Appendix 6: GHIC/NDIB harm and deprivation analysis A3



SOCIAL DEPRIVATION, GANG HARM AND DRUG HARM IN NEW ZEALAND

Gang Harm Insights Centre

Harm exists in specific pockets within districts

Methamphetamine and family harm are the lead causes of harm in Waikato, Central, and Northland.

A community-level, place-based approach is recommended when considering ROCC expansion, deploying to area levels within districts facing the highest levels of social deprivation, gang harm and drug harm.

> Whangārei, Far North, Waikato West, Hamilton City, Manawatū and Whanganui should be key areas of focus.

Northland

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Nationally, Northland experiences the highest levels of social deprivation and drug harm.



The strongest drivers of deprivation are employment, housing, environment, and education.

Gang Harm in the **Whangārei Area** increased by 31.2% between 2018-2022



Offending by gang members increased by 60% between 2018-2022, and firearmrelated offending increased by 50% over the last three years.

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Methamphetamine consumption was highest nationally in the **Far North Area** in 2020.

Key Indicators of Harm

While social deprivation, drug harm, gang harm and gang membership appear connected, further analysis into the drivers of these areas is required to understand whether a causal relationship exists. It is possible that the more familial the gang environment is, the less gang harm is present

Northland	ł	\frown	\frown	\frown
Waikato		\frown		\frown
Central		\frown	\frown	\frown
Tasman		\frown	\frown	\frown
Canterbu	iry	\frown	\frown	\frown
Social Deprivation			Gang Harm	Drug Harm

Waikato

Significant variation in social deprivation across territorial authorities within the district.

Employment, health, access, and education are the biggest deprivation challenges.

Gang crime harm and volume of offending by gang members was highest in the Hamilton City Area.

The **Hamilton City Area** has the second highest twoyear average drug harm, nationwide, between 2019-2020.

The **Waikato West Area** had the second highest methamphetamine consumption in 2020, nationally.

Addiction support cannot meet demand. Lack of addiction support will likely result in increased criminality and harm.

Relationship between Gang & Drug Harm

Northland, Wellington, Tasman and Canterbury are outliers that do not show a relationship between social deprivation, gang harm, and drug harm.

Northland has high social deprivation and drug harm, but low gang harm.



Wellington has low drug harm, but a high gang population and high gang harm. However, the **Wellington City Area** had the largest increase in total drug harm nationally (72%) between 2019-2020.

Tasman has the second lowest gang harm nationwide, but medium drug harm levels. Drug harm in the **West Coast Area** increased 59% between 2019-2020.



Canterbury has the lowest drug harm nationally, and low social deprivation, but there is increasing gang harm, especially in the **Christchurch Metro Area**.

Central

Many communities experience social deprivation due to geographical divide, economic inequality, and limited access to health and social services.

Offending by gang members more than doubled between 2018-2022 in the **Manawatū Area**.

The five year average of offending by gang members and crime harm was highest in the **Manawatū Area**.

+39% Highest percentage increase of drug harm of all districts between 2019-2020.

The **Whanganui Area** had the third highest twoyear average total drug harm score nationally, increasing 69% between 2019-2020.

Gang harm was measured using the Crime Harm Index, which assigns the minimum number of days a first-time offender would spend in prison for the crime. Drug harm was measured by combining and weighting data from multiple indicators, measuring the scale of drug harm relative to population. This is expressed as a total drug harm score. Social deprivation was measured using the Dynamic Deprivation Index, where a score of 'one' represents the least deprived ten percent, and 'ten' is the ten percent experiencing highest levels of deprivation.



