growth of membership particularly business support.	Victim Support, Police, Community Patrols, Wanganui District Council.
Community Patrols	Crime prevention	Residents of Wanganui	Ongoing	Known problem areas for criminal activity.	Community members report feeling safer with the presence of the patrols. Police find the information gathered instrumental in helping them police the community. Anecdotal evidence suggests that members of Wanganui Community Patrol are more aware of offending in the community and report criminal activities more frequently than they would have previously.	Police, Victim Support, Maori Wardens, Wanganui District Council

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
White Ribbon Day, Family Violence Intervention Network	Community awareness of family violence particularly the violence against women.	Population of Wanganui	Annually since November 2006	Nationwide and well supported in Wanganui	November 2009 saw a large group march through central Wanganui supporting White Ribbon Day. They were joined by motorcyclists on the White Ribbon Ride from Wellington.	The Families Commission Women's Refuge, National Network of Stopping Violence Services, Amnesty International, Human Rights Commission, YWCA, YMCA, Save the Children, Relationship Services
Safety New Zealand Week, Child Injury Prevention Group	Home safety awareness	Everyone	1 year	Everyone	Poor response to the competition. Anecdotally positive feedback to the various displays.	ACC, CIP, WDHB,
Whanau Day, Te Oranganui Iwi Health Authority	Clients to learn more about the services available.	Clients and their whanau.	1 year	Wanganui whanau.	180 individuals attended. 25 new enrolments for oral health care. Child restraints in more than 30 vehicles were checked on the day.	Te Puawai Whanau is part of Te Oranganui Iwi Health Authority (TOIHA) and is represented in the Wanganui Child Injury Prevention group.

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Whanganui Workplace Health and Safety Forum, ACC	Workplace health & safety	Health & safety practitioners in Whanganui	1 year	Health & safety practitioners in Whanganui	Slowly growing membership of health and safety practitioners.	Mars Petcare, ACC, Department of Labour
Health and Safety Practitioners Forums, ACC	Workplace health & safety	Health & safety practitioners in central North Island	1 year	Health & safety practitioners in central North Island	60 -70 participants at each forum	ACC, Department of Labour
Learn to Swim, Splash	Swimming skills	6months to adults	20 years +	Currently have 715 children and adults attending Learn to Swim classes.	Increased classes run at the facility. In 2006 an average of 620 children and adults per term. This has increased by an average of 100.	Swimming New Zealand. The Aquajet Swim School is accredited as a Quality Swim School.
Swim for Life 200m Challenge, Splash Centre	Swimming skills and Water Safety Skills. Swim for Life Vision: 'All New Zealand children able to swim 200m by the age of 12'	School age children	2009	20 school age children. The aim for 2010 is to include Schools that utilise the Splash Centre and Aquajet Swim School children.	20 school age children have attained their 200m Swim and Survive Certificate of Achievement.	Water Safety NZ

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Firewise & Maui Tinei Ahi New Zealand Fire Service	Reducing the incidence and consequence of fire.	Firewise programmes: preschool – year 13. Kohanga reo & kura kaupapa	10 years	500 Wanganui children participated in 2009	Fire safety education is shown to be a successful way of preventing fire and the devastation it causes to people, property and communities.	Schools, kindergarten association, kohanga reo, kura kaupapa.
Life to the Max	Early intervention and prevention in order to support children and young people gain control in their lives by working with family/whanau and community professionals.	Child/Young Person aged 5 – 13 years Known to Police Youth Aid High risk family	2001 – present	Children & youth who may present with family or community risk factors such as alcohol/drugs, family violence, truanting, gang influence and lack of positive role models	Formal, external evaluation	Police, Child, youth & family, Crime Prevention Unit, Whanganui Community Foundation, Whanganui District Health Board, Police Adult Diversion Scheme, Ministry of Justice
Age concern	Access to information and resources for the elderly.	Older people in the community.	Since 1978	Older people in the community.	Ongoing successful advocacy for elderly at District Council level. Excellent continued utilisation of accredited visitor service.	Wanganui District Council, ACC

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Crime Prevention Through Environmental Design , Wanganui District Council	How the built environment affect safety	Planners, policy analysts, safety and injury prevention personnel, Police	Second workshop to be held this year	Planners, policy analysts, safety and injury prevention personnel, Police	Development of two CPTED plans	Wanganui District Council, Police, ACC, Horizons Regional Council, Mainstreet.
Graffiti , Wanganui District Council	Tagging, criminal damage and behavioural issues.	All encompassing	July 2008 – present	All areas of Wanganui	Graffiti team has painted out 7230 instances of graffiti and tagging from July 2008 to May 2010.	Wanganui District Council, Police.
Make It. Take it. Wanganui District Council	Positive engagement of young people including promotion of education, training & employment pathways.	12 to 24 years	3 years	Youth aged 12 – 24 years with a particular focus on at-risk.	The project has facilitated/supported a number of successful initiatives including <ul style="list-style-type: none"> • Youth Service within WDC. • Youth website • Underground Youth Fashion Show • Y2Y Mural Projects • Stepping Forward Youth Forum • Youth Leadership Award 	Police Whanganui District Health Board YMCA Whanganui UCOL Skateboard Trust

SAFER WANGANUI

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Junior Neighbourhood Support	Promote a sense of pride, safety and community spirit in children and their wider school community.	Low decile schools in Wanganui	2009	Currently programme is run in three schools – Castlecliff, Tawhero and Wanganui East.	10 children from each school recognised each term for the changes they have made. Good support from the community for sponsorship.	Wanganui Restorative Justice Trust, Victim Support, NZ Fire Service, ALAC, NZ Police, Schools, Civil Defence, Rotary Club.
Positive parenting, SKIP Whanganui	Strategies for positive parenting	Adults caring for children aged 0 – 5 years	5 years	Any parent caring for children aged 0 – 5 years	More parents are using positive parenting strategies & accessing information & support when needed	SKIP Whanganui Forum, made up of 50 representatives from local agencies, services and early childhood centres.
Infant and childcare, Birthright Wanganui	Care of babies and infants under 2 years	Single and vulnerable parents	2 years	New vulnerable and single parents	Parents with more confident parenting skills	MSD
Club Gold, Sport Wanganui	Encouraging regular physical activity to prevent falls	Adults aged 50 years and over	Several years	Ongoing growing attendance.	Twice weekly physical activity and social interaction	Splash Centre
Incredible Years, Family Support Services Whanganui Trust	Family relationships, child wellbeing and behaviour.	Parents of children aged up to 10 years	5 years	Available to any adult with care of a child under 10 years.	More than 400 local parents have participated.	Ministry of Education's Group Special Education WDHB's Child and Family Mental Health Resource Teachers of Learning & Behaviour

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Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
White Water Years, Family Support Services Whanganui Trust	Family relationships, teenage behaviour and adolescent wellbeing	Parents of teenaged children	5 years	Available to any adult with care of an adolescent	More than 300 local parents have participated.	Family Support
Youth Committee, Wanganui District Council	A youth voice for WDC issues - "Speak up, be heard"	All youth aged 12 – 24 years	4 years	All youth aged 12 – 24 years	Results include: <ul style="list-style-type: none"> • Youth Events • Involvement in policy development • Participation in national/central government forums • Website development 	WDC, WYATA

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Case Study

Crime Prevention through Environmental Design (CPTED) in Whanganui

Dr Franks Stok is a leading practitioner in CPTED in New Zealand, having pioneered the CPTED assessment tool now used internationally. Wanganui District Council recently invited Frank to lead a CPTED training course for the second time. He led the two teams through a CPTED assessment of two local venues – Virginia Lake and the riverfront development.

CPTED is a crime prevention philosophy based on proper design and effective use of the built environment leading to a reduction in the incidence and fear of crime. It is based on four key overlapping principles:

1. Surveillance – people are present and can see what is going on.
2. Access management – methods used to attract people and vehicles to some areas and restrict from others.
3. Territorial reinforcement – clear boundaries encourage community “ownership” of the space.
4. Quality environments – good quality, well maintained places attract people and support surveillance.

Participants for the training course came from a variety of agencies and disciplines and included representatives from Council, Horizons Road Safety, ACC and Mainstreet. Over two days they visited the selected sites, assessing them using the seven qualities that characterise well designed, safer places:

1. Access: Safe movements and connections
2. Surveillance and sightlines: See and be seen
3. Layout: Clear and logical orientation
4. Activity mix: Eyes on the street
5. Sense of ownership: Showing a space is cared for
6. Quality environments: Well designed, managed and maintained environments
7. Physical protection: Using active security measures

After daytime and night-time visits, a safety plan of each area was presented. This identified many things – hidden treasures within the amenity, entrapment zones, the broader community context, current and future use, and problem areas. From the subsequent discussions, the whole team developed CPTED plans for Virginia Lake and the riverfront. These are now with council officers for implementation. It is intended to further integrate CPTED principles into as many community planning processes as possible.

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Case Study

Junior Neighbourhood Support

As an extension to the very successful Residential Support and Business Support, Junior Neighbourhood Support began in Term 1, 2009. This joint venture led by Neighbourhood Support in conjunction with the New Zealand Police, New Zealand Fire Service, Civil Defence, Rotary Club of Wanganui, Rotary Club of Wanganui North, Castlecliff and Tawhero schools. Both of these schools have a decile 1 rating.

Term 3 2009, saw the programme extended to Wanganui East School with the Wanganui East club joining to support that school. In 2010, Aranui School will also join the programme.

The aim of Junior Neighbourhood Support is to promote a sense of pride, safety and community spirit in the children and in the wider school community. It promotes and encourages:

- Safety awareness
- Firewise awareness in their homes
- Voluntary work in the community

Junior Neighbourhood Support is based on positive re-enforcement for appropriate behaviour and attitude and rewarding behaviours such as fair play, bike safety, naming personal property, respect and support for fellow students and staff, helping others,

preventing/stopping/reporting bullying and removal of graffiti and tagging.

Nominations can be made by anyone and the general public is involved through watching for appropriate behaviours. The local dairy has been provided with tickets to give to well-behaved children to take back to school as nominations.

Each term a school assembly is dedicated to Junior Neighbourhood Support and 10 children are recognised for the changes they have made. They are presented with a certificate, back pack, lunch box, drink bottle, netball or rugby ball and a small amount of sweets.

At the end of 2009 the Annual Awards were held and five children from both Castlecliff and Tawhero Schools were flown to Auckland for a day at Rainbow's End as a reward for their hard work and consistent positive attitude and behaviour towards others.



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Alcohol and Other Drugs

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Whanganui High on Life	Support schools to make and keep the 'no drugs at school' boundary. In tandem with this we advocate for retention of young people in formal education settings, wherever possible, even when alcohol and other drug issues exist in their lives.	Secondary schools within the Whanganui-Rangitikei and Waimarino area	Ongoing since 2004	Whanganui-Rangitikei and Waimarino area.	Evaluation undertaken in 2008/2009. Please refer to case study.	Community Action on Youth and Drugs (CAYAD), Ministry of Education, Whanganui District Health Board, Kaituhauora, Hapai Mauri Tangata, Te Oranganui Iwi Health Authority PHO, Secondary Schools
Youth Week	Harm minimisation around alcohol and young people	Whanganui Secondary School Students and teachers	Youth Week 24-28 May	Approximately 1000 students were involved.	Evaluations have been developed in partnership with the youth facilitators (waiting for results) To be followed up with student/parent evening.	Secondary Schools ALAC, WDHB Police
Alcohol Action Whanganui (AAW)	Advocacy, promoting and raising awareness of the 5+ Solution and the Law Commissions review of the liquor law.	Whanganui Community	1 year	Community	Positive response to postcard campaign and good coverage in the local paper	Community members, WDHB, ACC, WRPHO

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Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Whanganui Youth Access To Alcohol (YATA)	<ol style="list-style-type: none"> 1. Encourage parents / caregivers and other adults, as well as the hospitality industry, to comply with legislative youth alcohol supply requirements 2. Motivate the adequate supervision of youth drinking by parents / caregivers 3. Promote safer alcohol use across the community recognising that the drinking behaviours modelled by adults impact on young people 4. Assist policy-makers in addressing gaps in local and national regulatory and legislative frameworks. 	Youth (12-24) and their communities	Ongoing since 2002	Whanganui community	<p>Community collaboration has increased to include youth representation and also Maori Wardens.</p> <p>Each campaign has been evaluated individually</p>	Community Action on Youth and Drugs (CAYAD), Horizons Regional Council, Police, ACC, WDHB, YMCA, Wanganui District Council, Hospitality Industry, Whanganui Maori Wardens

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Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Community Action on Alcohol Project, Whanganui Youth Access to Alcohol Group	<p>To have party organisers better prepared so there is less risk of harm associated with their party.</p> <p>To have Police better prepared as they know where parties are being held and by who therefore can patrol to risk.</p>	Anyone holding a party, particularly 14 - 25 year olds.	2009 – present	Since 27/11/09 to today there have been 33 party notification forms returned	There is no follow up survey to measure how the party went or if the packs made a difference to how the party was run anecdotally there has been positive feedback about the information given in the packs.	ALAC, YATA, CAYAD
Postcards to Parliament, Alcohol Action Whanganui	Encourage community to support the 5+ Solution and to lobby MP's re the alcohol legislation	Community	One-off public distribution (May 2010)	Gave out postcards at the local shopping centre over a 4 hour period.	Postcards have been distributed among workplaces/organisations and a community display	Community members, WRPHO
Party Register, Wanganui Police	<p>To have party organisers better prepared so there is less risk of harm associated with their party.</p> <p>To have Police better prepared as they know where parties are being held and by whom therefore can patrol to risk.</p>	Anyone holding a party, particularly 14-25 year olds	2009 - present	Since 27/11/09 to today there have been 33 party notification forms returned	There is no follow up survey to measure how the party went or if the packs made a difference to how the party was run. Anecdotally there has been positive feedback about the information given in the packs.	ALAC, YATA, CAYAD

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Case Study

High on Life

'High on Life' is a collaborative initiative among schools, health and community agencies in the Whanganui region. Its goal is to reduce tobacco, alcohol and other drugs related harm among students and within their school communities.

In 2004, the 'High on Life' (HoL) project was launched locally. Project partners currently include senior schools throughout the Whanganui region, Nga Tai O Te Awa Maori Development Organisation (formerly Taumata Hauora Trust Maori Development and Primary Health Organisation), Ministry of Education, Whanganui District Health Board (Alcohol & Other Drug Service and the Public Health Centre) and Whakauae Research Services (the research arm of Te Maru O Ruahine Trust, Ngāti Hauiti).

Project objectives

The project aims to:

- a) Promote school as a place free from tobacco, alcohol and other drug (AOD) related harm;
- b) Facilitate easy access for students to AOD services at school, without fear of punishment;
- c) Facilitate access for AOD services to their client group on school sites;
- d) Help schools retain and work effectively with students with AOD issues;
- e) Promote AOD awareness, discussion, and strengths-based action among young people;
- f) Assist schools to develop effective AOD policies and practices, and to develop a supportive school environment;
- g) Facilitate professional development for teachers of drug education

Results

The key project evaluation results summary:

- It is possible to enable students to deal with their AOD issues while still engaged in school. This evaluation suggests that the approach is more efficient and more helpful to both the school and its students;
- Students with AOD issues respond to this supportive school environment by using the AOD services available;
- HoL provides an efficient and effective means for AOD clinicians, youth workers and the hapū worker to gain access to their target population. It is easier to engage students with AOD problems in a change process when they can be accessed through their school

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- Early intervention options are worth exploring in other schools. Students seek help when they trust the workers involved;
- Teachers support a school-wide AOD strategy;
- Suspensions for AOD related issues do not necessarily decrease as an outcome of HoL intervention;
- Teachers, principals and practitioners do not think alike about tobacco, alcohol and other drug issues. However, there has been strong agreement on most of the issues most of the time;
- There is a lot of time, communication, and good will involved in the implementation of the HoL work;
- Youth workers have been able to relate to students from an independent perspective and also respect the culture and vision of the school. Losing the trust of either the students or the key school staff would reduce the effectiveness of the work;
- Youth workers added greatly to the scope and effectiveness of the HoL approach in both schools.

Partners

- Ministry of Education
- Public Health unit WDHB
- CAYAD Nga Tai o Te Awa Trust
- Alcohol and Other Drug services WDHB
- Wanganui High School
- Wanganui City College
- Wanganui Girls College
- Cullinane College
- Rangitikei College
- Ruapehu College

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Emergency Planning

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Get Thru , Wanganui District Council	Initial stage of long-term programme aimed at increasing individual and community awareness and preparedness for disasters by building hazard and civil defence awareness and understanding as a basis for commitment, preparedness and a reduction in vulnerability.	Wanganui district	2005 – present	All residents of the Wanganui district.	1 in 4 people are now prepared for an emergency as opposed to 1 in 5 at the beginning of the programme. 1 in 10 are fully prepared compared with 1 in 14 prior to the start of the campaign.	Wanganui District Council Civil Defence Wanganui Ministry of Civil Defence
First Aid Training , Red Cross	Workplace and community first aid training and emergency management.	Wanganui region	Ongoing	All members of the Wanganui community		Civil defence Wanganui District Council Horizons Regional Council Electrical Workers Association
Waterline flood warning system , Horizons Regional Council	24-hour, freephone service which provides river height and rainfall information	Horizon's region.	Ongoing	All residents of the Horizon's region.		Civil Defence Wanganui District Council Community

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Case Study

Horizons Regional Council

Flood protection and land drainage are paramount to keeping people safe and are a major part of Horizons Regional Council business. Managing rivers through engineering works helps prevent floods and provide adequate land drainage when necessary. Horizons Regional Council manages 30 river and drainage schemes across our Region, and maintains over 460 km of stop-banks, 700 kilometres of drains, 20 pumping stations and 53 dams.

To ensure people's needs are met the Regional Council takes many things into consideration including type of use, level of flood protection needed, erosion control, disposal of waste products, native habitat protection, recreation, and spiritual values.

Part of the flood protection programme is to monitor river heights and rainfall levels so that there is adequate protection for the communities. This is done through the Waterline automated warning system and the River Heights and Rainfall service. The Waterline warning system is a 24-hour, free-phone service which provides river height and rainfall information.

Horizons provides useful information on ground water, soil moisture, and turbidity and water temperature. During heavy rain or a flood event, this up-to-the-minute information from throughout the Region can be used to make decisions. Horizons have developed models that will predict river level from rainfall within the catchments. These forecasts use data based on upstream flow, upstream rainfall and rainfall forecasts. The most accurate forecasts are based on upstream flow and they become increasingly less accurate the more they rely on upstream rainfall and then forecast rainfall. Flood forecasting for the Forecasts for the Whanganui, Whangaehu, Turakina and Rangitikei rivers are now available online. (www.horizons.govt.nz)



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Justice

Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Prisoner's Aid & Rehabilitation Services	Support to prisoners, offenders and their families / whanau	Prisoners, ex-prisoners and probation clients including home detention, releases from Prison (not onto Probation), and their family/whanau.	Local 45 years, national since 1877.	Wanganui city, south to Bulls, north to Taihape, Waiouru, Ohakune, Raetihi, west to Patea.	Reduced offending (by giving pro-active support, information, advocacy, networking etc.)	Corrections Department, Work & Income, Housing NZ, and a host of other Government and non-Government organisations.
Y2Y	To inspire, train, resource, support and empower young people to become functional and positive members of society	The programme's target group is youth who lack direction, motivation and self-esteem.	Yes to Youth (Y2Y) Trust was formed in 2005 in response to identified needs for support for young people as they transition to independence.	Whanganui city area	Y2Y has steadily developed a reputation as a high quality provider of services and programmes in both Whanganui and Porirua.	Police, Child Youth & Family, Community partners

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Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
WRPHO Whakaora Navigator Programme Manaaki Health Pilot	Streamlining the continuation of health care and wellness of prisoners received in prison with health care requirements following release to primary or secondary health sectors	Prisoners due for release at Whanganui prison	Project was a pilot that started in 2009	Whanganui DHB region	External Evaluation showed that the programme was well designed and positive outcomes for the client were evident where the client and navigator worked together to remove barriers	Whanganui Prison, PARS, TOIHAPHO, Probation, Regional Community Forensics, Prisoner Re-Integration Service
Restorative Justice	Aims to address victims needs	Adult Offenders	Since 1999	Whanganui District Court region	External evaluation	Whanganui District Court, Restorative Justice Whanganui, Police and community partners
Crimes meetings	Flagging suspected offenders, highlights arrests and provides community alerts	This meeting discusses issues related to criminals and criminal activity.	Ongoing	Whanganui Region including Marton, Bulls, Taihape, Raetihi and Ohakune	Raised awareness across the region of potential issues	Police, Maori Community groups, Neighbourhood Support, Wanganui Wanganui Regional Forensics, Probation, Wardens, support groups, WDC, Courts, Prison, Community

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Programme and Developer	What it addresses	Target population	Length of operation	Reach of programme	Results	Partners
Youth Offending Teams	Think tank to put strategies together to minimize high risk youth offending	Criminals and prisoners	Ongoing	Whanganui District Council region predominately	Mental Health and Alcohol & Drug screening then referrals to appropriate providers	Police Youth Aid, Child Youth & Family, Child Adolescent Mental Health Services, Regional Community Forensics, Iwi, Education

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Justice

New Zealand Prisoners' Aid and Rehabilitation Society Wanganui

PARS services are provided pre-sentence, during-sentence and post-sentence by assisting:

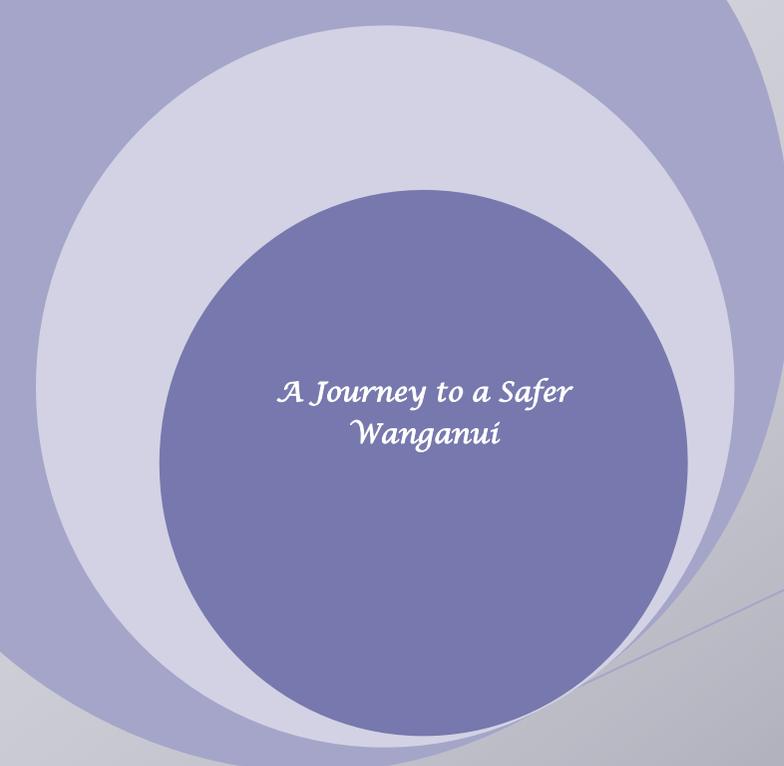
- those appearing before court
- remand
- sentenced prisoners
- released prisoners

Information is also provided to support to the family/whanau of these groups:

- information and support ,often practical, before and during sentence and following release.
- referral and advocacy to enable people to access services in the community.

- helping inmates and their family/whanau to deal with issues that arise as a result of imprisonment.
- assisting inmates to maintain contact with their family/whanau, which can involve assistance with travel and accommodation or a child activities team during visiting times.
- visits to inmates who have no community support.
- assisting inmates to manage their finances and secure their property during sentence.
- assisting before and after release in the areas of accommodation, employment, income, relationships, community support, victim issues and healthcare.

Wanganui has a small contract with the Department of Work and Income to find work for elderly inmates and have been working hard on an accommodation project for released prisoners and other at-risk groups.



*A Journey to a Safer
Wanganui*

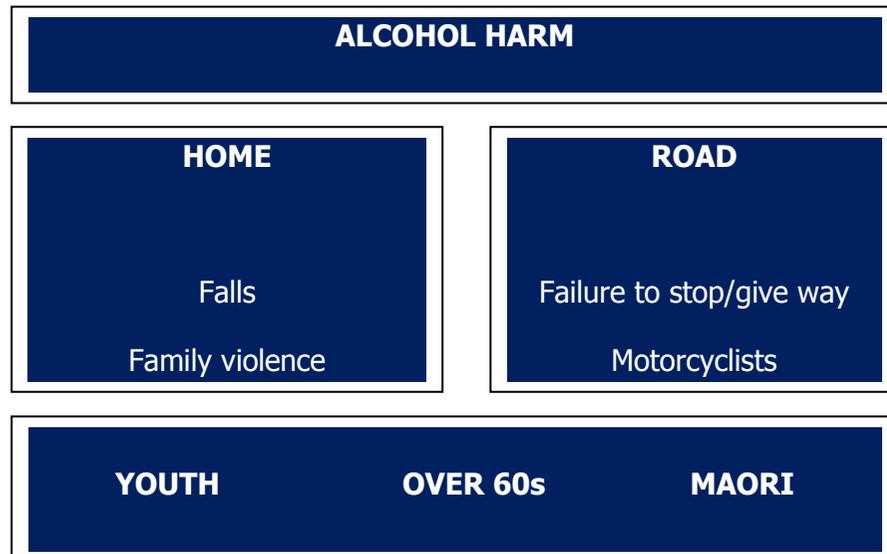
CRITERIA 3:

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

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The Evidence

As discussed in the former section, there has been an in-depth analysis of injury data, which is further explored under criterion four. Data analysis has enabled identification of key priority areas in Wanganui. These areas contribute significantly to the local injury burden.



Injury deaths and hospitalisations in Wanganui clearly relate to falls and road crashes, identifying both home and road as the predominant locations, while crime statistics reveal family violence as another local issue.

Alcohol features as a driving and family violence issue, but its link to falls is less clear. However recent research demonstrates that falls are more likely if alcohol has been consumed within the previous six hours. In early 2009 the Alcohol Advisory Council and SCFNZ hosted a community forum on alcohol related harm at Putiki Marae. Community attendees agreed to progress from the forum and look at developing a local response. At a subsequent meeting in April 2009, the agreed first step was to measure the extent of alcohol related harm in Wanganui. One key initiative was to access data from Whanganui Hospital's Emergency Department on alcohol-related presentations. It is pleasing to note that this has now been achieved. Additionally, Whanganui District Health Board has offered its support to the District Council in producing an alcohol harm minimization strategy. This is likely to be facilitated by the Alcohol and Other Drugs reference group, Whanganui YATA.

Within these broader categories, vulnerable groups emerge. In Wanganui these include youth, those aged over 60 years and Maori.

Youth are over-represented for injury-related deaths, most likely as a result of driving.

Over 60 year olds are over-represented in terms of both injury related deaths and hospitalisations in Wanganui. While falls are more likely for the older adult, the Communities at Risk Register

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(NZTA) also identified drivers aged more than 70 years as at high risk of crashes.

Maori are over-represented in injury-related hospitalisations and are more likely to have a low socio-economic status. Wanganui District Maori are more likely than Māori in the total population to have incomes in the lowest bands. Nationally, 48% of Maori received \$20,000 or less in annual income in 2006. In Wanganui this was 55%. Across New Zealand, 18% of Māori reported incomes over \$40,000 while in the district the proportion was just 12%.

In the section on criteria two, an overview programmes that target safety for vulnerable groups was presented. Consequently this section will describe a number of case studies, which demonstrate how high risk environments and vulnerable groups are targeted to improve safety.

Alcohol harm

Alcohol Action Whanganui - Postcards to Parliament

Encourage community members to support the lobbying of Members' of Parliament regarding alcohol legislation

In May 2010, one-off public distribution of postcards addressed to Parliament was held at a local shopping centre over four hours. The postcards had alcohol-related statistics. The postcard also included the 5+ Solutions.

This read:

"5 Things Every MP Should Do".

- Raise alcohol prices.
- Raise purchase age.
- Reduce accessibility, marketing & advertising.
- Increase drink driving counter measures.
- Increase treatment opportunities for heavy drinkers.

Postcards have been distributed among workplaces/organisations and a community display

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Home

New Zealand Home Safety Week 2009

The Wanganui Child Injury Prevention group worked together to assemble a series of displays at local venues to mark New Zealand Safety Week in 2009. While the long term objective is to make Wanganui homes safe places, the displays aimed to encourage participants to make sure their own homes were safe, having observed the related information. At each venue, there were supplies of a simple home safety checklist (ACC), as well as the opportunity to enter a competition. Entrants had to identify one hazard at two of the eight displays to win a Home Safety Kit (supplied by ACC). The displays were as follows.

- Drive way safety at Trafalgar Square, a shopping mall
- Poisonous plants at McDonalds
- Kitchen safety at Wanganui Gas
- Bathroom safety at Mitre 10 Mega
- Fire safety at the Splash Centre
- Backyard safety at ACC
- Handling sharps at Work and Income

Staff at the various venues directed the public to the displays and most were in high traffic areas, for example the waiting area in Work and Income. The displays were supported by print and voice media, both nationally and locally.

Areas for improvement for future campaigns included resourcing for set up and hosting the displays; displays disfigured or dismantled by members of the public if unattended; and low level of entries

into the competition. A whole series of mitigating strategies were identified by the CIP group during the evaluation of the event and will be used in planning New Zealand Safety Week 2010. (The evaluation, using Results Based Accountability, is available by contacting Ellen Mildon at ACC Whanganui.)



New Zealand Safety Week 2009

Neighbourhood Support Groups

Neighbourhood Support Groups enable people to share information, ideas and insights. A Neighbourhood Support Group will:

- Encourage neighbours to talk to each other
- Share information that will help reduce the risk and fear of crime
- Help foster a sense of community spirit, where everyone is respected and valued
- Educate and empower neighbours to take responsibility for their own safety
- Identify the needs of neighbours and ways to assist each other
- Identify the strengths and skills of neighbours to contribute to solving local problems
- Minimise burglaries and car crime in the local area
- Reduce graffiti, vandalism, violence and disorder
- Support victims of crime
- Enhance the safety features and appearance of the neighbourhood
- Decide on ways to handle any civil emergencies that may occur
- Know when and how to contact Police, other emergency services or support agencies
- Liaise and co-operate with other community groups

Wanganui Neighbourhood Support includes home, business and junior divisions. Currently, Junior Neighbourhood Support is operating in four schools. This popular programme will continue to grow over the coming years.

Youth

Who is your sober Driver?

YATA summer campaign 2008/2009 – “Who’s your sober driver?”. In its 2008/2009 campaign, Whanganui YATA developed the following project goal, that:

Alcohol supplied to under-18s is supplied by their own parent or legal guardian in reasonable quantities in a safe supervised environment with a designated sober driver, if required.

The objectives were:

1. A reduction in supply of alcohol by parents and other adults to under-18s for unsupervised consumption.
2. An increase in designated sober drivers amongst groups of young people.
3. An increase in community understanding of the law as it applies to supply of alcohol to under-18s.

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Members of the YATA project group included representatives from the following agencies:

- Wanganui District Council's Youth Councillor
- Community Action on Youth and Drugs, Nga Tai O Te Awa
- Community Action on Youth and Drugs, Nga Tai O Te Awa
- Road Safety Coordinator, Horizons Regional Council
- Director, YMCA
- Policy Analyst, Wanganui District Council
- Injury Prevention Consultant, ACC
- Early Intervention Practitioner, Alcohol & Other Drugs Service, WDHB
- Liquor Licensing, Wanganui Police
- Hospitality industry
- Youth Worker, YMCA
- Health Provider, Public Health Centre, WDHB

Messages went across a number of media during the summer of 2008 and 2009, the tagline being "Who's your sober driver? Think before you buy under 18s drink". The group's focus was to minimise youth alcohol-related harm (offending, drink driving, injury, relationship issues, violence, etc) by placing an emphasis on supply reduction and harm minimization.

The target groups included -

- Suppliers of alcohol to under-18s, usually parents and/or other adults (older friends, siblings, parents of friends, sports coaches, liquor retailers, etc).
- Young people who may drink and drive.

The WYATA campaign for 2008/2009 was not as successful as efforts in previous years. This was related to three key issues - the loss of a senior member of the group, a newly formed YATA group during the planning stage of the campaign and delayed scheduling of the campaign.

Membership of YATA changed significantly in late 2008, particularly with the loss of the Senior Health Promoter, Whanganui District Health Board. Others in the group had taken up new roles in the community and still others were new to the YATA group itself. Rather than cancel the summer campaign, for which funding had already been earmarked, a decision was made to repeat the previous year's approach so that WYATA's message remained out in the community.

Planning of any campaign is dependent upon the strengths and limitations of project group members and this was certainly a factor for WYATA. During late 2008 and early 2009, five representatives left the team while four new members joined the group. Of note, the group lost the Senior Health Promoter, who had been with WYATA since its inception and was a key participant in previous campaigns.

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A new health promoter was not appointed until March 2009, leaving a significant gap in the group's make-up. While the new members were very welcome, skilled and enthusiastic, joining at the critical planning stage had a negative impact overall. Planning took more time, delaying the start date beyond the ideal summer holiday period (December/January). Additionally group members were working in new areas with unfamiliar material and without time to come up to speed, as well as orientating to their respective roles.

Delayed scheduling meant that the campaign was not effectively underway until 26th January and not all activities were ready to commence on that date. Print advertisements began on 5th February, and then radio started on the Radio Network on 9th February. An accidental consequence of this staging was that WYATA messages remained in the community for eight weeks, rather than the planned-for six weeks, although might have been diluted to some extent. Late scheduling also meant that the competition was not successfully marketed with inadequate lead time given to potential entrants. As a result, awareness was limited and no entries were received by the YATA group.

The pseudo-patron operations were not carried out as planned. This was due to the repeated delays at commencing the campaign, as well as sourcing appropriate young people to act as patrons. However, controlled purchase operations were undertaken by Police during this period and received supportive media coverage.

Additionally scheduled on-air interviews were postponed and never re-scheduled. It is unclear why this occurred as the interviews were planned for mid-way through the campaign.

One highlight of the campaign was a radio advertisement created and produced by AWA FM which directly challenged family on the supply of alcohol to under-18s. This was produced both in English and Te Reo. The Radio Network also produced a series of 15-second advertisements playing on the mateship theme. These were augmented with advertisements provided by the Alcohol Advisory Council (ALAC).

To gauge campaign awareness, face-to face interviews were undertaken with young people at City College, Wanganui Girls College and Cullinane College by Masina Kenworthy (YMCA). None were able to recall the tagline "who's your sober driver?"

No anecdotal feedback was received by YATA group members.

Road

Motorcyclists

Jack Kennedy of DriveSafe Driving School is providing motorcycle skills training for up to 25 participants this financial year. Working with ACC and Horizons Road Safety, the training targets riders on a learner or restricted motorcycle licence and includes competencies above those basic riding skills. Training improves hazard perception and makes the rider more aware of potentially dangerous traffic situations. The three most important road craft skills are riding defensively, scanning for hazards and cornering at a safe speed. Under the "Ride Forever" brand (www.rideforever.co.nz), ACC is supporting DriveSafe to enable riders to receive two hours of one-to-one training for a single payment of \$60.00.

Uptake has been slow to date. Jack has been using his networks to advertise and promote this opportunity. The recent poor weather may also be discouraging riders from responding.

Once funding for the 2010/2011 year is confirmed, further work on increasing motorcycle riding skills is anticipated. Community stakeholders plan to meet later in June.

Protect Your Mates at Intersections

This campaign is currently being run in several districts including Whanganui. Aimed at young male drivers between 15 – 24 years of age, this campaign reminds drivers that they are responsible for the safety of their passengers when driving specifically when at intersections.

The "Protect Your Mates" billboards are installed at identified intersections that have statistically been dangerous. The billboards are installed for three months at a time and then removed for three months and then reinstalled, some at different sites.

The campaign has been running for one year and is scheduled to continue for a total of three years.

A survey of sixty 14 – 25 year olds in Wanganui, revealed that only one of them had not seen the billboards at intersections. Of the majority who had, all were able to recount the intended message that is, more care is required at intersections.



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Over 60s

Tai Chi

Modified Ta Chi is the style of Tai Chi developed by Dr Paul Lam for older people. It focuses on preventing falls by improving muscle strength and balance. Research shows that improving strength and balance reduces the risk of falling by 47%. The programme specifically targets adults in the 65-plus age group (55-plus of Maori and Pacific Island), who live independently in the community and are at risk of falling. Participants are assessed regarding their risk of falling before and after the 16 week course.

ACC fully funds provision of Modified Tai Chi in Whanganui through Sport Wanganui, the regional sports trust. Trainers in Whanganui, Waverley, Taumarunui and Marton lead participants through the hour-long class each week for 16 weeks. Additionally ACC has funded basic and advanced training by the Master Trainer Toi Walker for the past two years. This has broadened the reach of Modified Tai Chi as three past participants now offer their own classes for those who wish to continue once the 16 week block is complete.

Masters Games



From 30th February to 8th January 2009, Whanganui hosted the ACC New Zealand Masters Games. This attracted 7,000 participants with 25% aged 60 years or over. Participants compete in a broad range of event, from swimming and clay bird shooting to rock and roll dancing and touch rugby. ACC's prime objective was to reduce injuries by equipping participants with injury prevention messages.

ACC undertook a number of activities to promote key injury prevention messages at different points throughout the Games. These were:

ActiveSmart at www.activesmart.co.nz

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The purpose of promoting ActiveSmart at the Masters Games was to encourage participants to undertake pre-training, thus reducing their chance of injury, and to motivate people to act as ambassadors for our injury prevention messages, by encouraging their friends and family to get active too. ActiveSmart was promoted via:

- ActiveSmart call to action on all registration confirmation letters and emails
- ActiveSmart call to action and links on the ACC New Zealand Masters Games website
- ActiveSmart postcards, posters, and sign up point at the Games Village
- ActiveSmart adverts in Games Registration Book and Handbook

Results from the participant survey show that 74% of participants undertook pre-training for the Games and 79% encouraged friends and family to get active. While this is positive, only 8% (59 of 763 respondents) signed up for an ActiveSmart training plan. 69% of those who signed up used the plan. 18% of survey respondents told friends or family about ActiveSmart or passed information on.

The small number of sign ups to ActiveSmart suggests that participants may well have undertaken a similar amount of pre-training and of encouraging friends and family to get active, with or without the added communications around ActiveSmart.

ACC Life Lounge

The ACC Life Lounge included Safety Begins at Home messages, warm up and warm down information, and an ActiveSmart sign up area. A Nintendo Wii also featured, to attract people to the Lounge and as a vehicle for promoting warm up and warm down stretches. 51% of participant survey respondents rated the ACC Life Lounge as 'excellent', 49% rated it as 'satisfactory'. Nobody rated it as 'disappointing'.

Clicker counters were used to track visitors to the Life Lounge. 1,859 people were 'clicked in' to the Life Lounge, with an average of 207 visitors per day. It is possible that there were some repeat visitors on some days however this number is likely to be small as 23% of respondents to the participant survey reported interacting with ACC at the Games, which equates to 1,598 visitors. Of those who did interact with ACC at the Games, 94% of respondents stated their experience was either excellent or good (62% excellent, 32% good). Only 3% rated the experience as satisfactory and 3% as poor.

While the experience of those that interacted with ACC at the Life Lounge was very positive, the number of visitors on some days was low. Visitor numbers to the Games Village and to the Life Lounge were driven by the event programming, with more visitors on days that activities were scheduled to take place within the village (E.g. salsa, bocce, beach volleyball).

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A full daily programme of activities in the Games Village to ensure steady footfall would be key to the success of any future lounge of this type.

Sports Warm Ups

ACC hired a local fitness instructor to run group warm ups at the most popular sporting events: netball, soccer, and the road run/walk. The aim was to minimise the risk of injuries at these events and to impart key messages on the importance of warm ups and warm downs to staying injury free. ACC staff also visited these and many additional sports and handed out 'Smart Tips' flyers with recommended stretches. These were popular with participants.

Over 500 people took part in the warm ups. The netball warm ups were by far the most successful, with most netball teams participating. St John's recorded 37 injuries from netball out of 491 participants which were treated and then discharged (7.5%). In Dunedin in 2008, netball recorded 146 injuries out of 772 participants (18.9%). While it may appear that the warm ups in Wanganui led to a drop in netball injuries, it is important to note that the injury clinics and injury reporting are set up differently in Wanganui and Dunedin and so the injury statistics are unfortunately not directly comparable between these centres. Netball injury figures for the 2007 Wanganui Games were not collected.

The warm ups proved popular and were cost effective. Improvements could be made to increase participation, by scheduling the warm ups with more of the sports and by

endeavouring to make them a compulsory part of each sports programme.



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Modified Tai Chi

Free Modified Tai Chi classes were offered by ACC every afternoon in the Games Village. These proved so popular that an additional morning class was added to each day. 14 classes were held in total and each class had an average of 51 participants. The classes were delivered by Anne Rose, ACC Programme Manager, and by Toi Walker, Modified Tai Chi Master Trainer. The classes, and the health benefits of Tai Chi, were promoted in the Games Handbook and were advertised daily in the Wanganui Chronicle the week before the Games.

The Games proved to be an excellent vehicle to promote ACC's Tai Chi programme and to actively engage a large number of older people in this beneficial activity, thus helping to improve their balance and to decrease their chance of injury. The activity was also very cost effective as we used existing ACC staff to deliver the classes and the advertising was provided at a reduced rate.

Recall of injury prevention messages

While participation in the ACC activities was good, recall of ACC messages by respondents of the participant survey was disappointing. Only a few respondents (20%) answered the question on what injury prevention messages they could recall seeing or hearing. The following messages were recalled:

Warm up, be safe	11%
ActiveSmart	4%
Thinksafe	2%
Other IP messages	2%
Safety Begins at Home	1%

Free recall survey questions typically receive a much lower response over prompted questions, but this result remains disappointing. The survey was completed the week following the Games and so one would expect memories of the event to be fresh in people's minds. It is possible that some respondents did not make the connection that ACC was responsible for running the Tai Chi, ActiveSmart, or Warm Ups, or that they did not register that this is what the survey was referring to by 'What ACC messages do you recall seeing or hearing?'. One strong and consistent strap line across all collateral and environments would be one possible way to increase cut-through and recall of the key message in the future.

Maori

Whanau Day

Te Puawai Whanau is part of Te Oranganui Iwi Health Authority (TOIHA) and is represented in the Wanganui Child Injury Prevention group. TOIHA instigated Whanau Day as a day for clients to learn more about the services available and invited their colleagues from the CIP group to join in.

Working together the group decided to talk with whanau about child restraints, particularly the use of booster seats for over-fives.

In the venue's car park, Plunket and Te Puawai Whanau Safe2Go technicians checked child restraints while inside the stadium, others talked to carers about the appropriate restraint for their child's height.

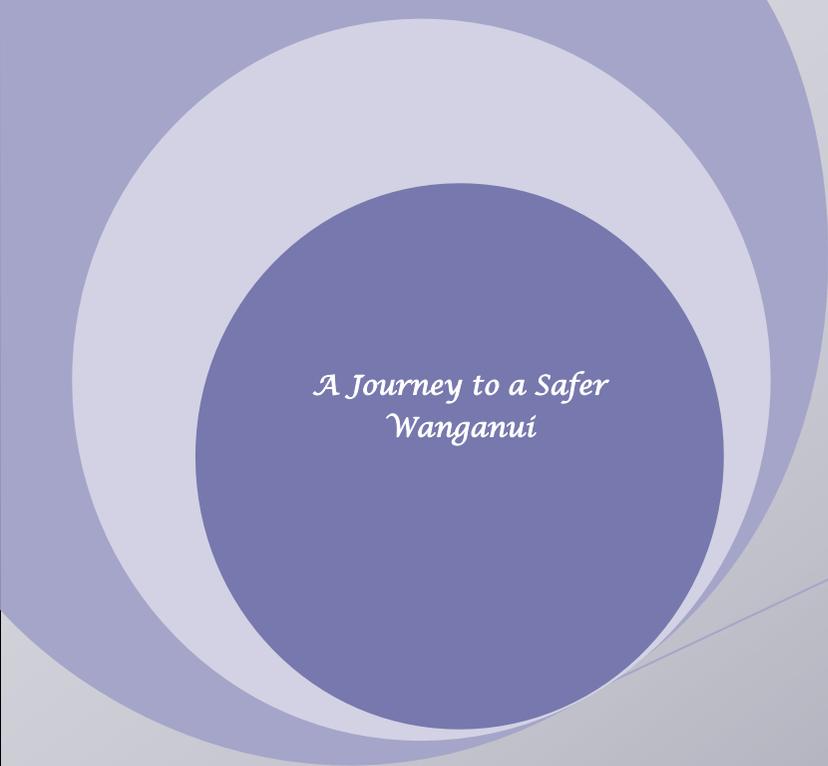
Additionally the team used the theme of child restraints to discuss praise and encouragement, providing a rewards chart to reinforce good in-car behaviour. Overall Whanau Day was deemed a

success. Approximately 180 individuals came along and visited the displays. Organisers were pleased to note that 25 new enrolments were made for oral health care. Child restraints in more than 30 vehicles were checked on the day. Disappointingly all required adjustment of the restraint itself, or how the restraint was being used.

About 50 children were measured and their parents advised on the most appropriate child restraint to provide. Pleasingly a brief quiz

completed by 104 carers attracted 99 correct responses regarding child restraint safety.





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CRITERIA 4:

Programmes that document the frequency
and causes of injuries.

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Information on the frequency and causes of injuries comes from a wide range of sources. Each reference group will use the most appropriate source to capture their data. Often the data will relate to the wider district or region. Additionally, using the Results Based Accountability framework has necessitated looking for, and developing in some cases, more specific local data. This will be discussed in the next section under criterion five. What follows is a brief description of the government agencies which supported the collection and analysis of injury and crime data.

- ACC collates a range of injury-related information, as New Zealand's provider of injury management. Reference groups were able to use the number of new entitlement claims to demonstrate that the trend line was rising. The resulting cost of entitlement claims in Wanganui was another measure to compare progress year to year.
- The Ministry of Social Development (MSD), through the Community and Family Service (FACS), has supplied critical information on the socio-economic status of Wanganui that has been used by many groups to refine their focus in the community. These three Wanganui District profiles (Part One, Part Two and Maori) detail many aspects of the community including injury and crime.
- Data from the New Zealand Health Information Service (NZHIS) was sourced by Otago Injury Prevention Research Unit (IPRU) and used to produce the injury profile for Safer Wanganui. It is based on information collected on discharge from hospital. This data relates to both injuries and injury-related deaths.
- The Road Safety reference group uses data produced by the New Zealand Transport Agency (NZTA). The data is based on traffic crash reports completed by Police each time they attend a crash. There is less information collected about non-injury crashes, as Police are less likely to attend these.
- Wanganui Police meet regularly with Wanganui District Council to discuss local policing activity. Data and intelligence is supplied by Police to a number of forums, for example, intelligence regarding motor vehicle traffic crashes is shared at Wanganui Road Safety Action Plan meetings; crime statistics are presented to the Safer Wanganui steering group and the Safety and Well-Being reference group; call-outs to incidents of family violence are monitored by the Family Violence Intervention Network.
- Department of Labour (DoL), as the enforcement agency for the Health and Safety in Employment Act (1992), collects all data regarding workplace injuries in New Zealand.

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- SafeKids is the lead agency for child injury prevention. As such, they supply a range of injury-related information used by the Child Injury Prevention group in Wanganui. Generally two injury issues are selected each year for particular emphasis.

Safe Community Foundation of New Zealand (SCFNZ) supplied a range of information to Safer Wanganui and the broader community. These included:

- Guide to Developing a Safe Community
- Safe Communities Designation Flowchart
- Fact sheet 2: What is an International Safe Community?
- Fact sheet 38: Profile of Injury Data for Wanganui
- Fact sheet 39: Injury Fatalities by Territorial Land Authority region in New Zealand 2002
- Fact sheet 40: Injury Hospitalisations by Territorial Land Authority region in New Zealand 2004
- Fact sheet 47: Alcohol and Community Safety

Whanganui District Health Board (WDHB) shares information about the frequency of injuries in a number of forums. A recent addition has been access to data on injury-related and alcohol-related presentations to Emergency Department. This data informs the Child Injury Prevention group, the Safety and Well-being reference group and Wanganui YATA.

Injury related deaths

Please note this data includes all fatalities between 2001 and 2005 for people usually living in Wanganui (as territorial land authority), where the principle diagnosis is injury. Values less than three have been omitted to protect privacy.

From 2001 to 2005, 125 people from Wanganui died as the result of an injury, an annual average of 25 deaths.

Motor vehicle crashes were the leading cause of injury-related deaths for the five-year period.

Over half the people killed (61%) were male.

Nearly three-quarters (73%) of people killed were European and a fifth (26%) were Maori.

Most deaths (34%) resulted from injuries at home.

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TOP FIVE INJURY CAUSES for deaths in Wanganui, 2001 – 2005

Motor vehicle traffic	Fall	Poisoning	Suffocation	Drowning
24% (30)	21% (26)	18% (22)	12% (15)	6% (8)

Deaths due to injury in Wanganui by **ETHNICITY**, 2001 – 2005

European	Maori	Pacific	Asian	Other
73% (91)	26% (32)	0% (0)	* *	0% (0)

Ethnicity in Wanganui as reported in the Census, 2006

74%	22%	2%	2%	1%
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TOP FIVE INJURY SCENES for deaths due to injury in Wanganui, 2001 -2005

Home	Road	Residential Institution	Other Specified	Unspecified
34% (42)	27% (34)	12% (15)	12% (15)	6% (7)

Deaths due to injury in Wanganui by **AGE**, 2001 – 2005

0 – 4yrs	5 – 14yrs	15 – 19yrs	20 – 24yrs	25 – 59yrs	Over 60yrs
3% (4)	* *	13% (16)	8% (10)	37% (46)	38% (48)

Age in Wanganui as reported in the Census, 2006

6%	15%	7%	5%	44%	22%
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Injury related hospital discharges

Please note this data includes all discharges from hospital between 2003 and 2007 for people usually resident in Wanganui (as territorial land authority), where the principle diagnosis is injury. It excludes readmissions for the same incident, day patients and fatalities.

From 2003 to 2007, 3675 people from Wanganui were hospitalised as the result of an injury, an annual average of 735 injured people.

Falls were the leading cause of injury-related hospitalisations for each year of the five-year period. Over half the injured people (56%) were male. Nearly three-quarters of the injured people were European and more than a fifth (22%) were Maori. Most injuries (37%) occurred at home.

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TOP FIVE INJURY CAUSES for hospital discharges in Wanganui, 2003 – 2007

Fall	Adverse Effects	Motor Vehicle Traffic	Poisoning	Struck By/Against
36% (1333)	12% (452)	9% (314)	8% (279)	8% (274)

Hospital discharges due to injury in Wanganui by **ETHNICITY**, 2003 – 2007

European	Maori	Pacific	Asian	Other
74% (2728)	22% (811)	2% (75)	1% (32)	1% (29)
<i>Ethnicity in Wanganui as reported in the Census, 2006</i>				
74%	22%	2%	2%	1%

TOP FIVE INJURY SCENES for hospital discharges due to injury in Wanganui, 2003 -2007

Home	School/Other Institution	Road	Unspecified	Sports
39%	17% (623)	13%	9% (323)	7% (274)

Hospital discharges due to injury in Wanganui by **AGE**, 2003 – 2007

0 – 4yrs	5 – 14yrs	15 – 19yrs	20 – 24yrs	25 – 59yrs	Over 60yrs
5%	14%	9% (332)	6% (225)	35%	31%

Age in Wanganui as reported in the Census, 2006

6%	15%	7%	5%	44%	22%



Road Crashes

Annually crash data for the previous five years is analysed and published by the New Zealand Transport Agency (NZTA) as a full report and as Briefing Notes – Road Safety Issues, Wanganui. The full report includes comparison of Wanganui with similar centres in New Zealand, showing trends in injuries and crashes. In the 2009 Briefing Notes, the most significant road safety issues for Wanganui were speed, vulnerable road users, intersections, alcohol and loss of control on bends. These reports provide invaluable information for both monitoring progress, and identifying issues upon which to base this activity. In addition, at reference group meetings, any recent local trends are raised and discussed. These may have been identified from complaints to Council, recent Police activity, new intelligence or issues in similar centres.

More recently NZTA released the Communities at Risk Register (2009) which aligns road safety with Safer Journeys, the road safety strategy for 2010 to 2020. Thirteen areas in which New Zealand needs to strengthen its road safety performance are identified, and then territorial authorities are rated as areas of high concern, medium concern or emerging and continued focus.

For Wanganui District Council, the following are areas of concern:

- Drivers aged 70 years and over
- Restricted licence holders
- Alcohol
- Failure to stop or give way
- Motorcyclists

This model is being used to determine funding allocations through the Land Transport Funding Programme for road safety, although funding categories for 2010/2011 is yet to be announced.

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Crime

Recorded crime

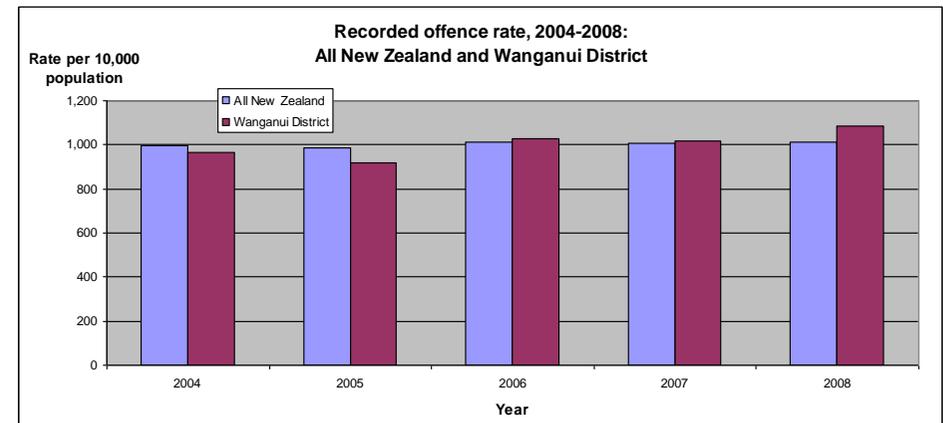
Whanganui district is served by the Wanganui Police Station². From 2004 to 2008, the area served by that police station was estimated to have contained an average of 43,820 residents (1% of New Zealand's estimated population). Over those five years, Wanganui police station recorded an average of 4,393 criminal offences³ each year that is 1% of the country's total.

From around 4,260 in 2004, the number of offences recorded in Wanganui district fell to around 4,030 in 2005. The following year saw a substantial increase to 4,510, before a slight drop to 4,440 the following year. In 2008, Wanganui Police Station recorded a rise in the number of offences, to around 4,710. That total in 2008 was 11% higher than in 2003, compared with a 6% increase across the country over the same five-year period.

² Police administrative boundaries do not necessarily match to territorial authority boundaries. The statistics in this section are from the Wanganui police station. This has been used as the 'scene station' (i.e. the station within whose boundaries criminal offences were recorded by police). This area may not correspond exactly to Wanganui District but it is the best fit available.

³ It is possible that multiple offences will be recorded in association with a single incident. For example, where an occupant is assaulted during a burglary, offences of burglary and assault will both be recorded.

In 2004 and 2005, the recorded offence rate in Wanganui District was slightly lower than the national rate. However, in 2006 and 2007, the district's rate matched and just overtook the national rate. In 2008, the gap between the two rates widened a little (1,083 criminal offences recorded per 10,000 people in Wanganui District compared with 1,011 offences per 10,000 nationwide).



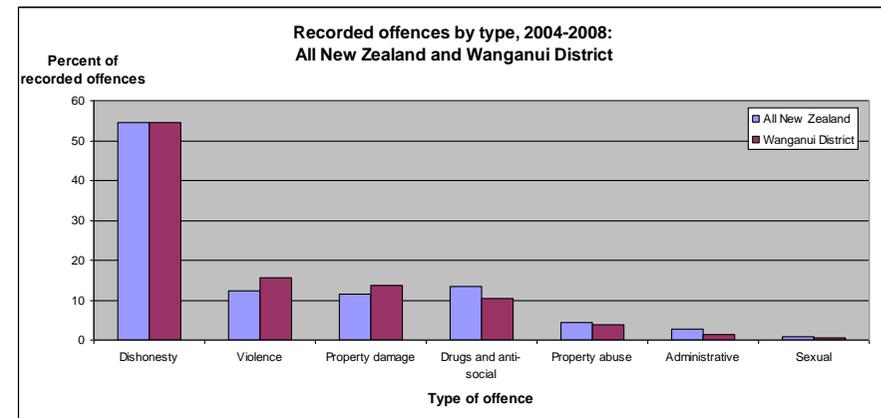
Source: New Zealand Police

In the five years from 2004 to 2008:

- Dishonesty offences were by far the most commonly recorded, making up 54% of the Wanganui total and 55% nationally. Within the dishonesty category, theft was the most commonly recorded offence type, with an average of 1,279 in the district each year. They were followed by 708 burglaries and 311 car conversions.

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- Violent crime accounted for 16% of the offences recorded in Wanganui, a slightly higher proportion than the 12% across New Zealand as a whole. These offences included averages of 271 serious assaults in the district each year, 170 minor assaults and 165 offences of intimidation / threats.
- Property damage made up 14% of Wanganui's recorded criminal offences over the five years (12% nationally). Almost all the property damage consisted of the destruction of property (an average 603 offences recorded in the district each year).
- Drugs and anti-social offences accounted for 10% of Wanganui's recorded crime, a slightly smaller proportion than the 13% across the country. Within this category, disorder offences were the most numerous, averaging 166 each year, followed by 131 cannabis offences.
- Property abuse accounted for 4% of recorded offences locally and nationally. Trespass was the most commonly recorded offence in this category, with an average 100 trespass offences in the district annually.
- Administrative and sexual offences each accounted for 1% of the district's total (3% and 1% nationally).



Source: New Zealand Police

Apprehensions

In 2008, there were almost 2,070 apprehensions of adults (aged 17 and over) in Wanganui. In that year, 83% of them resulted in prosecution (80% nationally); warning or cautioning resolved 12% both locally and nationwide; and 'other' means⁴ resolved 5% (6% nationally). Diversion was hardly used at all in the district, whereas across the country diversion resolved 2% of adult apprehensions.

2008 saw around 640 apprehensions in the district of children and youths under the age of 17 years.

⁴ These means include all the ways police may deal with an apprehension other than the formal categories. For example, they may find that the offender is already in custody, has a mental condition, or has died. In those cases, no further action is taken other to document the offence.

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- Referral to Youth Aid was the main resolution method for under-17 year-olds apprehended by police (49% of the apprehensions of this age group locally and 41% nationally).
- Prosecution was used slightly more than average in the district (26% compared with 23% nationwide).
- 16% of the district's apprehensions of under-17 year-olds were resolved through warning (a considerably smaller proportion than the 28% nationwide).
- Family Group Conferences Youth Justice were used to resolve 5%, the same as nationally.
- 'Other' means accounted for the final 5% in Wanganui (4% across New Zealand).

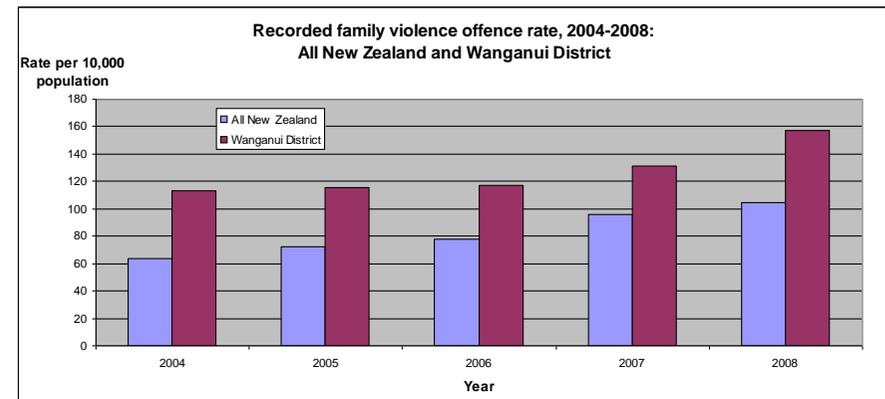
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Family violence

From 2004 to 2008, the Wanganui police station recorded around 2,780 family violence offences – an average of 556 offences recorded in the district each year.

In the three years 2004, 2005 and 2006, the number of family violence offences recorded in Wanganui District stayed around the same level of 500 to 515. In 2007, the number rose to almost 580 before increasing again in 2008 to a little over 680. It should be noted that any change in reported family violence may not reflect just a change in incidence but may also reflect a changed likelihood by the public to report, or an altered propensity by police to classify and record an offence as 'family violence'⁵.

⁵ As Police have given increasing focus to domestic violence over recent years, it is likely that more offences have been recognised and recorded as being domestic violence related than in earlier years. Additionally, Police replaced their crime recording IT system in 2005, making it easier for staff to record an offence as being domestic violence related. The combined effect of these changes is that increases in recorded domestic violence would be expected over time, with a particular step-increase in mid-2005. Police statistics for recorded domestic violence should, therefore, not be used to make inferences about trends in the incidence of domestic violence over time.



Source: NZ Police

In each of the years from 2004 to 2008, Wanganui District's recorded family violence offence rate was considerably higher than the national rate. In most of those five years, the district's rate was around one-and-a-half times the national rate. In 2008, 157 family violence offences were recorded per 10,000 people in Wanganui District compared with 105 per 10,000 nationally.

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Drowning

There were 78 drowning deaths in the Manawatu/Wanganui Region between 1 January 1999 and 31 December 2008. 31 of these occurred in the Wanganui territorial authority's area.

Males are over-presented in these deaths at 84%.

52% of drowning deaths involved 15 to 44 year olds.



Drowning deaths in Wanganui District Council 1999 - 2008

Year	Beaches	Domestic	Home Pool	Inland Still Waters	Offshore	Rivers	Tidal Waters	Total
1999		1	1					2
2000						5		5
2001						1		1
2002	1				1	4		6
2003	1		1			1	1	4
2004						5		5
2005				1		3		4
2006						1		1
2007						2		2
2008					1			1
Total	2	1	2	1	2	22	1	31

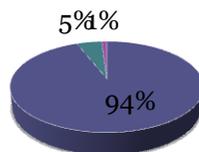
Data: Water Safety New Zealand's DrownBase™

Perception of Safety

In July 2008 the Wanganui District Council commissioned a Community Views Survey that included questions regarding perceptions of safety. These included feelings of safety in the home during both day and night, safety away from home and by suburb. The results are as follows:

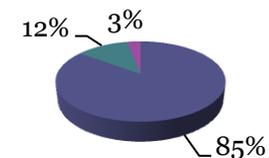
Feeling of Safety at Home - During the day

■ Most of the time ■ Some of the time ■ Seldom



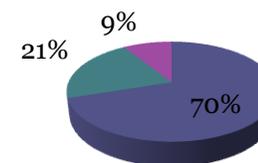
Feeling Safe at Home - During the Night

■ Most of the time ■ Some of the time ■ Seldom



Feel Safe Away from Home

■ Most of the time ■ Some of the time ■ Seldom



The result for feeling safe away from home could be a measure of Safer Wanganui's success, as the scope of the result statement includes "to be in and move around the community all the time".



*A journey to a Safer
Wanganui*

Criteria 5:

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

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As the framework of Safer Wanganui was being developed and refined during 2009, it became evident that using the same evaluation tool across all the groups would be advantageous to gaining accreditation. At the same time, Family and Community Services (FACS from the Ministry of Social Development) renewed a previous offer to facilitate a “local service mapping” (LSM) project in Wanganui. LSM is a cross-sectoral action-planning process designed to improve the lives of families within their community. A LSM steering group was formed with representatives from FACS and it was agreed that while Safer Wanganui would actively participate in the LSM project, FACS would promote and support the use of Results Based Accountability by the reference groups.

Results Based Accountability was created by Mark Friedman, an American public policy expert. It is easy to use and provides a clear, common language for assessing outcomes, indicators and performance measures. It encourages users to think about with whom they can work and how, together, they can work differently to achieve shared outcomes. The model quickly gets participants from talk to action.

Using RBA, Safer Wanganui and the reference groups each developed a report card. This summarised the desired outcome, target population, key indicator and action plan.

Collectively these became Safer Wanganui’s Safety Plan and were published on the FACS website⁶ as the LSM report on 11th December 2009.

At least annually, each reference group will review their progress against the report card and report to Safer Wanganui. This information will be collated and reported to Wanganui District Council through the Community Development Committee. Additionally the online report cards will be updated. Work has been completed and the Safety Plan is now available on the Wanganui District Council’s website.

⁶ (<http://www.familyservices.govt.nz/my-community/making-things-happen/planning/territorial-local-authorities/safe-communities/about-the-project.html>)

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Key indicators are summarised

Group	Key indicator
Road Safety	Number of reported crashes resulting in death or serious injury in Wanganui district
Family Violence	<p>Number of self-referrals to family violence prevention programmes and children's domestic violence programmes</p> <p>Number of elder abuse and neglect cases reported to Age Concern</p> <p>Number of Annual Street Survey forms completed as well as numbers showing increased awareness of what constitutes family violence and where to access help locally</p> <p>Number of requests for information or service regarding family violence from specific Wanganui Family Violence Intervention Network member agencies</p>
Safety & Wellbeing	Number of injury related presentations to Whanganui Hospital's Emergency Department
Alcohol & Other Drugs	Drink driving offences for those aged 24 and under
Emergency Planning	The number of households in Whanganui who are members of a Neighbourhood Support Group
Justice	<p>Potential indicators could include a measure of former inmates who, one year after release from prison, are</p> <ul style="list-style-type: none"> • Free of alcohol and drug abuse • In stable employment • In stable accommodation
Safer Wanganui	Suspension rates in Wanganui Schools

Result Card for Road Safety

The Wanganui Road Safety Action Planning (RSAP) group has been working collaboratively for some years on issues of road safety – encompassing all road users. It is a collaborative group that Safer Wanganui approached and obtained agreement from to become the Road Safety Reference Group.

What we want to achieve (result / outcome)

Wanganui people are responsible road users

Our target population

All road users in the Wanganui district

How we will measure success (indicator)

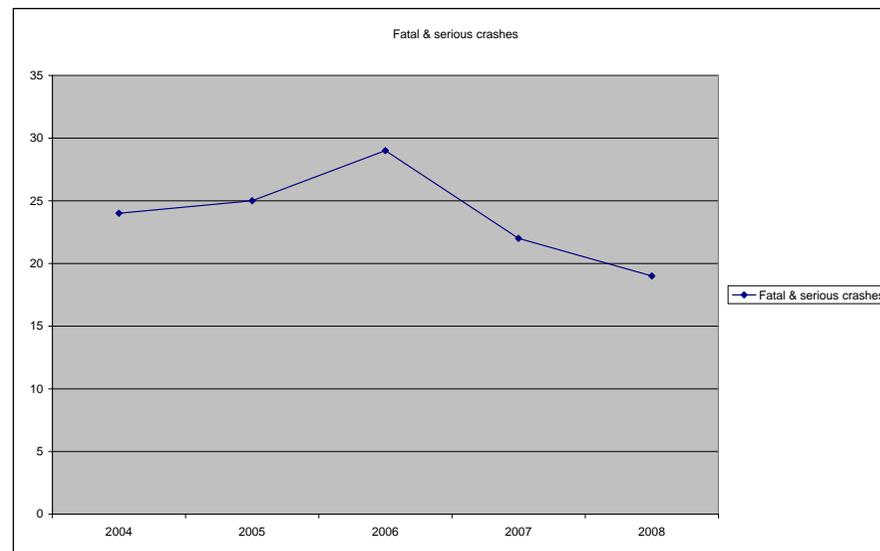
Number of reported crashes resulting in death or serious injury in Wanganui district

This indicator represents the measure agreed by members of Wanganui's Road Safety Action Planning (RSAP) group and is released annually in the Briefing Notes (New Zealand Transport Agency) for the Wanganui district.

It is a powerful measure because fatal and serious injuries are the most costly, both economically and socially.

What the data tells us

Number of Fatal and Serious Crashes in Wanganui District 2004 to 2008



Source: NZ Transport Agency (NZTA)

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The story behind the data

For the last five years, the number of crashes in Wanganui resulting in a death or serious injury has fluctuated from a low of 19 to a high of 29. The crash numbers include all those within the territorial authority.

This data comes from the Crash Analysis System (CAS), which collates information from traffic crash reports completed by Police at the scene. While Police do not attend every crash (that is, non-injury crashes), they do attend fatal and serious injury crashes.

The severity of a crash is determined by the most severely injured casualty in the crash and classified as fatal, serious, or minor as follows:

- Fatal: Injuries that result in death within 30 days of a crash.
- Serious: Fractures, concussion, internal injuries, crushing, severe lacerations, severe general shock requiring medical treatment and any injury requiring transport and admission to hospital.
- Minor: Injuries which require first aid, or cause discomfort or pain to the person injured.

The data is limited in that:

- Only 'on road' crashes are used, that is, crashes on roads that have traffic volume information recorded. Crashes in car parks, reserves, beaches etc are excluded.
- Crash severity is assigned by the Police officer at the scene. However, the casualty's condition may change over time for example, serious injury may not be evident at the scene.

Speed, alcohol, intersections, loss of control on bends and vulnerable road users (that is, motorcyclists, cyclists and pedestrians) are the major road safety issues in Wanganui (*Briefing Notes*, New Zealand Transport Agency, 2008). Underpinning these issues is the overrepresentation of males aged 15 to 24 years in crash data.

Speed: There were 99 speed-related injury crashes and 186 non-injury crashes in the last five years, resulting in 11 deaths and 172 injuries. No consistent reduction in speed-related injury crashes has been observed in the last five years. Additionally the number of speed-related fatal crashes was the highest (3) in five years in 2007. Half the at-fault drivers in speed-related crashes were aged less than 25 years. Eighty percent of these were male.

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Alcohol: Alcohol was recorded in 75 reported injury crashes and 127 non-injury crashes, resulting in 11 deaths and 124 injuries in the last five years. Three-quarters of these crashes occurred on urban roads and mostly at night, although 60% of the fatalities occurred on state highways. Eighty-two percent of at-fault drivers were male.

Intersections: Between 2003 and 2007, 47% of all crashes occurred at intersections. This included 187 injury crashes and 582 non-injury crashes, resulting in three deaths and 253 injuries. Eighty-one percent of intersection crashes occurred on local urban roads. Failure to stop or give way was a factor in 59% of injury crashes at intersections, followed closely by poor observation (50%).

Loss of control at bends: Twenty-seven percent of all crashes involved drivers losing control of their vehicles on bends, resulting in 18 deaths and 234 injuries. Loss of control on bends has been decreasing with the lowest number of fatal and serious injury crashes recorded in 2007. In the last five years, more than half of crashes at bends occurred on urban roads.

Vulnerable road users: A third of injury crashes in Wanganui involved a vulnerable road user. Of the 660 road users injured between 2003 and 2007: 63 were motorcyclists; 50 were cyclists; and 45 were pedestrians. There is an increasing trend in motorcyclist injuries with the total number injured in 2007 (16) the highest in five years.

Our partners

The following agencies are part of the Wanganui Road Safety Action Planning (RSAP) Group:

- Wanganui District Council
- Horizons Regional Council
- Wanganui Police
- ACC
- New Zealand Transport Agency
- Automobile Association
- Whanganui District Health Board.

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What steps we are taking (action plan including data development)

Wanganui District formed a Road Safety Action Plan (RSAP) group charged with developing an annual action plan. This group meets three times each year to strategise and monitor actions.

	Actions	Lead Agency
To be completed by 31 December 2009:		
1	Confirm the major road safety issues for Wanganui for the 2004 to 2008 period through examining the New Zealand Transport Agency's Briefing Notes. This has been achieved.	New Zealand Transport Agency
2	Draft the 2009/2010 Road Safety Action Plan in response to 1 and integrate the following components into the plan: <ul style="list-style-type: none"> • Engineering factors • Education • Enforcement. This has been achieved.	Road Safety Action Plan Group (RSAP)

	Actions	Lead Agency
To be completed by 31 July 2010		
3	Evaluate the 2009/2010 road safety action plan	Wanganui District Council
4	Draft the road safety action plan for 2010 - 2012	Wanganui District Council

Our performance measures (evaluating our work)

The Reference Group will monitor the performance of their collaborative group against the actions and timeline that will be inherent within the 2009/10 Road Safety Strategic and Action Plan that will be drafted.

The Road Safety Action Planning Group meets on 29 June 2010.

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Result card for Family Violence

The family violence sector in Wanganui has a well established network - the Whanganui Family Violence Intervention Network - and key stakeholders have been working together for many years. The Te Rito Project Management Group (TRPMG) which has oversight for the sector, works by its Community Action Plan and it also has oversight of a number of projects. It is this collaborative that Safer Wanganui has approached to be the Family Violence Reference Group.



What we want to achieve (result / outcome)

Wanganui community has increased awareness of what constitutes family violence and its impact, and where to access help

Our target population

All of Wanganui community

How we will measure success (indicator)

Number of self-referrals to family violence prevention programmes and children's domestic violence programmes.

Number of elder abuse and neglect cases reported to Age Concern.

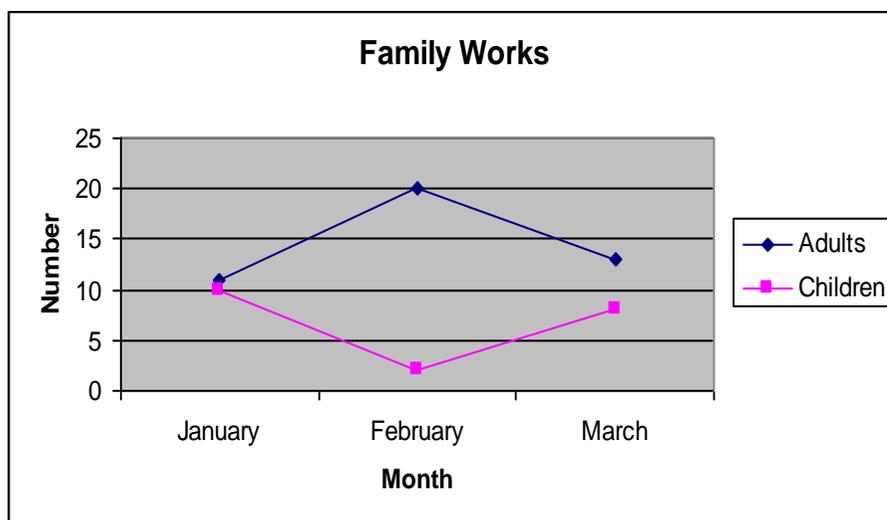
Number of Annual Street Survey forms completed as well as numbers showing increased awareness of what constitutes family violence and where to access help locally.

Number of requests for information or service regarding family violence from specific Whanganui Family Violence Intervention Network member agencies.

What does the data tell us?

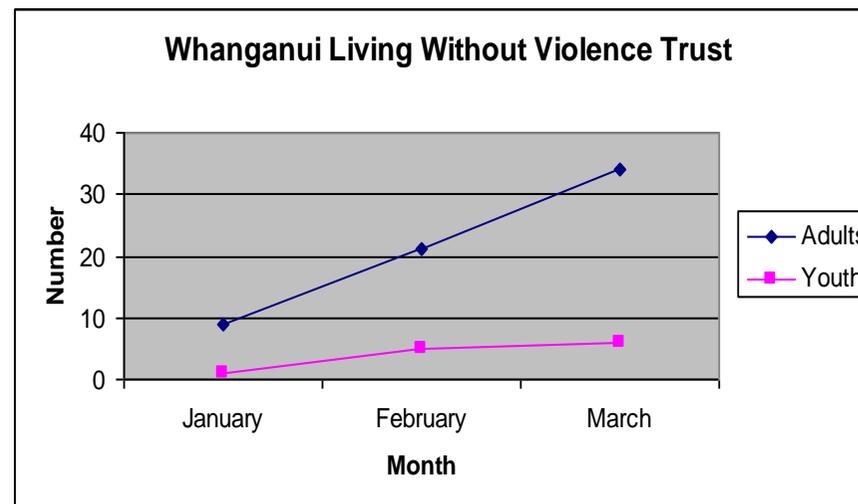
INDICATOR ONE

Referrals to Family Violence Adults and Children's prevention programmes and counselling for family violence issues



There has been a small increase in the overall numbers of families contacting Family Works once the numbers of adults and children have been tallied together. Trends noted include a higher number of single parent mothers needing support with managing their sons'

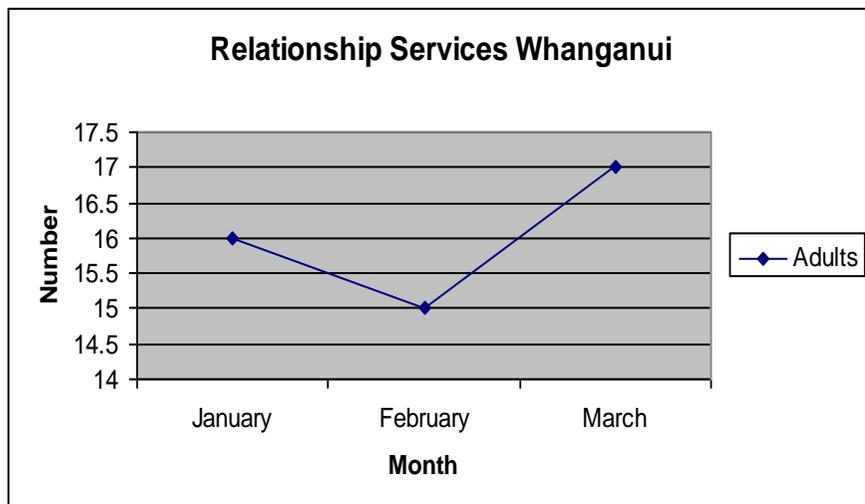
behaviour and a greater number of families naming financial stress as one of the significant factors in their family dynamics.



There has been a clear overall increase in the numbers of referrals received by Whanganui Living Without Violence Trust. The context for this increase could be as a result of higher number of Police arrests across the Christmas period which will have filtered down through the court system, increasing the number of referrals from Family Court and Community Probation to this agency by March. There is also an annual peak in referrals in March.

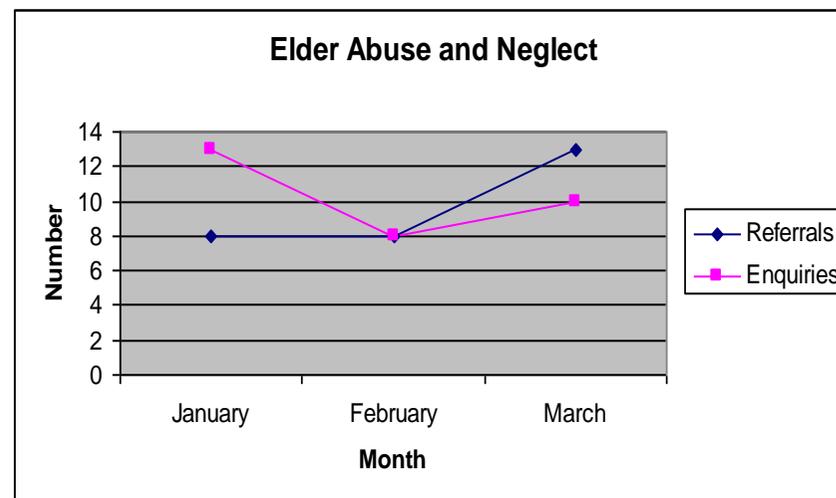
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Across the three months Relationship Services has experienced an overall rise in referrals received.



INDICATOR TWO

Elder Abuse and Neglect Prevention Referrals and Enquiries



The numbers of referrals and enquiries received by the Elder Abuse and Neglect Coordinator has not experienced much significant change throughout this period. Trends noted by the Coordinator across this period include an increase in power and control issues, psychological and financial abuse, and Enduring Power of Attorney abuse.

INDICATOR THREE

Annual Street Survey

The annual Street Survey was held on 7 and 10 May, 2010 as planned. 183 people were surveyed. Collation of this data is underway and will be made available once analysed.

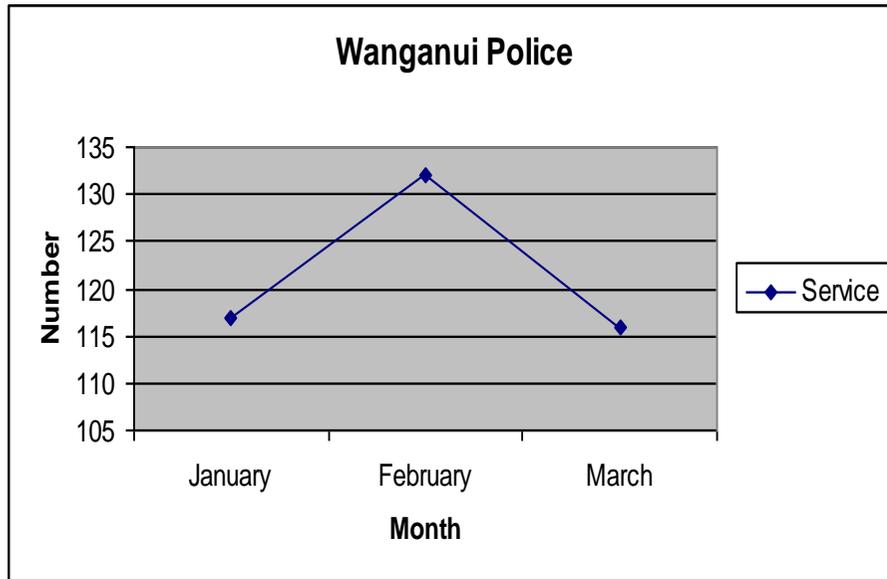
INDICATOR FOUR

Requests for Service and Information

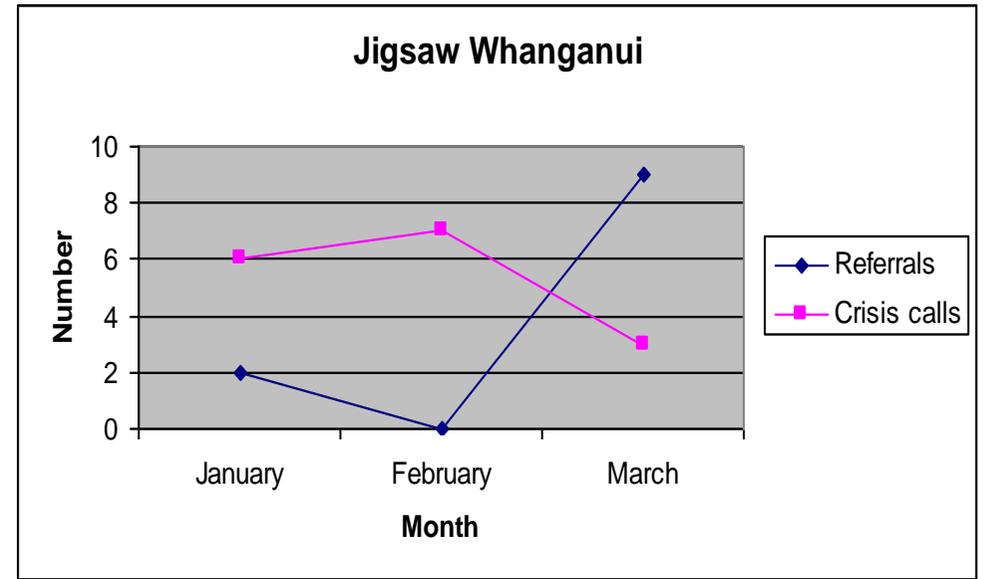
The Child Advocate experienced a significant increase in the numbers of children referred to this service across this period. It was noted that there was an increasing number of mothers of young children (from birth to four years of age) and advice sought by a significant number of either pregnant or newly delivered women. The Child Advocate reported an increasing number of agencies referring to the service which indicates potentially both a higher need in the community and/or greater awareness of the services she provides.



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The numbers of people calling the Police for crisis support throughout this period increased in February but overall is about the same.



When the two sets of data are combined, Jigsaw Whanganui has experienced an overall increase in the amount of activity each month.

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Story behind the data

The indicators were chosen for the following reasons:

Indicator One has been chosen to record the numbers of people accessing prevention services because voluntary access of services indicates some responsibility has been taken to deliberately seek information. It is hoped that this number will continue to rise across the years, taking into account the national Police research that only 18% of people currently experiencing family violence are seeking help. To break the intergenerational cycle of family violence, more people experiencing family violence need to access professional help.

Indicator Two has been included to help broaden the understanding of family violence. Elder abuse has not traditionally been monitored in the family violence arena. Education on recognising elder abuse, its impact, where to access help has begun in the wider family violence networks. Generally this area is underreported so it will be interesting to note the level of referrals as a result of proactive community education. This data is a valuable proxy for levels of abuse of vulnerable people within families.

Indicator Three was measuring the knowledge of “the person on the street” in Wanganui. The attitudes and knowledge of community members helps to highlight gaps to which the Network can then respond. This project uses a simple street survey of a random sample of people. It is conducted by members of the Whanganui Family Violence Intervention Network with a set process. An annual street survey was also conducted in 2008.

Indicator Four was chosen for inclusion as a measure to sample the community’s awareness of where to access help, and their possible intention to access help in the future. Three agencies have offered to be involved in tracking requests for service. These are the Advocate for Children and Young People Who Witness Family Violence, Wanganui Police and Family Support Services Whanganui Trust.

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Our Partners

The following list of agencies are involved in the Te Rito Project Management Group. This has oversight and responsibility for the five year strategic action plan to reduce tolerance of family violence.

- Advocate for Children and Young People Who Witness Family Violence (Child's Advocate)
- Age Concern
- Community Probation Service
- Child, Youth and Family
- Family Works Whanganui
- Family Support Services Whanganui Trust
- Housing New Zealand
- Nga Tai O Te Awa
- Police
- Relationship Services
- Tupoho Iwi and Community Social Services Trust
- Whanganui District Health Board
- Whanganui Living Without Violence Trust
- Whanganui Regional Primary Health Organisation
- Work and Income

A new partner to this project includes a representative from Te Oranganui Iwi Health Authority, as well as a potential partner from Group Special Education, Ministry of Education. A previous contributor from Wanganui District Council has returned to the Network.

What steps we are taking (actions, including data development)

As agreed in the Te Rito project, data has been collected monthly from January to March 2010. This report includes the collated data in the graphs above. This is the first quarterly report provided. The regularity of these reports may need to be re-evaluated due to the amount of time needed to collate and write up this report which has consequences for other priority tasks of the Te Rito project. We are currently awaiting the Government's announcement on 20 May of the annual budget to confirm whether the Te Rito project will continue to have a paid Project Manager or not and what the consequences to the project will be.

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Data development continues to be the priority action for each indicator at this initial stage of the project:

	Actions	Lead Agency
The following data is to be collected monthly commencing January 2010 and reported on three monthly commencing March 2010:		
1.	<i>Indicator 1:</i> The three lead agencies involved are to begin sending in their data each month (to the Te Rito Project Manager) on the numbers of referrals for service (including self-referrals, re-referrals, and referrals by agencies etc). This has been achieved.	Family Works, Relationship Services and Living Without Violence
2.	<i>Indicator 2:</i> Age Concern will send in their data each month to the Te Rito Project Manager of the number of referrals for service. This has been achieved.	Age Concern

	Actions	Lead Agency
3.	<i>Indicator 3:</i> Te Rito Project Manager will coordinate a project group to survey members of the community using a set process with a Survey form in February or March of 2010 and following years. Survey results from 2008 and 2009 could be used to set up a format to measure how many surveys identified a comprehensive understanding of Family Violence (e.g. inclusion of physical and psychological violence or threats of these). This has been achieved.	Te Rito Project Manager
4.	<i>Indicator 4:</i> Three organisations/roles have offered to be involved in tracking requests for service – Advocate for Children and Young People Who Witness Family Violence, Wanganui Police, Family Support Services Whanganui Trust. This would be reported in as a bulk number monthly to the Te Rito Project Manager. This has been achieved.	Te Rito Project Manager

Our performance measures (evaluating our work)

The Reference Group has decided to include one performance measure – agency attendance at monthly monitoring and development meetings.

These meetings will become part of the regular Te Rito Project Management monthly meetings. This measure would be a proxy to engagement in the above action plan.

To date, agency attendance has been as follows.

- There was no meeting in January.
- In February, 15 out of 18 agencies were represented.
- In March 2010, 10 out of 18 agencies attended. This drop in attendance can partially be explained by sickness or annual leave.

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Result Card for Safety and Wellbeing

The Safety and Wellbeing Reference Group is the group responsible for this focus area. It is a newly formed collaborative, which includes a number of other collaborative forums such as Strengthening Families and Child Injury Prevention Group (CIPG). A number of the individual partner agencies have submitted strategic statements of alignment to demonstrate the interconnectivity of their own work to the outcomes to be achieved in the Safer Wanganui project. Largely through the work of the CIPG, an interim result card was drafted for the Safety Plan in 2009. Work in 2010 has meant re-shaping this result card to better reflect the intent of the Safety and Wellbeing reference group.

What we want to achieve (result / outcome)

Whanganui working together to create and sustain a healthy and safe environment in which all people are strengthened and nurtured

Our target population

All people in Wanganui

How we will measure success (indicator)

- 1 Crime rate in Whanganui
- 2 The number of injury-related presentations to Whanganui Hospital's Emergency Department

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What the data tells us

The data for the two indicators is yet to be sourced and put into an appropriate format.

Information of injury-related presentation to Emergency Department has only recently become available from Wanganui Hospital so additional work is still required.

Our partners

The partners to this focus area are listed below, with the expectation that more partners will join the group as the project evolves:

- Wanganui Police
- New Zealand Fire Service
- Whanganui District Health Board
- Wanganui Child Injury Prevention group
- ACC
- Whanganui Regional Primary Health Organisation
- Wanganui District Council
- Age Concern
- Older People's Forum
- Neighbourhood Support Group
- Community Patrol

In terms of the first indicator, Neighbourhood Support is working with Police to identify the most representative data.

The story behind the data

Once the data sources and formats have been determined, this section can be completed.

- Work and Income
- Maori Women's Welfare League
- Sport Wanganui
- Aotea Kohanga Reo
- Whanganui Disability Resource Centre
- Community Taskforce on Youth Wellbeing
- Wanganui Kindergarten Association
- Horizons Regional Council
- Maori Wardens
- Christian Social Services

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What steps we are taking (including data)

	Actions	Lead Agency
To be completed by 31 December 2009:		
1	The Reference Group currently covers a broad spectrum of safety and wellbeing organisations. Working groups will be established underneath the Reference Group structure to promote and divide the focus and work into sub-sections e.g. sport, work, and home and therefore assist with developing targeted action planning under those specific areas. This has been achieved.	ACC
To be completed by 30 June 2010:		
2	Data development: Questions relating to safety in the Council's 'Community View's Survey' are reviewed for annual consistency. This will create robust comparable annual data which will be used by the Reference Group to develop and implement actions targeted to areas / perceptions of need that are identified in the survey. This was not achieved.	Wanganui District Council staff and Safer Wanganui steering group

	Actions	Lead Agency
3	Data development: As part of the above action, the Council and Family Violence Reference Group will develop a question for the Community Views Survey that directly relates to family violence. This sits with the Family Violence reference group.	Wanganui District Council staff together with the Family Violence Reference Group
4	Use the Results Based Accountability approach to develop, use and evaluate the success of the 2009 <i>Safety New Zealand Week in Wanganui</i> project so that this week can effectively support Wanganui residents to maintain safe homes. This has been achieved.	ACC

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	Actions	Lead Agency
To be completed by 31 December 2010		
5	Data development: Determine representative data and format for two indicators.	Whanganui District Health Board & Neighbourhood Support
6	Promote and support increased participation in Neighbourhood Support Group (NSG) – <ul style="list-style-type: none"> • Households • Business • Junior 	Neighbourhood Support Group
7	Support and participate in the proposed Youth Expo	Youth Committee

Our performance measures (evaluating our work)

The Reference Group has decided to include one performance measure relating specifically to the 2009 *Safety New Zealand Week in Wanganui* campaign. Although the remainder of this Result Card is therefore dedicated solely to that campaign, the performance measure does relate directly back to the high level population result. This result card for the 2009 campaign is available online at <http://www.familyservices.govt.nz/my-community/making-things-happen/planning/territorial-local-authorities/safe-communities/>

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Result Card for Alcohol and Other Drugs

The main work to date for this focus area has been carried out by the Whanganui Youth Access to Alcohol (YATA) network, which has a client focus of young people and their communities. The membership and areas of focus for this Reference Group is likely to expand by January 2011.

Whanganui YATA will be developing a strategic statement of alignment to demonstrate its identified goals are interconnected with that of the overarching Safer Wanganui project.

What do we want to achieve (result / outcome?)

Young people in Whanganui are free from alcohol related harm

Our target population

Young people in Whanganui aged 12–24 years, and their communities in Whanganui

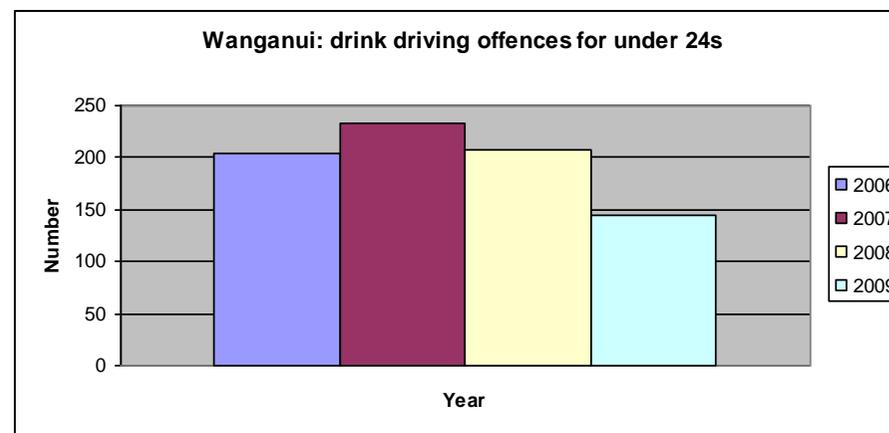
How we will measure success (indicator)

Drink driving offences for those aged 24 and under

What the data tells us

This indicator is important because it shows the number of young people (24 years and under) who have been caught by Police while driving with an alcohol level above the legal limit in Wanganui. At above the legal breath alcohol level, judgment is impaired which may impact on the young person's behaviour and their decision making and result in harmful consequences.

Drink Driving Offences in Wanganui, 24 years and under, 2006 to 2009



Source: Wanganui Police

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The story behind the data

The data demonstrates that some young people are making negative choices about drinking including a lack of consideration for the potentially tragic impacts of these decisions.

The data also indicates that there is a mindset amongst some young people that it is still okay to drink to excess and then drive and that adult supervision may be cursory or absent in some cases. Role modelling of responsible drinking may not be present in all young people's lives.

The number of young people continuing to drink and drive indicates that accessible alternatives to drink driving may not be readily available.

There are limitations within this baseline data – it relates only to those young people caught by Police. It is limited by the resources Police can give to policing drink driving.

Data for 2009 is currently incomplete.

The Reference Group would like to add a second measurable indicator in the near future – 'Alcohol-related presentations for young people to WDHB Emergency Department'. Work is underway

with the DHB and Whanganui YATA to begin discussions about data development in this area, as noted in the action plan below.

Work with young people	Foster collaborative relationships	Enable culture change related to alcohol use
Meaningful youth participation	A range of relevant stakeholders actively participate in our work	Successful project management of campaigns
Great relationships with Whanganui young people and their communities	Strong links with <i>Safer Wanganui</i>	Evaluation used to inform future directions

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Current strategies

Whanganui already has the following actions in place to address issues regarding young people and misuse of alcohol:

- Re-invigorating Students Against Drunk Driving (SADD) at some local high schools
- High on Life: a programme which supports secondary schools to minimise alcohol and drug-related harm to young people
- Wanganui District Council's liquor licensing of on- and off-licence premises
- Controlled Purchase Operation (CPO): monitoring of on- and off-licence premises through both enforcement and monitoring CPO
- Personal health initiatives such as:
 - Counselling and/or social worker in schools
 - Health services at the Youth Services Trust
 - Sexual health services at Family Planning
 - Alcohol and Other Drugs Service at WDHB
 - Hapai Mauri Tangata at Te Oranganui
- Youth Education Service, Wanganui Police: working with young people under 16
- Wanganui District Council's Youth Committee: council-initiated youth representation
- Horizons RoadSafe (see Road Safety focus area)
- Youth Offending Team.

Our partners

The following organisations currently participate in Whanganui Youth Access to Alcohol (YATA):

- Community Action on Youth and Drugs
- Road Safety Coordinator, Horizons Regional Council
- Public Health Service, Whanganui District Health Board
- YMCA
- Wanganui District Council
- ACC
- Alcohol & Other Drugs Service
- Liquor Licensing, Wanganui Police
- Hospitality Association New Zealand
- Youth Education Services, Wanganui Police
- Wanganui District Council's Youth Committee.

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***What steps we are taking (action plan,
including data development)***

	Actions	Lead Agency
<i>Short Term</i> (commencing March 2010):		
1	Using existing networks, engage young people and their communities in discussions about alcohol and its impact, with emphasis on those most affected and at risk	CAYAD and Public Health Service
2	Data development: Whanganui YATA and WDHB would like to start measuring 'Alcohol related presentations for young people to WDHB Emergency Department' as a key indicator for this Reference Group. This work will be aligned with pilots around the country working to capture data on alcohol-related harm at Emergency Departments.	Whanganui YATA and Whanganui District Health Board (WDHB)

	Actions	Lead Agency
<i>Long Term</i> (commencing January 2011)		
3	Provide parents with the information and tools to make positive decisions about their young people and alcohol.	Whanganui YATA
4	Continue to engage with the community to develop a local strategy for alcohol and build on the work from this initial Action Plan.	Public Health Service, WDHB
5	Continue to advocate to central and local government around supply control.	Whanganui YATA

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Our performance measures (evaluating our work)

For the first year, the Reference Group has the following timeline set up to ensure that the above Action Plan is completed. They will measure their performance against this timeline of forums.

OCTOBER 2009 <ul style="list-style-type: none"> • YATA Meeting • Law Commission Submission 	NOVEMBER 2009 <ul style="list-style-type: none"> • Application for funding 	DECEMBER 2009 <ul style="list-style-type: none"> • YATA Meeting • Monitoring Controlled Purchase Operation (CPO)
JANUARY 2010 <ul style="list-style-type: none"> • Preparation for Focus Groups 	FEBRUARY 2010 <ul style="list-style-type: none"> • YATA Meeting • Preparation for Focus Groups 	MARCH 2010 <ul style="list-style-type: none"> • Focus groups occur
APRIL 2010 <ul style="list-style-type: none"> • Focus groups occur • YATA Meeting 	MAY 2010 <ul style="list-style-type: none"> • Analysis of data from focus groups 	JUNE 2010 <ul style="list-style-type: none"> • Analysis of data from focus groups • YATA Meeting • Monitoring CPO
JULY 2010 <ul style="list-style-type: none"> • Youth Governance group established • Project planning 	AUGUST 2010 <ul style="list-style-type: none"> • Youth Governance group established • Project planning • YATA Meeting 	SEPTEMBER 2010 <ul style="list-style-type: none"> • Youth Governance group established • Project planning

Events have overtaken this timeline. Work in late 2009 elicited a very poor response to invitations to participate in a youth focus group. Additionally a recent application to the Community Action on Alcohol Fund to support development of a local alcohol accord was unsuccessful.

As a result, Whanganui YATA is re-thinking its strategy for the future. One outcome has been to use existing youth networks as focus groups to discuss alcohol related harm. CAYAD, YMCA and the Early Intervention Practitioner (WDHB) already have access to young people so can use these networks to facilitate this discussion. Secondly there is now support from the Whanganui District Council to draft an alcohol strategy. Other agencies, notably Whanganui District Health Board, YATA and ACC, were already supportive of such a move. With this greater impetus, Whanganui YATA is uniquely placed to co-lead or co-facilitate this work.

Result Card for Emergency Planning

The Wanganui Emergency Management Committee (WEMC) is an existing multi-agency group which forms this Reference Group. This group meets quarterly and its role is to:

- Improve the local (District) integration, coordination and communication at all levels between all key emergency management agencies.
- Coordinate local resources for the planning needs of a variety of local emergency management issues, such as Hazardous Substances Technical Liaison Committees.
- Provide planning support and advices to Civil Defence Emergency
- Ensure alignment when preparing District Response and Recovery Plans alongside Reference Group action plan
- Provide advice and appropriate assistance to the Controller, the Emergency Operations centre and the Recovery Manager.

What we want to achieve (result / outcome)

Whanganui people are able to manage for at least three days on their own in times of emergency

Our target population

All people in Wanganui, including those who live here, visit or are passing through

How we will measure success (indicator)

The number of households in Whanganui who are members of a Neighbourhood Support Group

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What the data tells us

Wanganui District Council's annual Community Views Survey interviewed 410 residents in July 2009. 80% of respondents reported that they can survive for three days or more. Similarly in October 2009, Horizons Regional Council ran a similar survey where, of 210 Wanganui residents, 84% of respondents said that they could survive for three days or more.

While the Emergency Manager was surprised at the very high levels, it may be that questions in the surveys need refining to include detail about what a household / business / agency would typically require in order surviving this period of time, unassisted.

WEMC decided to align its awareness raising activity with the Neighbourhood Support Group, as this is an established network with ready access to households. Collecting and collating this data into an appropriate format is ongoing.

Our Partners

The following organisations are members of the Wanganui Emergency Management Committee:

- Wanganui District Council (Chair)
- Chorus
- Defence
- Department of Conservation
- EnviroHaz
- GasNet
- Mid Central Public Health Protection
- Ministry of Civil Defence Emergency Management
- Ministry of Social Development
- Wanganui Fire Service
- Wanganui Police
- Powerco
- Red Cross
- Whanganui District Health Board
- St Johns

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***What steps we are taking (action plan,
including data development)***

	Action	Lead agency
1	The Emergency Manager has indicated that WEMC would like to contribute to the Safer Wanganui Safety Plan. At their November 2009 meeting, the Committee received a formal briefing on Safer Wanganui project, its framework, purpose, the accreditation process and an update on progress. This has been achieved.	Wanganui District Council
2	The Reference Group will then be taken through the Results Based Accountability process to enable indicators to be selected and to create a collaborative action plan which will become part of the Safer Wanganui Safety Plan. This is expected to be completed by 30 April 2010. This has been achieved.	Safer Wanganui steering group and Wanganui District Council
3	Data development: Collecting and collating this data into an appropriate format	Neighbourhood Support

	Action	Lead agency
4	Promote and support increased participation in Neighbourhood Support Group for both households and business	WEMC
5	Develop a pamphlet that all partners can use when they go into homes	WEMC

Result Card for Justice

The Justice Reference Group is a newly formed collaborative and welcomes new partners in the sector to get involved. The partners recognise the need to gain a collective understanding of how prisoner reintegration into Whanganui affects its communities. The perceptions around this issue are wide in their variation and yet there is currently no hard data upon which to form a common understanding. The group had a lot of passion and energy around developing a deeper, collaborative understanding of the sector, with a specific focus on developing positive prisoner reintegration over time.

One of the key partners, the Department of Corrections, has a statement of alignment to the Safer Wanganui goals, in its Strategic Plan 2008-2013: *'...[that] the fundamental purpose is improving public safety... responsible for ensuring sentence compliance and reducing reoffending'*.

What we want to achieve (result / outcome)

People released from Wanganui Prison and their families / whānau are positively reintegrated into the Wanganui community

Our target population

People released from Wanganui Prison and their families / whānau

How we will measure success (indicator)

Partners expect that the data collected during the first action stage of data development will help them to select an indicator to measure progress against the desired result. Potential indicators could be the percentage of former inmates who after one year of being released from prison are:

- free of alcohol and drug abuse
- in stable employment
- in stable accommodation

What the data tells us

The data that exists currently about prisoner reintegration is held separately by different organisations in Wanganui and does not provide a full picture of how well former inmates are integrating into the community over time. Nor does it provide information on:

- what reintegration services former inmates and their families/whanau are accessing
- the number of families/whanau who require support whilst their family/whanau member is in prison
- the nature of issues surrounding reintegration for former inmates

As such, the priority action for 2010 will focus on collaborative data development which will enable the Reference Group to select an indicator to measure progress during 2011.

The story behind the data

What are the stories of success?

- Families / whānau of inmates are well supported / resourced prior to the inmate's release – this must be the combined work of government, non-government, and Iwi / Māori organisations
- The inmate's needs are identified and supported prior to, and upon release – alcohol and drug abuse, mental health,

income / employment / stable accommodation, relationship / positive social structure (etc).

What are the stories of people not successful?

- The large numbers of inmates that receive sentences of two years or less are not eligible for rehabilitative programmes whilst in prison so all the criminogenic issues such as alcohol/drug misuse, mental health issues, anger management and relationship issues etc continue upon release into the community
- Positive reintegration can be affected by lack or type of support / social structures upon release. These issues have to be addressed in the community where competing resources / external peer pressure/gang connections make this difficult to maintain.
- Released into the community where only supports are other released inmates
- Affected by lack or type of employment/income/accommodation upon release.

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Our partners

Partners include but will not be limited to:

- Wanganui Prison
- Community Probation and Psychological Service
- Wanganui Police
- Prisoners Aid and Rehabilitation Society
- Wanganui District Council
- Restorative Justice
- Youth Offending Team
- Youth Justice
- Child, Youth and Family Service
- Regional Community Forensics
- Māori Wardens.

Other partners to invite into the project include (but are not limited to):

- Work and Income
- Whanganui Primary Health Organisation.

What steps we are taking (actions, including data development)

	Action	Lead agency
1.	Data development: The group will develop a new forum for working together. The first priority will be creating an agreed system of data collection and collation across government, non-government and Iwi organisations who work with the target population. Data development will enable a deeper understanding of the nature of reintegration issues for people released from Kaitoke prison, and their families / whānau in terms of integrating into Wanganui. Building a set of robust data will inform the next actions in the longer term (i.e. from January 2011) and will allow the group to measure progress.	Community Probation and Psychological Service

SAFER WANGANUI

Result Card for Safer Wanganui

The Safer Wanganui steering group is the group responsible for this focus area. The Ministry of Education, in its own work plan, is focusing on lowering the suspension and stand down rates in Wanganui, particularly for Māori students. It is recognised that to make sustained improvement, a diverse variety of community / government / non government partners need to work on reducing suspension rates in Wanganui schools – both collaboratively towards their own goals and those of this project. It is recognised too, that the success of this work depends on commitment at management level to support operational level actions.

At first glance, an indicator measuring school suspension rates seems incongruous with the overall goals of injury and crime prevention. However in the process of applying Results Based Accountability, one question to consider is “what will it take to get there?” In most of the groups there followed discussion about providing a positive and nurturing education. When asked “what are the stories of people who are not successful?” discussion often focussed on lack of engagement in learning. As a consequence, Safer Wanganui saw the value of using a measure around engagement in learning as an indicator of the community’s health and safety in its broadest sense.

What we want to achieve (result / outcome)

All school aged children and young people are actively engaged in learning

Our target population

All children and young people in Wanganui aged 5 to 18 years of age

How we will measure success (indicator)

Suspension rates in Wanganui Schools

SAFER WANGANUI

The Safer Wanganui steering group has selected to use suspension rates of Wanganui students of all ages because research indicates that:

- Attendance and 'opportunity to learn' strongly influences student outcomes
- Full engagement with learning is an essential pathway to lifelong success.

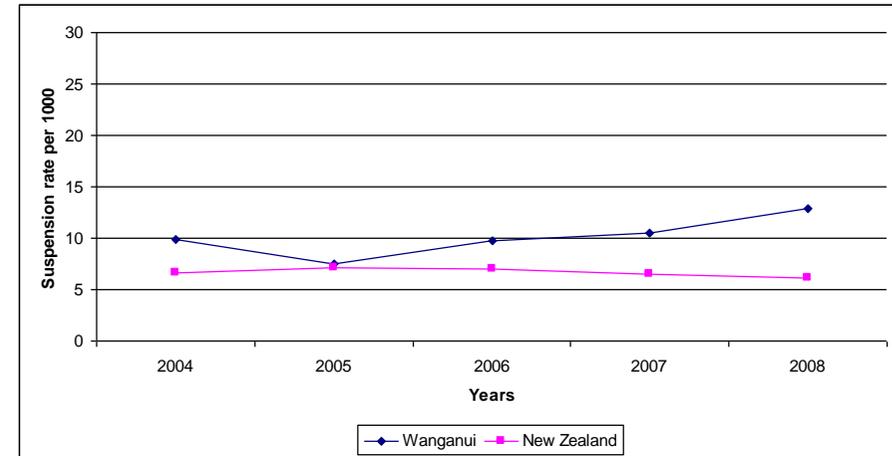
The New Zealand Smithfield study found student attendance during Year 11 to be one of the most significant variables influencing student achievement in senior secondary school. Hattie (1999)⁷⁷ reported instructional quantity to have the fourth highest effect size of any instructional variable. Absence from school interrupts potential opportunities to learn at school.

What the data tells us

In 2008 Wanganui total suspension rates, Māori suspension rates, male and female student suspension rates and suspension rates for each age from 10 to 15 year olds were above national rates.

⁷⁷ Hattie, J. (April 1999). *Influences on student learning*. Inaugural Professorial Lecture, University of Auckland.

Age Standardised Overall Suspension Rates, Wanganui and New Zealand, 2004 to 2008

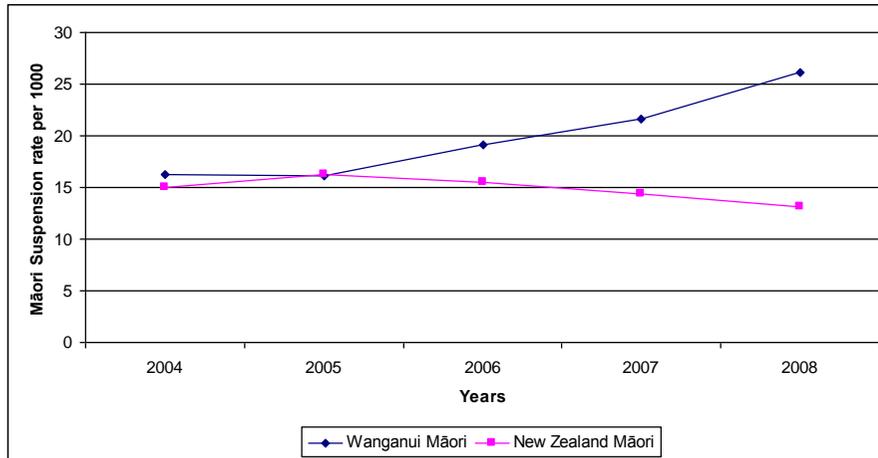


Source: Ministry of Education

Although national suspension rates have changed little from 2004, Figure 1 shows that Wanganui suspension rates have been rising since 2005. In 2008 the Wanganui rates were more than double the national rates.

SAFER WANGANUI

Age Standardised Māori Suspension Rates, Wanganui and New Zealand, 2004 to 2008



Source: Ministry of Education

From 2004 to 2008, the average proportions of 'Continual Disobedience' cases for non-Māori were higher than for Māori. 'Physical Assault' cases for Māori were higher than non-Māori. The average proportion of 'Other Harmful or Dangerous Behaviour' cases for Māori and non-Māori were similar.

Māori students are overrepresented in the statistics by around 10 students per 1000. In 2003 Wanganui Māori suspension rates were below national Māori rates. By 2008 the Wanganui rate had risen to almost double the national Māori suspension rate.

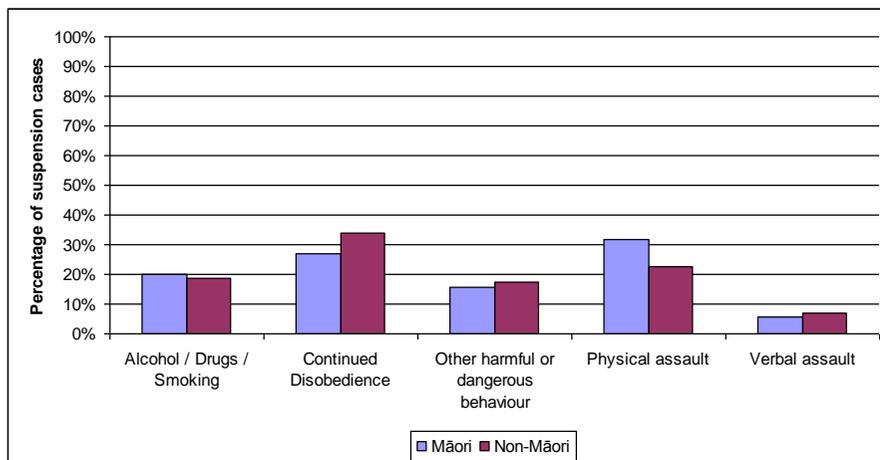
Behaviour resulting in suspension

Although individual Boards of Trustees function at their own discretion, if they do choose to invoke a suspension they must categorise the reason why within the following Ministry of Education groupings:

- Alcohol / drugs / smoking
- Continual disobedience
- Other harmful or dangerous behaviour
- Physical assault
- Verbal assault

SAFER WANGANUI

Average Percentage of Wanganui Suspension Cases Across Behaviour, Māori and Non-Māori, 2004 to 2008



Source: Ministry of Education

It is recognised that the work of this project will also need to explore and analyse data on the lead up to a student being suspended – what measures were put in place by the schools, to avoid resorting to suspension. This will assist with understanding the full picture (the story behind the data), including which strategies are more successful than others, to avoiding suspension, as per geographical area / school cluster.

Story behind the data

School Boards of Trustees are responsible for the safety of all students. Behaviours that individual Boards define as unacceptable to the maintenance of safety of students may eventually invoke a response to utilise stand down and suspension legislation by a principal and her/his Board.

A suspension is the last step in a student management strategy as it results in an interruption to learning. It also impacts on the student's household.

Whilst suspensions impact on actual opportunity to learn they are also associated with a range of youth behaviours that are concerning, including drug and alcohol abuse and various forms of violence that are disruptive to the learning of the individuals concerned and disruptive and unsafe for peers in the school community.

International research on managing student behaviour emphasises the importance of proactive partnerships with parents / caregivers and a strategy focussed on both achievement and behaviour. Approaches that are focused on only disciplinary or pastoral responses have been found to be ineffective for positive outcomes for students involved in UK and Australian research.

SAFER WANGANUI

At a local level in Wanganui, there is currently little information available about what measures are being put in place by schools to avoid resorting to suspension, and what strategies lead to the most successful results. The initial focus of this action plan will be to gather this information, so that partners can identify how they can work together to reduce suspension rates and engage all school-aged children and young people in learning.

Our partners

The partners currently involved in this work include:

- Wanganui District Council
- Ministry of Education
- Wanganui Police
- Horizons Regional Council
- Iwi
- ACC
- Whanganui District Health Board
- Sport Wanganui
- Ministry of Social Development.

A number of other partners will be invited to become part of this work, including (but not limited to):

- Schools
- Principals Association
- Māori Principals Association
- Truancy Services
- NGOs and business sector involved in schools, including those listed below.

SAFER WANGANUI

Current strategies

There are a number of initiatives already underway in Wanganui schools to assist with supporting students to engage positively with their education. These include:

- **Social Workers in Schools (SWiS)**
There are two SWiS in Wanganui and they are employed by Whanganui District Health Board, through a contract with Child, Youth and Family Service. There are two clusters each with their own social worker, who are non-statutory, which cover schools at: Castlecliff, Aranui, Tawhero, Keith Street, Wanganui East, TKKM o Te Atihaunui-A-Paparangi and Waverley Primary.
- **Resource Teachers Learning and Behaviour (RTLb)**
There are six RTLb's in the Wanganui Primary Schools cluster and three in the Intermediate / Secondary School Cluster. Tawhero School is the employer for the RTLb's in the Primary Cluster, with Wanganui Intermediate the employer for the Intermediate / Secondary Cluster. All schools have access to an RTLb.
- **Resource Teacher Literacy (RTLIT)**
There is one RTLIT who provides support to all of the schools in Wanganui with Year 0–8 students. The RTLIT is employed and hosted by Carlton School.
- **Student Engagement Initiative (SEI)**
SEI is for secondary schools and there is an agreement between the school and Ministry of Education on its focus, which normally includes reducing suspension and increasing attendance.
- **District Truancy Service (DTS)**
All schools can access the Truancy Service which is managed by Wanganui City College. They have a contractual arrangement with the Ministry of Education and are the employers of the two attendance officers. They also host regular management meetings comprising a range of principals and agencies.
- **Non Enrolled Truancy Service (NETS)**
Once a student is removed from a school roll after 20 consecutive school days they are referred to the Ministry of Education. If the Ministry is unable to locate or make contact with the child's family the case can be referred to NETS.
- **High On Life (HOL)**
The programme focuses on promoting secondary schools as a place free from alcohol and other drugs, and facilitates easy access for students to alcohol and other drug services at school without fear of punishment. Elements of school policy and professional development are included.

What steps we are taking (action plan including data development)

	Actions	Lead Agency
<i>Short Term</i> (commencing early 2010):		
1.	The Safer Wanganui steering group will invite key partners into the project (e.g. Principals Association, Māori Principals Association, School / Trust Boards, NGOs and business sector involved in schools etc) to build relationships and a common understanding about the <i>Safer Wanganui</i> project and its aims. This will set the foundation for the next actions to be commenced – with a focus on turning the curve of suspensions in Wanganui.	Safer Wanganui steering group

SAFER WANGANUI

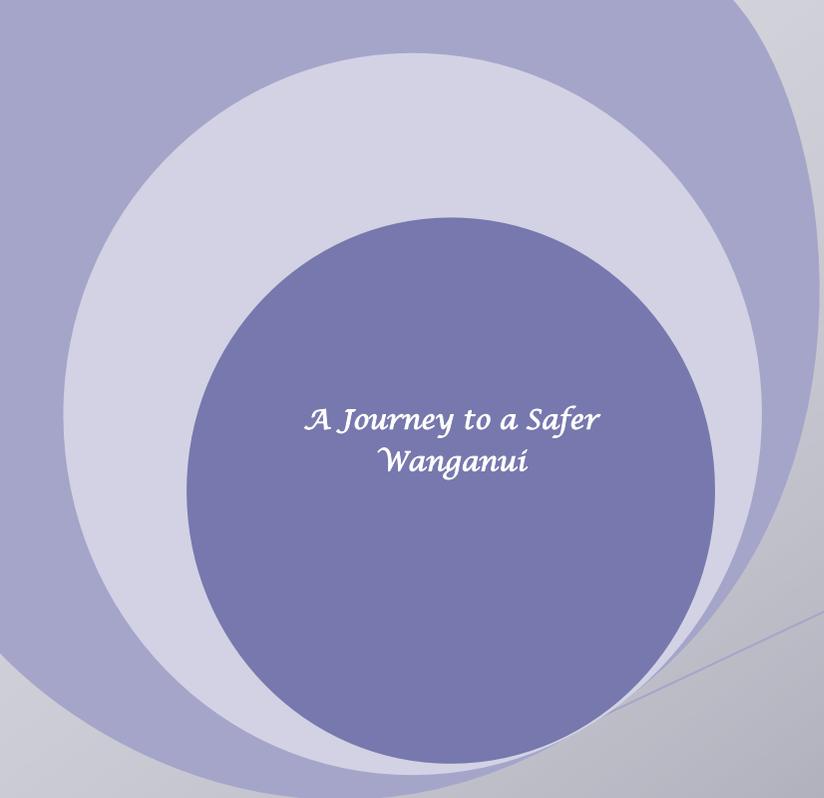
	Actions	Lead Agency
2.	<p>Data development: Once the Steering group representation has been fully established, the group will identify its data needs, so that future actions are appropriately targeted.</p> <p>This could include:</p> <ul style="list-style-type: none"> • sharing reasons why students have been suspended across schools, at a more detailed level than is currently recorded in the MoE Suspension Categories • identifying what measures schools put in place to avoid resorting to suspension • identifying what strategies lead to the most successful results <p>The group may initially collate existing statistics around reasons behind suspension (back dated for the past three years) to commence the process of analysing factors, successful strategies and developing actions quickly.</p> <p>The children / young people concerned will remain anonymous throughout the data development.</p>	Ministry of Education

	Actions	Lead Agency
<i>Short Term</i> (commencing early 2010): continued		
3.	<p>Gathering this data will support the development of collaborative strategies and actions that target the top five reasons for why children / young people are suspended. This refers to the behaviours or actions that sit underneath the MoE categories such as marijuana use or alcohol use or graffiti or vandalism etc. There may be patterns that emerge specific to school clusters / geographical areas in Wanganui that will also inform how collaborative actions are developed.</p>	Safer Wanganui steering group

	Actions	Lead Agency
<i>Longer Term</i> (commencing early 2011):		
4.	Partners will commence further data development to collect qualitative data about why children and young people are engaging in the behaviours that are resulting in their suspension. This will build an accurate Story Behind The Data, which is currently generalised, rather than Wanganui specific. This in turn will inform continued collaborative work to promote school and other agency engagement.	Safer Wanganui steering group

Our performance measures (evaluating our work)

The steering group will monitor the performance of their collaborative group against their Annual Work Plan and the timeline that will be inherent within it. The Annual Work Plan is yet to be agreed by steering group partners.



*A Journey to a Safer
Wanganui*

Criteria 6:

Ongoing participation in national and international
Safe Communities networks.

SAFER WANGANUI

Supporting safety and injury prevention through collaboration and coordination is an explicit goal of Safer Wanganui targeted at building relationships between central and local government, Iwi, non-governmental organisations and the community.

For Wanganui, gaining accreditation as an International Safe Community is important because the model has been nationally and internationally recognised as an effective intervention to promote safety.

International Safe Communities have safety as a “universal concern and responsibility for all.” The process for gaining accreditation allows for safety promotion, injury and crime prevention methodologies to be shared and implemented by the whole community – working smarter, not harder.

All partners view involvement and participation at a local, regional, national and international level as critical to Safer Wanganui’s success. While issues can be managed at a local level, there are often regional and/or national influences to consider. For example, SafeKids New Zealand provides advice and resources for two injury prevention issues each year. Wanganui’s local coalition determines whether or not they align their work with that national campaign. Awareness of what is happening regionally, nationally and internationally can inform, or be informed by, local activity. Safer Wanganui and its constituent agencies are involved with the following regional, national and international networks.

- Nationally and locally Safer Wanganui has liaised with the Safe Communities Foundation of New Zealand (SCFNZ), as well as other accredited communities, such as New Plymouth, Tauranga, Taupo, Rotorua, Wellington and Christchurch.
- Lauren Tamehana (Whanganui District Health Board) and Sally Patrick (Wanganui District Council) presented at and attended the Safe Communities Conference in Christchurch in 2008 on behalf of Safer Wanganui.
- Representatives from the community also attended the SCFNZ annual network forum in Auckland last year.
- Dr Carolyn Coggan, SCFNZ Director, has visited Wanganui on three occasions to support Safer Wanganui and advance their work towards accreditation.
- Wanganui Community Patrol is an affiliated agency of Community Patrols of New Zealand.
- ACC is a member of Injury Prevention Network of Aotearoa New Zealand (IPNANZ), which promotes safe living, working and recreational environments and communities.
- The Wanganui Child Injury Prevention group is an active participant in SafeKids New Zealand. Their injury prevention activities featured in the December 2009 newsletter.

SAFER WANGANUI

- The Crime Prevention Unit (CPU) is based within the Ministry of Justice and funds crime prevention through territorial authorities. Until 2003, the Safer Community Council was the primary provider of community-based crime prevention. Since then, Crime Prevention Unit funding is directed to the Wanganui District Council, who manages local crime prevention activities. This work is generally contracted out to non-governmental organisations. For example, using CPU funding, Wanganui District Council funded Whanganui YATA for campaigns in 2007/2008 and 2008/2009.
- Alcohol Liquor Advisory Council (ALAC) and SCFNZ jointly hosted a community alcohol forum at Putiki Marae on April 20th 2009. Representatives from ALAC then supported a follow-up community meeting in Council Chambers. They have since provided advice regarding development of a local alcohol policy or accord.
- Representatives from Safer Wanganui attended the 2010 ALAC Conference in Auckland on May 6th and 7th.
- Health Promotion Forum of New Zealand: The Health Promotion Forum of New Zealand (HPFNZ) builds leadership, relationships and the workforce in health promotion consistent with the principles of Te Tiriti o Waitangi and the Ottawa Charter. Membership of the forum is made up of over 150 organisations committed to improving health. HPFNZ is key to the Public Health Centre at Whanganui District Health Board as one provider of training, most notably Introduction to Health Promotion and TUHANZ.
- Water Safety New Zealand: Water Safety New Zealand hosts a regional forum in Levin three times a year to discuss and agree on an action plan. At one of last year's forums, local representatives undertook to establish a local water safety forum acknowledging the relatively high number of drowning deaths and the local environment (that is, ready access to river, beach and pool). Members of the Whanganui Water Safety Forum attended the inaugural Water Safety Conference in Wellington last year.
- Safer Wanganui works with local Iwi on safety issues for local Maori including youth initiatives such as "For Our Kids."
- Wanganui District Council hosts and chairs the Road Safety Action Plan meetings, as well as being on the Regional Transport Committee.
- Representatives from the reference groups regularly attend the annual Trafanz Conference last held in Auckland in 2009.
- Wanganui workplaces are involved in the Regional Health and Safety Practitioners Forums held in Palmerston North by ACC and the Department of Labour.
- Representatives of Safer Wanganui have been sharing their journey towards International Safe Community accreditation

SAFER WANGANUI

with Rangitikei District Council at their Community Outcomes Conference.

- In Wanganui, Community House has the office accommodation of many social and volunteer agencies established to deal with the variety of everyday problems residents and visitors experience. A representative from Community House sits on Safer Wanganui

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Glossary

Automobile Association (AA): A national service provider (driver licensing, insurance and travel) and advocacy group for motorists.

Accident Compensation Corporation (commonly known as ACC): A New Zealand injury compensation scheme.

Alcohol Liquor Advisory Council (ALAC): Established in 1976 by an Act of Parliament, ALAC's aim is to encourage responsible use and minimise misuse.

Aotearoa: New Zealand in Maori

Children, Youth and their Families Service (CYFS): A central government agency responsible for the care and protection for children 17 years and under. It is part of the Ministry of Social Development.

Community Alcohol Action Funding (CAAF): The funding arm of ALAC.

Community Taskforce on Youth Wellbeing: Council initiative responsible for "For Our Kids"

Family and Community Service: It is part of the Ministry of Social Development that supports families and communities to be strong, well informed and connects with each other.

Injury Prevention Research Unit (IPRU): A research unit based at Otago University, Dunedin.

Iwi: Tribe

Kaiwhakahaere: Director

Long Term Council Community Plan (LTCCP): A document that outlines the Council's 10 year plan

Ministry of Health: A crown agency which works as policy adviser, regulator, funder and service provider.

SAFER WANGANUI

Ministry of Social Development: A government agency comprising Work and Income, Children, Youth and their Families Service, and Family and Community Services.

Neighbourhood Support Group: A collective of small, location-based groups with the goal of raising awareness of crime prevention measures.

New Zealand Transport Agency (NZTA): A crown agency responsible for contributing to an affordable, integrated, safe, responsive and sustainable land transport system.

Non-Governmental Organisation (NGO): Organisations which sit outside central government.

Primary Health Organisation (PHO): Local primary healthcare providers.

Plunket: A national agency which delivers child health services to under 5s.

Regional Forensic Mental Health & Intellectual Disabilities Services: Capital Coast DHB mental health outreach team.

Safer Wanganui: the name of this coalition and the steering group.

Safer Community Foundation of New Zealand (SCFNZ): The International Safe Communities' agent in New Zealand.

St John's: New Zealand's ambulance service.

Te Oranganui Iwi Health Authority PHO (Primary Health Organisation), (TOIHA): A local primary healthcare provider

Te Runanga o Tupoho: Council of Tupoho, local Iwi indigenous to Whanganui.

Territorial Land Authority (TLA): The area governed by a district, city or regional council.

Tupoho: The local Iwi indigenous to Whanganui.

Wanganui Child Injury Prevention: Local coalition

SAFER WANGANUI

Wanganui District Council: The local territorial land authority

Whanau: The extended family

Whanganui District Health Board: A funder and provider of primary and secondary healthcare services

Whanganui Youth Access to Alcohol (WYATA): A local network with the aim of reducing alcohol related harm to young people.

Whanganui Regional Primary Health Organisation (WRPHO): A local provider of primary health services.

Whanganui Workplace Health & Safety Forum: A network of local workplace health and safety practitioners who meet bimonthly.

Work and Income: It is part of the Ministry of Social Development, providing financial assistance and employment services throughout New Zealand.

Appendix – Letters of Support



29 June 2010

Central South Whanganui Office Phone: 0-6-349 6300
Region 93 Ingestre Street Fax: 0-6-349 6302
Private Bag 3012 www.minedu.govt.nz
Whanganui 4540
New Zealand

Safe Communities Foundation New Zealand
P O Box 331399
Takapuna
North Shore 0740
Auckland

To Whom It May Concern

LETTER OF SUPPORT FOR WHANGANUI TO BE ACCREDITED AS AN INTERNATIONAL SAFE COMMUNITY

The Ministry of Education is responsible for raising student achievement. For students to be able to achieve, they need to be engaged in schooling.

We have been involved with Safer Wanganui from the early stages of this project. It is evident that the framework offers real opportunities to collaborate, cooperate and work together strategically.

The Ministry of Education, through its partnership with boards of trustees and community groups with a student focus, sees great benefit in working alongside the city's community networks.

It is through this collaborative approach that the Ministry of Education believes that all learners can be well supported to be present, participating and learning in education.

The Ministry of Education supports and applauds the effort of Safer Wanganui to gain a WHO Safe Community accreditation for this community.

Yours sincerely

Anne Devonshire
Manager – Whanganui

8 June 2010

Safe Communities Foundation New Zealand
PO Box 90640
Auckland Mail Service Centre
Auckland 1030

Dear Safe Communities Foundation,

LETTER OF SUPPORT for the Wanganui District Council

This letter is in support of the Wanganui community's bid to be accredited as a World Health Organisation safe community.

The family violence sector in Wanganui has a well established network - the Whanganui Family Violence Intervention Network – the key stakeholders of which have been working together for many years. The Te Rito Project Management Group (TRPMG) has oversight for the network and family violence sector. It is the TRPMG that *Safer Wanganui* has approached to be the Family Violence Reference Group.

The Wanganui Te Rito Project Management Group consists of 18 representatives from Wanganui agencies and government departments involved in family violence prevention. We are a collaborative group that operates within the parameters set by the government Taskforce for Action on Violence within Families which was set up in June 2005 to advise the Family Violence Ministerial Team on how to make improvements to the way family violence is addressed, and how to eliminate family violence in New Zealand.

Our vision is: *That Whanganui has a zero tolerance of family violence and that all families/whanau have healthy, respectful relationships free from violence.*

We have a five year strategic plan which is driving action on three fronts to achieve our vision:

- *Leadership* – we need leadership at all levels if we are going to transform our society into one that does not tolerate family violence
- *Changing attitudes and behaviour* – we have to reduce our community's tolerance of violence and change people's damaging behaviour within families
- *Community Collaboration and Service Provision to Families* – we want to ensure that we have effective coordinated statutory and community responses that promote family safety, stop re-offending and hold perpetrators accountable.

The Wanganui District Council has a representative in our TRPMG meetings helping to achieve two-way communication between the Council's objectives and our own. On behalf of the TRPMG I fully support the Wanganui District Council's effort to gain a WHO Safe Community accreditation for this community.

Yours sincerely,

Vanessa Bell

PROJECT MANAGER
TE RITO PROJECT MANAGEMENT GROUP

Whanganui Te Rito Project Management Group
C/- P O Box 4195 Wanganui





21 June 2010

Safe Communities Foundation New Zealand
PO Box 331399
Takapuna
North Shore 0740
Auckland

To Whom It May Concern:

LETTER OF SUPPORT - WHANGANUI ACCREDITATION AS AN INTERNATIONAL SAFE COMMUNITY

The New Zealand Police mission is to be a world-class police service, working in partnership with citizens and communities to prevent crime and road trauma, to enhance public safety and to maintain law and order.

Having been involved in Safer Wanganui project from an early stage as Area Commander, it is evident that the framework offers real opportunities to collaborate, cooperate and work together strategically.

Police in Whanganui are involved at many levels within the community - from providing mobility scooter users with safety advice to supporting the active Neighbourhood Support network to participating in road safety action planning, as well as the obvious enforcement duties. The work with the community is maximised through networking between steering and reference groups.

The resulting greater general awareness of crime and injury prevention in Whanganui can only assist Police to achieve reductions in violent crime and road trauma with fewer victims. That is, if individuals are supported and encouraged to behave safely, there will be fewer crashes and crime.

Safer Communities Together

WANGANUI POLICE STATION

Bell Street, P O Box 443, DX Mail - PX10211, Wanganui, New Zealand
Telephone: (06) 349 0600 Facsimile: (06) 345 3881 www.police.govt.nz

SAFER WANGANUI

On behalf of Police in Whanganui, I fully support and applaud the effort to gain a WHO Safe Community accreditation for this community.

Together, Whanganui can be a safer community.

Yours sincerely



D. A. MacLeod
Inspector
Area Commander
WHANGANUI

ACCIDENT COMPENSATION CORPORATION



10th May 2010

Safe Communities Foundation New Zealand
PO Box 331399
Takapuna
North Shore 0740
Auckland

Wanganui Office
45 Wilson Street
PO Box 435, Wanganui 4540
New Zealand
Ph 06-349 0433
Facsimile 06-349 0401
www.acc.co.nz

To Whom It May Concern:

LETTER OF SUPPORT FOR WHANGANUI TO BE ACCREDITED AS A WHO SAFE COMMUNITY

This letter is in support of Safer Wanganui to be accredited as a World Health Organisation (WHO) safe community.

The Accident Compensation Corporation (ACC) administers New Zealand's unique injury compensation scheme, providing personal injury cover for all New Zealand citizens, residents and temporary visitors. Our goals are to prevent injury, provide the best treatment and care if injury occurs, and to effectively rehabilitate people back to work or independence.

This branch serves the Whanganui region including three territorial authorities of which Wanganui District Council has the largest population. In 2009 in Whanganui over 16,300 claims were registered with ACC, requiring medical treatment, with over 1,200 claims needing direct assistance from ACC for more serious injuries. Three or fewer people died as a result of their injuries (and made a claim). ACC spent over \$10.5 million dollars on these new and existing injuries in 2009.

ACC's Injury Prevention Strategy (which is aligned with the New Zealand Injury Prevention Strategy) is based around key areas where injuries of serious consequences are apparent: at work, home, during sport and recreation and on the road. The Whanganui branch has one Injury Prevention Consultant working, with support from a regional team, in collaboration with community groups, government agencies, employers and Safer Wanganui.

On behalf of ACC, we fully support and applaud the effort to gain a WHO Safe Community accreditation for this community.

Yours sincerely,

Heather Williams
BRANCH MANAGER

Stephen Sanson
TEAM MANAGER, INJURY PREVENTION





Heads Row
Private Bag 301
Wanganui
New Zealand

23 June 2010

Safer Communities Foundation New Zealand
c/- Trish Bristol
Wanganui District Council
PO Box 637
WANGANUI

Dear Trish

LETTER OF SUPPORT FOR WANGANUI 'SAFE COMMUNITY' APPLICATION

Whanganui District Health Board is very pleased to be able to confirm their support for the application by Safer Wanganui to be recognised by the World Health Organisation (WHO) as a safe community.

Whanganui District Health Board is responsible for the planning, funding and providing in Wanganui hospital as well as community services across the greater Wanganui region. The strategic goals for Whanganui District Health Board are improving health, reducing inequalities and promoting recovery, wellbeing and independence. Inherent in these goals is the need to ensure that there is a safe environment for people to live, work and play.

Safer Wanganui is an intersectorial model designed to support our community working together. Our model recognises that ensuring a safe environment cannot be fulfilled by one agency alone. While Whanganui District Health Board provides the health care which people require after an injury we are well aware that in order to ensure people remain injury free and healthy we must also make changes to our environment, including having a focus on injury prevention and health promotion. We are therefore committed to working in partnership with other like-minded organisations to ensure that the vision for Safer Wanganui is achieved.

Whanganui District Health Board has been actively involved in community safety for many years, including membership on the Safer Community Council, Safer Community Advisory Group and now the Safer Wanganui Steering Group. We realise that Safe Communities Foundation Accreditation is only a step in our journey to a Safer Wanganui and through this collective work, to date our community has become better equipped to work together and combine resources to address safety issues in our community.

Whanganui District Health Board is proud to be associated with the Safer Wanganui Steering Group and we are committed to ongoing participation to make our community a safer Wanganui, where everyone feels safe to be in and move around the community all the time.

Yours sincerely

Julie Patterson
CHIEF EXECUTIVE OFFICER

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"Better health and independence"

CHIEF EXECUTIVE'S OFFICE
Third Floor Lambie Building
Telephone 06 345-1234, extn 8140, Facsimile 06 345-9300

SAFER WANGANUI



Record No: **D-140375**
Addressee: **Sally Patrick**
Date: **20/05/2010**
File No: **08/66**

RWD000L1AS

Wednesday, May 19, 2010

Trish Bristol
Second Safer City project
Wanganui District Council
P.O Box 637
Wanganui



Wanganui Chamber of Commerce & Industry Inc (est. 1881)
PO Box 88, Wanganui
Ph: (06) 345 0000
Fax: (06) 345 1111
Email: info@wanganuichamber.co
Website: www.wanganuichamber.co

TO WHOM IT MAY CONCERN

Re: Support for the Second "Safer Wanganui".

The Wanganui Chamber of Commerce support the Wanganui District Councils bid to be accredited as part of the International Safe Community accreditation.

The Wanganui Chamber of Commerce acts as the voice of business in Wanganui with a membership of well over 200 businesses. Our prime roll is to advocate on behalf of our members and wider business community on central and local government legislation affecting business. Collectively we are also able to provide additional services to support local businesses develop which include, networking events, discount card, training and FREE information.

On behalf of the Wanganui Chamber of Commerce we fully support the effort to gain a International Safe Community accreditation for the community.

Yours sincerely

Philip Shackleton
Chief Executive

judly supported by:

HELLO TOMORROW



good move





9 June 2010

Safe Communities Foundation New Zealand
PO Box 90640
Auckland Mail Service Centre
Auckland 1030

LETTER OF SUPPORT for the Wanganui District Council

This letter is in support of the Wanganui community's bid to be accredited as a World Health Organisation safe community.

As a Government Department we are tasked to provide the proper monitoring and rehabilitation of offenders to keep them from re-offending and causing harm to the Wanganui community.

We are conscious that we have a very large prison in Wanganui and because of this we have people not from the area choosing to reside here. This presents the community with challenges in regards to accommodation, and re-integration.

I consider it is a positive move for the Community Probation Service in Wanganui to be a part of this bid for accreditation and therefore support it whole heartedly. It gives us and the District Council an opportunity to identify areas where we can work together in providing more support for offenders released from prison and thus contribute to a Safe Wanganui.


J M M Saywood
Service Manager
Community Probation Service
Wanganui



18 May 2010

To Whom It May Concern,

C/ Trish Bristol
Wanganui District Council,
PO Box 637,
WANGANUI

Dear Sir / Madam,

World Health Organisation Safe Community Application

This letter is to provide support in respect of the application by the Wanganui District Council for World Health Organisation Safe Community accreditation. In my role as Emergency Manager, I chair the Wanganui Emergency Management Committee which forms the 'Emergency Planning' Reference Group for Safer Wanganui.

The Committee was initially formed for the Year 2000 (Y2K) planning to develop an integrated and intersectoral approach for planning and response to community safety. Ten years later, this approach has proven effective in a number of real hazard events.

The Emergency Management Committee's role is to:

- Improve the local (District) integration, coordination and communication at all levels between all key emergency management agencies.
- Coordinate local resources for the planning needs of a variety of local emergency management issues, such as Hazardous Substances Technical Liaison Committee, etc.
- Provide planning support and advice to Civil Defence Emergency Management projects.
- Prepare District Response and Recovery Plans consistent with the regional Civil Defence Emergency Management Group Plan.
- Provide advice and appropriate assistance to the Local Controller, the Emergency Operations Centre, and the Recovery Manager.

These roles and those of our stakeholders, the emergency services, health and community organisations and infrastructure providers, fit neatly with the overall principles of the Safer Wanganui concept.

Yours Sincerely,

A handwritten signature in black ink, appearing to read 'Max Benseman'.

**Max Benseman,
Emergency Manager.**

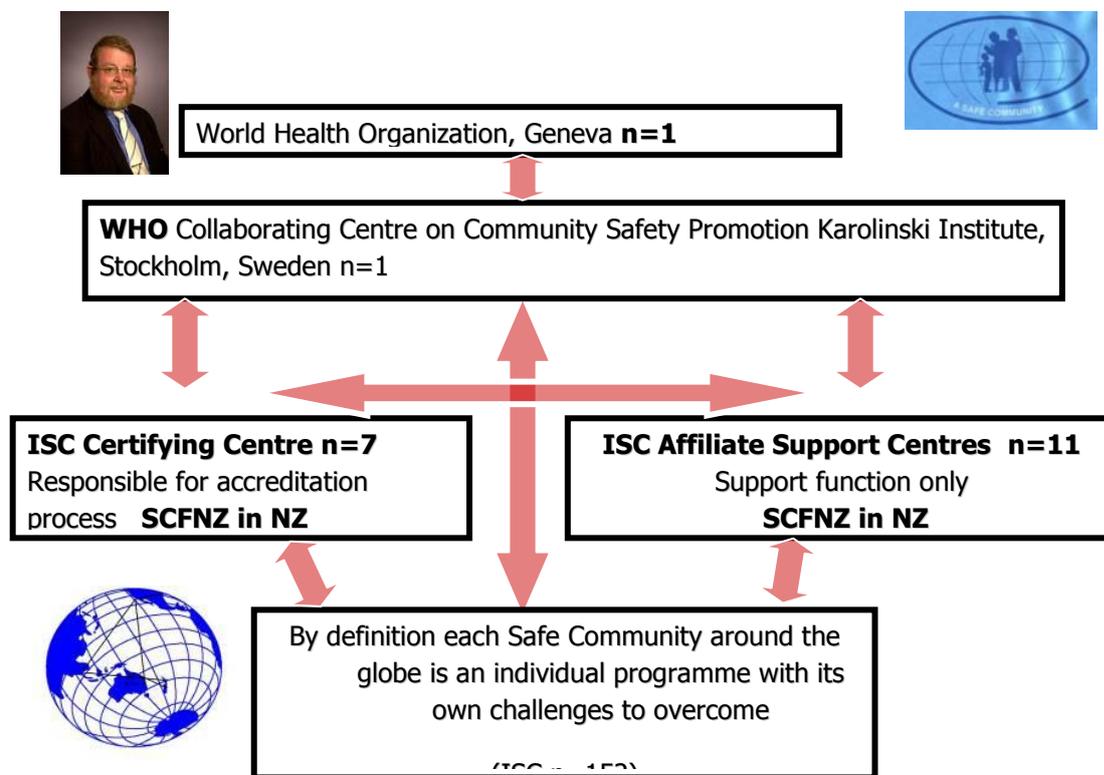
SAFER WANGANUI:

BACKGROUND

October 2009

- In the early 1990s, Wanganui enjoyed the benefits of a thriving Safer Community Council. This was jointly led by the then Mayor and Police Commander. Funding from the Crime Prevention Unit supported provision of a coordinator, who supported the community's projects - for example, Life to the Max and Restorative Justice.
- Changes within the Crime Prevention Unit in 2004 signalled the demise of Safer Community Councils around New Zealand, so Wanganui shifted to a Safer Community Advisory Group.
- This group oversaw the development of a safety plan in 2005. The safety plan was based on interviews with key stakeholders and had one clear outcome - the need to increase the scope of group's work to reflect a more holistic view of safety.
- So in 2007, a smaller Safer Community Action Group was formed. This subgroup was tasked by the Safer Community Advisory Group with investigating an appropriate safety model for Wanganui. The model recommended was the World Health Organisation's International Safer Communities model.

WORLD HEALTH ORGANISATION: INTERNATIONAL SAFE COMMUNITIES



In order to be designated as a Safe Community of the WHO Safe Community Network communities are required to meet the following six criteria:

1. An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community.
2. Long-term, sustainable programmes covering both genders and all ages, environments, and situations.
3. Programmes that target high-risk groups and environments, and programmes that promotes safety for vulnerable groups.
4. Programmes that document the frequency and causes of injuries.
5. Evaluation measures to assess programmes, processes and effects of changes.
6. Ongoing participation in national and international Safe Communities networks

SAFER WANGANUI

Using the six World Health Organisation criteria, the framework is based on an intersectoral model with effective working relationships and partnerships, supporting the safe community. The framework (see below) is made up on the Safer Wanganui Steering group and six reference groups. The overall goal is "A Safe Wanganui", achieved through the work of the steering and reference groups. Each has developed "indicators" as a way to measure our progress and effectiveness.

RESULT

WANGANUI – A SAFER COMMUNITY

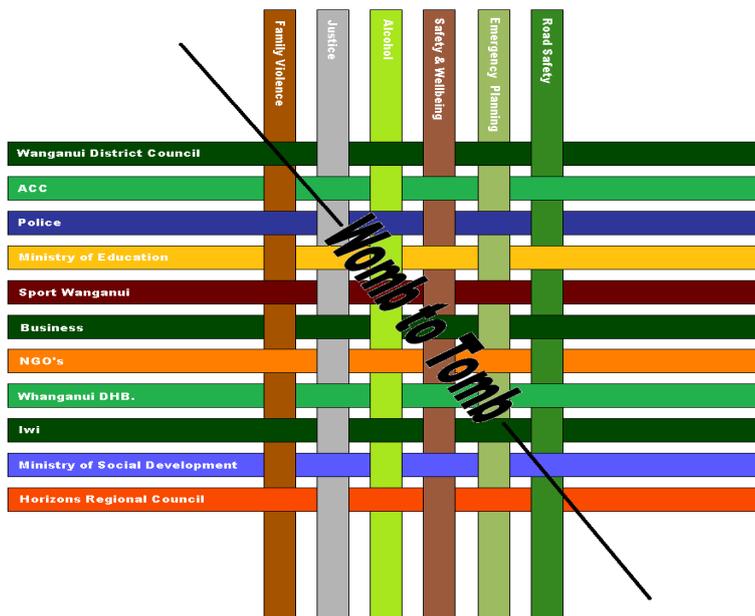
Everyone feels safe to be in and move around the community all the time.

“Safe” means freedom from physical, social, spiritual, emotional, occupational, psychological, sexual and environmental harm. This includes an awareness of potential for harm

SAFER WANGANUI FRAMEWORK



SAFER WANGANUI WHARIKI



SAFER WANGANUI: Our Injury Profile

July 2009

HOSPITAL DISCHARGES IN WANGANUI DUE TO INJURY, 2003 – 2007

Please note this data includes all discharges from hospital between 2003 and 2007 for people usually resident in Wanganui (as territorial land authority), where the principle diagnosis is injury. It excludes readmissions for the same incident, day patients and fatalities.

- From 2003 to 2007, 3675 people from Wanganui were hospitalised as the result of an injury, an annual average of 735 injured people.
- Falls were the leading cause of injury-related hospitalisations for each year of the five-year period.
- Over half the injured people (56%) were male.
- Nearly three-quarters of the injured people were European and more than a fifth (22%) were Maori.
- Most injuries (37%) occurred at home.

TOP FIVE INJURY CAUSES for hospital discharges in Wanganui, 2003 – 2007

Fall	Adverse Effects	Motor Vehicle Traffic	Poisoning	Struck By/Against
36% (1333)	12% (452)	9% (314)	8% (279)	8% (274)

Hospital discharges due to injury in Wanganui by **ETHNICITY**, 2003 – 2007

European	Maori	Pacific	Asian	Other
74% (2728)	22% (811)	2% (75)	1% (32)	1% (29)

Ethnicity in Wanganui as reported in the Census, 2006

74%	22%	2%	2%	1%
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TOP FIVE INJURY SCENES for hospital discharges due to injury in Wanganui, 2003 -2007

Home	School/Other Institution	Road	Unspecified	Sports
39% (1350)	17% (623)	13% (467)	9% (323)	7% (274)

Hospital discharges due to injury in Wanganui by **AGE**, 2003 – 2007

0 – 4yrs	5 – 14yrs	15 – 19yrs	20 – 24yrs	25 – 59yrs	Over 60yrs
5% (185)	14% (513)	9% (332)	6% (225)	35% (1280)	31% (1140)

Age in Wanganui as reported in the Census, 2006

6%	15%	7%	5%	44%	22%
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DEATHS IN WANGANUI DUE TO INJURY, 2001 - 2005

Please note this data includes all fatalities between 2001 and 2005 for people usually living in Wanganui (as territorial land authority), where the principle diagnosis is injury. Values less than three have been omitted to protect privacy.

- From 2001 to 2005, 125 people from Wanganui died as the result of an injury, an annual average of 25 deaths.
- Motor vehicle crashes were the leading cause of injury-related deaths for the five-year period.
- Over half the people killed (61%) were male.
- Nearly three-quarters (73%) of people killed were European and a fifth (26%) were Maori.
- Most deaths (34%) resulted from injuries at home.

TOP FIVE INJURY CAUSES for deaths in Wanganui, 2001 – 2005

Motor vehicle traffic	Fall	Poisoning	Suffocation	Drowning
24% (30)	21% (26)	18% (22)	12% (15)	6% (8)

Deaths due to injury in Wanganui by **ETHNICITY**, 2001 – 2005

European	Maori	Pacific	Asian	Other
73% (91)	26% (32)	0% (0)	* *	0% (0)

Ethnicity in Wanganui as reported in the Census, 2006

74%	22%	2%	2%	1%
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TOP FIVE INJURY SCENES for deaths due to injury in Wanganui, 2001 -2005

Home	Road	Residential Institution	Other Specified	Unspecified
34% (42)	27% (34)	12% (15)	12% (15)	6% (7)

Deaths due to injury in Wanganui by **AGE**, 2001 – 2005

0 – 4yrs	5 – 14yrs	15 – 19yrs	20 – 24yrs	25 – 59yrs	Over 60yrs
3% (4)	* *	13% (16)	8% (10)	37% (46)	38% (48)

Age in Wanganui as reported in the Census, 2006

6%	15%	7%	5%	44%	22%
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