Submission on the Injury Prevention, Rehabilitation, and Compensation Amendment Bill from the Mental Health Foundation of New Zealand

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About the Mental Health Foundation

Established in 1977, The Mental Health Foundation is New Zealand's most respected independent voice on mental health and wellbeing. We operate from offices in Auckland, Wellington and Christchurch. We provide the National Suicide Prevention Service of New Zealand, and mental health promotion in schools and workplaces nationwide. We regularly publish highly regarded research.

The Mental Health Foundation’s mission is to make mental health everybody's business.

We have consulted

In preparing this submission we have consulted specialists in suicide prevention in our organisation, and externally, such as the Injury Prevention Unit of the University of Otago.

Our General View of the Bill

The Mental Health Foundation does not have a general view of the Bill. Instead we seek that proposed New Section 119 is removed by the Committee as this proposal will increase in suicide risk for the bereaved, and those who attempt suicide.

Proposed New Section 119

The Proposed New Section 119 will mean a suicide victim’s family will receive entitlements in only under limited circumstances:

- when the victim’s mental injury being caused by sexual abuse or as a result of a physical injury. (The suicide victim will also need to have previously had a claim for mental injury approved before his or her family can get any entitlement.)
- the victim’s mental injury occurred by a traumatic event in the workplace.
These proposed changes create significant risks.

**Risks: New Section 119 and Increased Suicide Risk for the Bereaved**

The Mental Health Foundation is strongly opposed to the removal of entitlement for those bereaved by suicide to receive costs for funerals, income support and access to other support services - specifically family/whānau counselling.

The overwhelming national and international evidence cautions policy makers on the increased suicide risk for the bereaved. (See Beautrais 2004b; Jordon and McMenamy 2004)\(^1\)

Support for the bereaved, as the status quo offers, is not simply a "kind act". It is an act of suicide prevention. Government’s current suicide prevention policy reflects that it is best practice to offer a range of supports to the bereaved. Current entitlements under the Injury Prevention, Rehabilitation, and Compensation Amendment Act are a critical part of their support.

**Section 119 Contradicts Current Policy**

Note that Government Strategies currently look to mitigate the risk to the bereaved by recommending offering support. Goal 6 of Government’s New Zealand Suicide Prevention Strategy 2006-16 focuses on the need to Support families, whānau, friends and others affected by a suicide or suicide attempt. The subsequent Suicide Prevention Action Plan states clearly:

> ‘A range of services should be available for those who need them. These services include information, practical support and advice, assistance and support in preparing for coronial inquest, peer group support and individual counselling'\(^2\)

**Suicide Attempts/Self Inflicted Injury: 119 (1)**

In addition to the bereaved, those who have made a suicide attempt are also more likely to complete suicide in the future than the general population. A New Zealand study followed up 302 individuals who had made medically serious suicide attempts, and found that within five years 9 percent had died most deaths were by suicide\(^3\). The Foundation also asks that the Committee notes that removing entitlements for these New Zealanders also poses an increased suicide risk.

**Summary of Mental Health Foundation’s Submission**

The proposed New Section 199 will remove of current compensation entitlements, such as counseling. This change will increase the risk of suicide for the bereaved and those who attempt suicide. We strongly recommend removing New Section 119.

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