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**AT THE HEART  
OF THE MATTER,  
NZ DRUG  
FOUNDATION.**  
Te Tūāpapa Tarukino o Aotearoa

## **New Zealand Drug Foundation submission on the Accident Compensation (Access Reporting and Other Matters) Amendment Bill**

Submitted to the Education and Workforce Committee on 9 February 2023.

We request the opportunity to make an oral submission.

## Tēnā koutou

Thank you for the opportunity to contribute to the work of the Education and Workforce Committee with our submission on Accident Compensation (Access Reporting and Other Matters) Amendment Bill.

We welcome the attention given to disparities and barriers of access to the Accident Compensation Scheme (AC Scheme). We want this to be an opportunity to better evaluate the social and medical costs of substance use in Aotearoa.

As we outline in our submission, we know that alcohol and other drugs are a significant contributing factor to accidental injuries and deaths, and we know that these harms are more pronounced for Māori and other population groups. While data is available for transport accidents and through coronial reporting, non-transport and non-fatal accidents are not accounted for even when leading to significant morbidity or costs. This data deficiency makes developing policies and programmes to prevent and minimise these harms more challenging.

We strongly encourage the Education and Workforce Committee to consider requiring ACC to appropriately collect and report on alcohol and other drugs as a factor in accidents. At the same time, we recommend that ACC develops a sensitive and non-stigmatising process for capturing this information. This must also prioritise claimant confidentiality and appropriately support people who use drugs on a path to recovery from accidental injuries.

Thank you for considering our submission. We also request the opportunity to make an oral submission.



Sarah Helm  
Executive Director

The Drug Foundation is a charitable trust. We have been at the forefront of major alcohol and other drug debates for over 30 years, promoting healthy approaches to alcohol and other drugs for all New Zealanders.

## **We support the general objectives of the Bill**

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1. The Drug Foundation welcomes the general aims of the Bill in gathering information on access to the Accident Compensation Scheme (AC Scheme) by Māori and other population groups. We agree with the stated objective of supporting individuals in recovery by bringing forward the eligibility for the minimum rate of weekly compensation from the sixth to the second week.
2. The Drug Foundation supports an aspiration to better understand the barriers that the diverse groups may face when making a claim. More detailed information would support targeted and efficacious injury prevention measures, as well as improved access to the AC Scheme.
3. Specifically, we support the inclusion of a new section 278B, which requires the Accident Compensation Corporation (ACC) to report in each financial year on access to the AC Scheme by Māori and other population groups.
4. We welcome the forthcoming public information that will arise from this Bill being accepted into legislation. Once information about disparities in accessing the AC Scheme is made publicly available, it will assist health and social services continuous improvement of programmes.
5. The amendment presents an opportunity to learn more about barriers that different client populations face when claiming compensation. We would like to see a clarification of which 'other population groups' the Amendment will require ACC to report on.
6. We agree with the directive in section 13(1) for ACC to actively consult with communities that may benefit from improved data collection. These may include women, Pasifika and other ethnic communities, rainbow communities, and disabled people.

## **We recommend that expansion of reporting criteria includes alcohol and other drugs as contributing factors in accidents**

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### **Improving data collection will help fill a significant information gap**

7. We **recommend** including alcohol and other drug use as one of the reporting criteria for accidents in AC Scheme for all populations.
8. We **recommend** that ACC reporting on 'the causes of, or factors contributing to, those disparities and barriers, as identified by the Corporation' (section 278B(2)(d)) specifically includes alcohol or drug use.
9. Legislating reporting requirements for ACC presents an opportunity to improve systematic data collection across population health domains, to better meet the needs of communities in Aotearoa.

10. We know that alcohol use is a significant cause of death in Aotearoa, being attributed to 5.4% of all deaths, and 7.2% of deaths among Māori. The majority of these deaths in males and young people of all genders, are due to accidents.<sup>1</sup>
11. Alcohol and drug use is a secondary contributor to a significant number of deaths caused by injury. While alcohol was the substance implicated in the majority of those (132 deaths in 2019), other drugs were found to be a secondary contributor to 74 deaths in 2019.<sup>2</sup>
12. We know that alcohol and other drugs contribute to vehicle crashes in Aotearoa. Alcohol and drugs were a factor in 14% of minor injury crashes, 11% of serious injury crashes, and a 43% of fatal crashes between 2019-2021.<sup>3</sup>
13. We note that the AC Scheme covers access to therapy and counselling through the sensitive claims process. A 2012 paper shows that victims of sexual assault reported drinking by the perpetrator in 57% of incidents,<sup>4</sup> making it a likely significant contributor to the reported offences and, as a result, a significant factor in AC Scheme claims costs.
14. Furthermore, between January 1999 and June 2008, 44% of offenders committing homicide were under the influence of alcohol.<sup>5</sup>
15. Māori are more likely than non-Māori to experience violence by someone under the influence of alcohol or drugs.<sup>6</sup>
16. Outside of coronial and crash-related data, very little up-to-date information is available nationally on alcohol and drug-related accidents, including in workplaces. WorkSafe New Zealand does not systematically collate such data<sup>7</sup>, making appraisal of social and medical costs of alcohol and drugs harms challenging.
17. The data collected through AC Scheme reporting would enable more responsive policy design, facilitating accident prevention and enabling effective harm reduction.

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<sup>1</sup> Connor J, Kydd R, Shield K, Rehm J. The burden of disease and injury attributable to alcohol in New Zealanders under 80 years of age: Marked disparities by ethnicity and sex. *N Z Med J* 2015; 128: 15–28.

<sup>2</sup> NCIS. *NCIS FACT SHEET. Drug-related deaths in New Zealand in 2019*. Available from: <https://www.ncis.org.au/wp-content/uploads/2022/06/2019-NZ-NCIS-fact-sheet-Mortality-data-series-Drugs.pdf>

<sup>3</sup> Te Manatū Waka. *Safety – Annual Statistics. Alcohol and drugs*. Available from:

<https://www.transport.govt.nz/statistics-and-insights/safety-annual-statistics/sheet/alcohol-and-drugs>

<sup>4</sup> Connor J, Casswell S. Alcohol-related harm to others in New Zealand: evidence of the burden and gaps in knowledge. *N Z Med J* 2012; 125: 11–27.

<sup>5</sup> Connor J, You R, Casswell S. Alcohol-related harm to others: a survey of physical and sexual assault in New Zealand. *N Z Med J* 2009; 122: 10–20.

<sup>6</sup> Ministry of Health. *Alcohol Use in New Zealand: Key results of the 2007/08 New Zealand Alcohol and Drug Use Survey*. 2009.

<sup>7</sup> WorkSafe OIA response to NZ Drug Foundation (6 September 2022): “When WorkSafe receives a notification of harm, the type of impairment such as the use of drugs, alcohol or other impairments, are not recorded in a manner that can be easily identified.”

18. As we summarised above, alcohol or drug use is a known contributing factor to vehicle crashes and mortality in Aotearoa. We have concerns that without robust reporting by ACC, some of the biggest causes of accidents are being missed. This in turn makes it impossible to invest in accident prevention in a way that maximises health and social outcomes.

### Privacy considerations

19. We recognise that substance use continues to be criminalised and stigmatised in Aotearoa. Therefore, we **recommend** that it remains optional for claimants to share information about substance use as a contributing factor in the claim.

20. Furthermore, we **recommend** that ACC makes it explicit to claimants that any substance use information disclosed will not be shared with other parties, including their workplaces, other government departments and law enforcement.

21. We note that the AC Scheme is a no-fault scheme, where factors like alcohol or drug use have no bearing on access or eligibility. Claimants must be reassured that their disclosure will not adversely affect the outcome of their claim.

22. It is paramount that appropriate privacy considerations are in place, to ensure a non-stigmatising approach to alcohol and drug use disclosure.

### Summary of recommendations

23. The Drug Foundation supports forthcoming annual ACC reports which will include analysis of barriers of access to the AC Scheme and causes or drivers of those disparities.

24. We **recommend** including alcohol and other drug use as one of the reporting criteria for accidents in the AC Scheme for all populations.

25. We **recommend** that ACC reporting on 'the causes of, or factors contributing to, those disparities and barriers, as identified by the Corporation' (section 278B(2)(d)) specifically includes alcohol or drug use.

26. We **recommend** that it remains voluntary for claimants to share information about substance use-related impairment as a contributing factor in the claim.

27. We **recommend** that ACC makes it explicit to claimants that any substance use information disclosed will not be shared with other parties, including law enforcement.