He Kaupare. He Manaaki. He Whakaora.
Prevention. Care. Recovery.

ACC Access Report: Public consultation feedback summary

March 2025

ACC must report on access to the Scheme for Māori and identified populations, and consult on the proposed methods and engagement approach

Following the passing of the Accident Compensation (Access Reporting and Other Matters) Amendment Act 2023 (the Amendment Act), ACC has obligations to report annually on levels of access to the Accident Compensation Scheme (the Scheme) for Māori and identified populations. It is ACC's duty to select the identified populations it chooses to report on, and to undertake consultation on the research methodology ahead of preparing the first report.[1]

ACC's Mana Taurite | Equity Committee endorsed the 'identified populations' (Pacific people, Asian people, and disabled people) in addition to Māori, and these were approved by the ACC Board in December 2023.

A public consultation document[2], which was drafted and then approved by the ACC Board, outlined our proposed methodology for the first year's report (2024), an approach to the methodology for the second and third reports, and a proposed engagement approach with Māori and identified populations.[3]

This report summarises the submissions we received on the consultation document and outlines our response to those submissions.

We took a targeted approach to consultation

We aimed to set a reasonable balance between making the consultation transparent and available to the public, and engaging in an appropriate way with relevant organisations and groups. This approach included the following activities:

- distributing the consultation document to relevant population agencies[4] and requesting they share it with relevant networks and communities
- presenting to ACC's Strategic Advisory Panels and key ACC staff with population-focused roles for their consideration and feedback
- publishing a consultation document on the ACC website for a six-week period
- meetings with organisations who preferred to discuss their feedback (rather than provide a written response).

---

[1] https://www.legislation.govt.nz/act/public/2023/0026/latest/whole.html

[2] Annual Scheme Access Reporting

[3] https://www.acc.co.nz/about-us/annual-scheme-access-reporting

[4] These are: Te Puni Kōkiri, Ministry for Ethnic Communities, Ministry for Pacific Peoples, and Whaikaha | Ministry for Disabled People.

We expected a small number of focused and constructive submissions from relevant organisations and individuals, based on the technical nature of the content of the consultation, and noting that the wider public had already had an opportunity to provide feedback on the overall approach to ACC's access reporting requirements as part of the select committee process for the Amendment Bill.[5]

Who made submissions

We received 13 public submissions, including from population agencies and Pacific and Māori research organisations[6]:

1. Te Pūtahitanga o Te Waipounamu
2. Whaikaha – Ministry of Disabled People
3. Ministry for Ethnic Communities
4. Parents of Vision Impaired (PVI) Inc.
5. Stats NZ
6. WorkSafe
7. Disabled Persons Assembly (DPA)
8. NZ Drug Foundation
9. Hikitia | Evaluation Collaborative
10. Ministry for Pacific Peoples
11. Ministry of Health | Manatū Hauora
12. Two individual members of the public made submissions.

We met with Simply Resolution, a dispute resolution provider, and Moana Connect, a Pacific people's research agency, to gather their feedback.

We analysed the submissions and drew out the key themes to inform both the methodology for the first report (and subsequent reports), and engagement approach.

Appendix 1 provides the detailed summary of themes, suggested enhancements to the proposed methodology and engagement approach, and our advice on each specific theme.

---

[5] There were 15 submitters on the Amendment Bill.

[6] Three of the public consultation submitters also submitted on the Bill through the select committee process.

What submitters said

Submitters were broadly supportive of the survey approach and the inclusion of identified populations throughout the research methodology and engagement approach

Common feedback was supportive of the following:

- methodology – particularly supporting the use of a survey to measure injury prevalence
- engagement approach – particularly supporting our signal to work with organisations and agencies to facilitate fruitful and sustainable engagements.

Broadly, submitter feedback focused on the following points:

- requested clarifications and suggested technical enhancements on aspects of the proposed methodology
- suggested enhancements to the proposed engagement approach
- expressed that members and representatives of the identified populations should be consulted throughout the research and engagements.

Appendix 1 provides the detailed summary of submitter feedback and our response.

Common themes

Submitters generally supported our proposed approach to use a survey to measure injury prevalence in the population and match this information to claim lodgement to estimate levels of access and disparities in access

Apart from one submitter who expressed that ACC should not be the agency to conduct access reporting, submitters agreed with the overall proposed methodology and engagement approach.

Submitters expressed broad agreement that we need to measure injury prevalence and that from this, we can determine whether differences in claim lodgement for Māori and identified populations are due to people in these populations not getting injured, or getting injured and not claiming. This approach is a good first step in telling us who is not accessing the Scheme, as per our definition of access for the purposes of the first report.

Measuring injury prevalence by asking everybody in New Zealand about injury is not cost-effective or efficient so, rather than conducting a census, we need to use a data collection method that involves sampling. Submitters supported a sampling method that enables us to generalise the results from our measure of injury prevalence to the population. This means we need to use probability sampling. This will ensure that the sample is representative of the population, and submitters supported over-sampling some populations for this purpose. Utilising this method also means we can measure the sampling error, which is an important component of probability sampling that allows us to draw robust research conclusions from the analysis.

We are going to use culturally appropriate methods to research access barriers and causes of disparities for Māori and identified populations, in line with submitter feedback which expressed support for culturally appropriate research methods and mixed methods.

Submitters suggested improvements in research design for us to consider in subsequent access reporting

- Expand the definition of access from claim rates for injured people, to include acceptance and receipt of entitlements.
- Ensure injury prevalence data is of the necessary standard and comparable quality to be placed in the Stats NZ research database, the Integrated Data Infrastructure (IDI).
- Ensure populations can access the survey to increase the sample size and oversample for all identified populations.
- Be clear about how access reporting information will be used to inform ACC's targeted investment approach and outcome measures.

Population agencies that responded noted that ACC should engage with them to raise awareness of the injury prevalence survey with the intention of conducting further research on barriers and causes through their population agency networks

Ministry for Pacific Peoples, Ministry for Ethnic Communities and Whaikaha – Ministry of Disabled People, expressed support for ACC's engagement with identified populations and offered to assist with raising awareness of the injury prevalence survey with their communities and networks to help with survey uptake and reach. We consider this to be a valuable offer that will help to address submitter concerns about population representativeness in the injury prevalence survey. We intend to take the Ministries up on this offer because it will make the research more robust.

Submitters supported continuing to oversample Māori and Pacific people to ensure population representativeness in survey respondents. Submitters also suggested oversampling for Asian people and disabled people. We will work to progress oversampling for these populations to ensure representativeness in the survey sample.

The population agencies also offered to facilitate engagements with relevant communities and networks to help develop qualitative research on access barriers and causes of those barriers, using research methods specific to the populations. (For example, Talanoa with Pacific communities, and interviews and focus groups with disabled people).

We will continue to work with the population agencies on appropriate ways of raising awareness about the survey and develop any qualitative research methodologies. For example, we have worked with inter-agency communities of practice through the Social Investment Agency and Whaikaha - Ministry of Disabled People to disseminate results from access reporting work to date, and to scope research topics to investigate barriers and causes for subsequent access reporting.

We will continue to take a transparent and collaborative approach to mitigate concerns about a lack of trust in ACC to present a non-biased analysis of access to the Scheme

We consider that taking a transparent and collaborative engagement approach with communities through the population agencies will mitigate concerns about bias. We will also use our own networks and engagement methods on this work through ACC staff dedicated to working with Māori and identified populations.

In addition, we commissioned an external peer review of the first access report to ensure transparency about the robustness of the chosen methodology. We have published the exploratory IDI analysis *'Measuring Equity of Access to ACC: Investigation of datasets and methods for ACC's reporting on Mana Taurite | Equity of Access'* and *'Analysis of Claim Rates to Support Mana Taurite | Equity of Access: Analysis of IDI data for Māori, Pacific people, Asian people and disabled people'* alongside the inaugural access report. This provides transparency about the evidence base for our decisions in how we arrived at the proposed methodology. See the Access Reporting page on the ACC for these reports.

We pivoted from the proposed Kaupapa Māori workstream to a Māori-centred workstream

Submitters supported the proposed Kaupapa Māori research and engagement approaches. However, we also received feedback that our foundational methods of data collection and analysis are not aligned with Kaupapa Māori methodologies. This is due to the access report research relating to Māori not being exclusively Māori-led, nor has it utilised Māori ways of collecting data. Pivoting to a Māori-centred workstream retains the ability to reflect Māori ways of analysis and reporting on Māori data, while allowing non-Māori to contribute to the research design, data collection, analysis, and reporting. We consider the development of a Māori-centred workstream an adequate adjustment that reflects the intention of the legislation to have specific access reporting for Māori.

We will continue to make efforts to maintain communication with and seek advice from Te Puni Kōkiri on the Māori-centred workstream throughout the development of the first report. In the meantime, we will continue to use internal advice from across ACC on the Māori-centred workstream and engagement approach.

Appendix 1: Access reporting submissions analysis summary

The tables below outline summary themes,[7] the number of submitters in which the theme was identified,[8] pieces of feedback supporting the theme, suggested enhancements to the proposed methodology and engagement approach on that theme, and our advice about how to respond to the submitters’ proposals and comments.

- Table 1 outlines the feedback on technical aspects of the research methods.
- Table 2 summarises the feedback about identified populations.
- Table 3 outlines the feedback on the proposed engagement approach.
- Table 4 summarises themes from the proposed Kaupapa Māori methodology.

Table 1: Technical research feedback

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
1. Research design – **Consider expanding the definition of ‘access’.**	Five submitters gave feedback on the definition of access. One submitter said that the way we have initially interpreted access as 'claim for cover' is not aligned with Parliament's intention, statutory context and ignores service delivery (access to entitlements) and that only looking at cover will	Separate ‘access’ into: cover, treatment, vocational and social rehabilitation, weekly compensation, permanent impairment compensation and dispute resolution.	We consider that claim lodgement is a practical measure of access at this point. Our exploratory IDI analysis *‘Measuring Equity of Access to ACC: Investigation of datasets and methods for ACC’s reporting on Mana Taurite | Equity of Access’,* concluded that a population-level injury prevalence rate matched with claim lodgement is a methodologically feasible first step in ACC

---

[7] See **Appendix 2** for method of feedback analysis.

[8] Feedback themes are not presented by weight or importance.

[9] Typographical errors in submitter quotes have not been corrected.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	ignore built-in discrimination in the way ACC operates. Another submitter said that survey data matched to claims will overlook the large number of whānau who were not able to have their claims either accepted by ACC (because they did not meet ACC’s criteria) or who did not bother to register their claim because they did not know that they could do so. ‘How do ACC know that their criteria for accepting claims is not a barrier?’ ‘It’s clear that the focus is initially on claim lodgement – is there a plan to include the other access points in the reporting especially as they relate to access disparities for Māori?’	Expand the definition of ‘access’ to include claim acceptance criteria.	understanding levels of access to the Scheme for Māori and identified populations. Without a population-level injury prevalence rate, we cannot see if a population or cohort within that population is getting injured and not lodging claims, or not getting injured. We understand that there are limitations in reaching certain populations. We are aiming to address this in our engagement approach and any qualitative research. ACC is currently investigating aspects of experience and outcomes, and insights from the access reporting work will feed into these broader work programmes.
2. Research design – **Clearly define ‘injury’.**	Two submitters suggested expanding questions to include other aspects of injury. ‘Determining the definition of an “injury” will be a critical piece of the puzzle for all of this work - what level of severity, and equally the length of time will have a significant bearing on how an individual response to the questions in the survey.’	Consider other aspects of an injury event, for example severity of injury and length of time injured when defining the injury question.	Our exploratory data analysis has shown that a measure of severity in the injury question – ‘stopping usual activities for longer than 7 days’ – is a comparable and useful measure of severity. We arrived at this conclusion by examining other injury questions used in previous Stats NZ surveys. We consider this to be an adequate first step for an initial estimation of injury prevalence in the population.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
3. Research design – **Ensure the survey questions are designed to elicit fit for purpose information and will reach identified populations.**[10]	Three submitters commented on the design of the survey questions, with specific suggestions for improving questions to assess recall of having a claim, broadening language and allowing for better data matching. 'Survey respondents could be asked if they made an ACC claim for their injury, so as not to rely entirely on data linkage.' 'Could the word stop be complemented with limited (stop or limited) to allow for a broader focus given the breath of ACC support.' 'The addition of questions that enable ACC to begin to understand the causes of barriers to access and possible improvements would be invaluable.' 'We know that alcohol and other drugs have been identified as factors contributing to injuries, and we are concerned that stigma associated with substance use is likely preventing people from accessing health care.'	Edit the injury prevalence question. Expand the injury survey question to say 'stop or limited your usual activities for longer than seven days' to account for the broad support provided by ACC. Ask in the survey if respondents made an ACC claim for their injury. Expand the survey question to ask about barriers and causes. Recognise stigma as an access barrier and include it in the baseline survey.	We intend to measure the gap between injury rate and claim lodgement rate to identify those who are injured and do not lodge a claim with ACC. Currently, ACC only holds data on claimants. An injury prevalence rate will help us to understand who is injured and does not lodge a claim. We will work with our partner agencies (Stats NZ and Ministry of Health) to consider the question terminology to account for the broader support ACC provides. We will consider changing the question to include 'limited', or other language for example 'affected.' We understand that this is a useful way of expanding the survey question, without it becoming too broad. Our exploratory analysis has shown that people do not have an accurate recall of lodging an ACC claim. We consider that rate of claim lodgement is an adequate first step in understanding the gap between having an injury and lodging a claim, or having an injury and not lodging a claim. We are considering other aspects of entry to the Scheme in

---

[10] See ACC's Annual Scheme Access Reporting for the proposed survey question included in the consultation paper.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
			ACC work programmes that the access reporting work will contribute to. We will consider expanding the injury question to ask directly about barriers and causes, once we have estimated baselines for an injury prevalence rate and know more about levels and disparities in claim lodgement between population groups. We will engage population agencies on the best ways to gather information on barriers and causes. Other feedback has outlined the limitations of using surveys with Māori and identified populations, and we know that the people that tend to respond to surveys may not represent all the communities from whom we need to hear. We intend to address this in subsequent access reporting and use culturally appropriate research methods to fill identified gaps. We will consider investigating stigma around drug and alcohol use as a barrier to access when we are investigating barriers.
4. Data collection –	Five submitters gave strong feedback on collecting information about key variables in a standardised way to ensure comparability and integration with the IDI.	Consider standardised data and variables.	Getting data standards, comparability, and linkages across datasets is crucial for this work. We acknowledge the complexity involved in getting

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
Survey data needs to be standardisable, comparable, and able to be linked to other datasets, while achieving the granularity requirements for nuanced analysis.	‘Part of the approach for the second and third reports includes collecting survey data via a Stats NZ survey. The report doesn’t discuss an alternative should that not be achievable. Should this be achievable – there are potential limitations due to comparability with the baseline measure (particularly comparability of how the populations of interest are identified through the different surveys).’ ‘Data linkage rates can be of variable quality and be biased by e.g. ethnicity. So, the quality of the data linkage could be a factor in analysing differences in claim lodgement rates.’ ‘The breakdown of ethnic groups within priority populations needs to happen to ensure a one-size-fits-all approach to treatment and intervention does not continue’. ‘Would the addition of WGSS[11] questions be an option too for consistency with other survey data sources? This will be particularly important if in future years you are looking to add a question to	Consider how the IDI will be used in the analysis. Consider comparability of measures across the survey datasets. Consider how data will be matched across datasets. Consider the granularity of information required. Consider how populations of interest will be identified in the research design to ensure accuracy.	accurate data, particularly on ethnicity and disability. We are working with partner agencies to get a question that will measure injury prevalence in the population into an existing population survey where the survey data is placed in the IDI. This means that injury prevalence data will be matched directly to ACC claims data in the IDI to estimate baselines for injury prevalence. For the first report, we will report on injury prevalence data gathered through a previous Stats NZ survey. For subsequent reports, we are working with partner agencies to develop an injury question that meets the comparability and linkage standards required, while ensuring that we get the information needed to conduct more granular analysis on variables of interest in the IDI. We acknowledge the risk that there are no other data sources for this work.

---

[11] Washington Group Short Set (WGSS) is a set of questions used in the New Zealand Census to identify disabled people.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	an existing survey that already includes WG[12] questions.' 'We believe that a fuller approach in looking at the diverse experience of different groups enables evidence-based interventions to address inequities. A grouped approach (using total ethnic communities) ensures full coverage is explored.'		We intend to work with Stats NZ, Ministry of Health, and population agencies to determine the best methods of identifying populations through survey questions and in the IDI.
5. Data sampling – **Ensure that the survey sample will be large enough to give statistical power and be representative of the populations.**	Three submitters outlined concerns about survey sample size and the ability to conduct intersectional quantitative data analysis on a small sample size. 'The usefulness of the estimates produced will depend on additional details about the survey design that are not provided, e.g. the quality of the frame from which the 580 individuals are selected each month, how many months the survey runs for, and the source and details of the benchmarks used in estimation. With response rate of around 7000 responses a year, it may be difficult to achieve accurate data for sub-populations, including ethnicity, disability status or age.'	Ensure a quality and representative survey sample size and frame. Ensure that identified populations are represented in the survey.	We will use probability sampling methods as this enables us to generalise the results from our measure of injury prevalence to the population. This will ensure that the sample is representative of the populations. We intend to use a survey vehicle that over-samples some populations for this purpose. Utilising this method also means we can measure the sampling error, which is an important component of probability sampling that allows us to draw robust research conclusions from the analysis. We acknowledge that survey sample size is a key challenge for the proposed methodology. We agree that a large survey sample size is required to achieve accurate injury data for populations and subpopulations.

---

[12] Washington Group

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	‘The proposed sample size of 580 people is likely to be too small to be weighted post-survey at the level outlined.’ ‘With regards to the proposed methodology comparing prevalence (from a small survey) and ACC claims data – if survey is done well, is accessible, with a good sample of disabled people, then maybe this approach will be successful. But injury rates could vary widely depending on the characteristics of who is sampled in the survey, as disabled people are a hugely diverse population.’		We agree that we require a quality and representative survey sample to conduct the granular analysis for intersectional reporting on disparities and levels of access to the Scheme. We agree that work will need to be done to ensure that identified populations are represented in the survey. We plan to do this by working with partner agencies to add a question that measures injury prevalence in the New Zealand population to an existing survey that meets these requirements.
6. Data collection – **Ensure that populations can access and complete the survey, using oversampling strategies and mechanisms for improving accessibility.**	Six submitters expressed concerns regarding accessibility of the survey for priority populations, and supported oversampling techniques to ensure population representativeness amongst respondents. ‘It is unclear where you are drawing your sample from to ensure you reach your priority groups. It is also unclear of the strategies that will be in place to support uptake of the survey, particularly taking into consideration accessibility needs (e.g. phone assisted survey) and to hear from those who do not engage with ACC.’	Outline how populations will be able to access the survey. Explain how population representativeness will be achieved in the survey. Consider translation into multiple languages and format.	We consider oversampling to be a strategy for mitigating small sample sizes for populations. However, we acknowledge that oversampling is not the only way to get representative samples. We will work with population agencies to raise awareness of ACC’s access reporting work through the groups and communities they work with. This will help us to identify gaps and to undertake other culturally appropriate and targeted research work to fill identified gaps in research. We will use a survey vehicle that includes representative sampling, allows a sample size error

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	'We specifically support the approach of oversampling for deliberate inclusion of Māori and Pasifika respondents. We also support the inclusion of Pasifika, Asian, and disabled communities as 'identified populations'.' 'We also support the oversampling of Pacific populations to ensure a more accurate picture is captured in ACC surveys for people who are not lodging a claim although have sustained an injury.' 'We would like ACC to consider adding a question on migrant status (e.g., NZ born, in NZ <1 year, in NZ 1 to <5 years, in NZ 5+ years) as a lack of awareness of the scheme is one possible reason for reduced access, and to consider oversampling recent migrants.' 'Will ACC consider translating the survey question into the 9 official Pacific languages (i.e. Tongan, Samoan etc)?' 'Translating any of the engagement, analysis and reporting into NZSL, Braille, Easy Read, Pacific and Asian languages will be very important to get meaningful depth to access and disparity issues for these populations.'		to be generated, and complies with government research ethics standards for research design, data collection and analysis, robust methods and informed consent practices. For example, The New Zealand Health and Disability Multi-region Ethics Committee provides advice and approves the New Zealand Health Survey. Data from this survey is of sufficient quality and standard to be place in the IDI. ACC knows that language barriers can be an accessibility issue when collecting information from identified populations. We will endeavour to use a survey vehicle that meets these accessibility requirements. For example, the New Zealand Health Survey uses a dual sample selection method whereby respondents are selected from an area-based sample and a list-based electoral roll sample, which aims to increase the sample sizes for Māori, Pacific people and Asian ethnic groups. Further, interviewers take copies of an information pamphlet in 11 different languages when visiting households to conduct the survey. Participants are informed they have a right to an interpreter when going through consent processes for the survey.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
7. Research purpose – **Be clear about how the access reporting information will be used.**	Five submitters wanted more information about how access reporting and survey information would be used to facilitate ACC knowledge, improve policy and service delivery, and measure the impact of funded initiatives. One submitter expressed the view that the access reporting work should be done independently from ACC. This submitter said that transparency in methodology development and reporting is important, and that trust in ACC to reliably perform the work and act on removing barriers is lacking. 'Also, while the design and commission of targeted interventions is signalled, it is unclear how this information will inform and improve policy and current delivery settings and systems.' 'Some thoughts should be given at the outset on impact measurement from any ACC initiatives to improve access. It is not sufficient to see an overall improvement from initiatives, but to understand what contributes to the most impactful change from the injured person's perspective.'	Explain how insights from access reporting information collection will be used across the organisation, address barriers to access, and to measure the impact of any interventions.	The AC Act 2001 requires ACC to report on access to the Scheme for Māori and identified populations. We will undertake to do this work in a transparent and collaborative manner. De-identified access reporting information will be used to improve access, experience and outcomes, under the Mana Taurite | Equity goal for Huakina Te Rā. It is intended for access reporting insights and information to feed into the Mana Taurite | Equity work. More information about this work is available here ACC8695-Annual-Report-2024.pdf p. 33. Any planned uses of information will be explained to survey participants, as part of routine government survey processes. For example, for the New Zealand Health Survey interviewers explain that participation is voluntary, and relies on the goodwill of respondents. The New Zealand Health Survey is conducted by an independently contracted research agency, which alleviates barriers to accessing the survey due to mistrust in government uses of information and personal data collection.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	'There is potential to include a life-course analysis at this stage [the third report], this could have value in identifying disparities and barriers at different stages of life which will support improvements of targeted interventions, especially for Māori.'		We are required to present the report to the Associate Minister for ACC (under delegation from the Minister for ACC), and in turn they must present the report to the House. This ensures a level of transparency in access reporting. We also have an access reporting page on the ACC.co.nz website, where we will publish the access reports and other relevant information.
8. Research design – **Support for mixed methods approaches.**	Five submitters expressed support for the proposed mixed method approach, using quantitative and qualitative research methods to collect information from identified populations, and offered assistance with designing and conducting the research. 'While there is a signal to gather quantitative and qualitative information, there are opportunities to maximise qualitative information. For example, if you are intended to return to the same people over time, then a brief phone call to ask 1-2 questions helps with retention as well as gathering qualitative information. Asking if survey respondents are open to being contacted in the future can also support the qualitative research you are signalling.'	Use all mechanisms to engage with existing data, and quantitative and qualitative forms of data collection and research to fill knowledge gaps.	We will continue to use existing datasets and research to understand barriers to access and reasons for those barriers. We will work with population agencies, and organisations identified through consultation feedback, to develop appropriate research approaches for the work. This will build on engagement networks already established at ACC and through the consultation process. The Māori-centred workstream will ensure culturally appropriate research methods are employed for Māori access reporting.

Themes	Submitter feedback summary[9]	Changes proposed by submitters	Advice
	‘There is no current identifier in the IDI for disability, which will limit the insights able to be drawn for that population group from administrative data alone. They will likely be among the most critical to use interviews and focus groups to draw further insight.’ ‘Recommend exploring the use of wānanga and moving beyond simplistic qualitative research methods.’ ‘The plan to conduct qualitative research required to fill gaps in knowledge for identified population groups about access, barriers, and causes at this stage will also be valuable. Reporting of Māori data should be strengths-based and include wrap-around qualitative insights to add important context to the qualitative data. The approach at this stage should also consider any relevant data issues and reliability of data for Māori e.g. biases, access issues, collection methodology.’		

Table 2: Feedback about Identified Populations

Themes	Submitter feedback	Changes proposed by submitters	Advice
1. Intersectionality is important.	Four submitters expressed support for the intersectional approach to draw out the nuance of experience of barriers to access across different groups. 'We suggest the report scope also includes intersectional analysis, as intersectional population groups are likely to have different patterns of claims. We see, when the data is available, that there are intersectional impacts that may compound equity of access. For instance, the New Zealand Health Survey data show that women often have poorer rate of psychological distress and experience higher rates of racism compared to men across Māori, Pacific and Asian ethnicities. There is very little data on intersectional of ethnicity by disability, LGBQ+ e.g. however, our communities tell us about the international complexity in their needs which are compounded by their invisibility in service provision data.' 'How will the survey delivery cater to the needs of tangata whaikaha Māori? (ie. Deaf, blind, intellectual disabilities).'	Consider using an intersectional approach to draw out compounding factors that inhibit access to health care.	Intersectionality has formed the foundations of the exploratory data analysis, and we intend to continue with this approach in access reporting work. This allows us to examine multiple characteristics of people's identities and other factors that we know impact on people's ability to access the health system and the Scheme.
2. Ensure that the work takes a strengths-based view on improving access to the Scheme.	Two submitters expressed concerns that investigating disparities will perpetuate deficit views of identified populations access to health care. 'Data analysis on minority groups can take a deficit view, particularly towards disabled and Māori. How will those undertaking the analysis ensure they do not perpetuate	Consider how deficit views of disparity impacts populations in the research design.	Along with barriers to access, we will investigate protective factors that may enhance access to health services and to the Scheme. This will allow ACC to support interventions that improve access to the Scheme arising from engagement with populations and

Themes	Submitter feedback	Changes proposed by submitters	Advice
	negative/deficit-based attitudes? What protective mechanisms are in place to prevent this?’ ‘When conducting research on causes of disparity, what comes to mind is reconciling the original purpose of ACC and pre-existing disability. Is it known/accepted that ACC can be a recourse for treatment for disabled people after an injury? And what about compensation for lost income when disability already impacts their ability to work/earning level. What happens for those on benefits, would receiving ACC make them ineligible for a period of time?’		communities, and may also provide information on how ACC can enhance current equity-related interventions to improve equity of access. Insights from access reporting work will feed into ACC work programmes where information on access can assist in targeting funding for interventions.
3. Seek consultation and advice from population representatives throughout the research, engagement and reporting.	Four submitters expressed direct support for the intention to consult and work with population representatives. ‘You need to use Māori and Pacific data analysts and advisors. There must be context in any reporting, which cannot be done without lived experience within the work team and leadership. Consultation does not mean "we'll write it, then give it to you to proofread". Consultation means Māori, Pacific, Asian, Neurodivergent, Disabled and Rainbow people are at the table at every stage of the development of this project.’ ‘Kaupapa Māori methodology – we strongly support the intention to work with Māori on this to ensure appropriate analysis.’	Be clear about when and how consultation with populations will occur throughout the research.	Where possible, we’ve worked with Māori, Pacific and disability advisors at each stage of the methodology proposal development, and we will continue to seek advice from relevant advisors. Through this consultation on our proposed engagement approach, we received advice from a number of organisations and individuals with whom we can work to ensure that consultation with and advice from population representatives continues to occur.

Themes	Submitter feedback	Changes proposed by submitters	Advice
	‘We recommend the engagement approach with Pacific people include meaningful engagement and consultation methods, not only with the Ministry for Pacific Peoples but with Pacific data experts, Pacific communities, and particularly Pacific people who have been injured and are eligible for the ACC scheme.’		
4. Feedback specific to Pacific people: • **Take the research to communities.** • **Address data quality issues.** • **Pacific data sovereignty.** • **Pacific research methodologies.**	Four submitters discussed concerns about data quality, data collection and suggested appropriate research methods for research and engagement with Pacific communities. ‘The quality of data for Pacific people is already lower than for most other population groups.’ ‘Honour Pacific data sovereignty. Consider connecting with the Pacific Data Sovereignty Network. The group aims to establish a unified voice and collective guardianship and advocacy of data and information about Pacific people living in Aotearoa. Essentially, nothing is about Pacific people without Pacific people. Utilise NGO’s navigators and community champions.’ ‘“Coconut wireless” (word of mouth) is better to reach Pacific populations than online methods like surveys.’ ‘Use Talanoa as a research methodology.’ ‘If using surveys, then consider incentivising participation in the survey. This is noted as a particularly good way to reach young Pacific people.’	Address and be mindful of poor-quality data. Consider taking the survey to communities and people. Consider connecting with Pacific Data Sovereignty Network. Use Talanoa as a research methodology. Consider incentivising participation in surveys. Consider facilitating focus groups with Pacific people to garner better engagement.	We will continue to work with Pacific people on research design and dissemination to ensure Pacific people’s representativeness. We will consider how we can use best practice engagement approaches and appropriate research methods to ensure that we get quality data on injury prevalence, disparities in claim lodgement, barriers to access and causes of barriers to access for Pacific people, such as Talanoa and engagement with Pacific research methods. We will consider Pacific Data Sovereignty as the work progresses. Work is underway to change our language from ‘Pasifika’ to ‘Pacific people’ throughout ACC.

Themes	Submitter feedback	Changes proposed by submitters	Advice
	‘Focus groups are best to capture insight and have been proven to get better engagement than online.’ ‘There is a long-standing, well-documented undercount of Pacific people in official statistics. It will thus be important for the design and the methodology of this report to consider ensuring Pacific specific approaches are employed that will increase participation and engagement from Pacific people in the survey.’ ‘We would also like to note our preference for the use of Pacific people instead of Pasifika. We believe that Pacific people more accurately captures the diverse nature of the population that identifies with being of Pacific heritage.’	Change ‘Pasifika’ to ‘Pacific people’.	
5. Information specific to Asian people and Ethnic Communities: - **Better data on Ethnic Communities is required.**	One submitter expressed the need for quality data on Ethnic Communities and considered investigating Ethnic Communities as an identified population. ‘We agree and support the inclusion of the Asian population however, ethnic communities are largely invisible in public sector data. As such, they are missed in government investment, policy development and service delivery interventions.’	Include Ethnic Communities in reporting analysis.	Our intersectional approach allows us the flexibility to adapt groups of interest as new data is collected. We will continue to work with Stats NZ and the Ministry for Ethnic Communities on better data collection methods to enable the intersectional approach and be able to report on diverse Ethnic Communities’ access to the Scheme. We will also consider expanding from our initial focus on Asian people to

Themes	Submitter feedback	Changes proposed by submitters	Advice
			include other Ethnic Communities. The legislation specifically provides us with the flexibility to adapt identified populations as new evidence and data is collected.
6. Information specific to disabled people: - **Accurately identify disabled people through the survey and through the IDI.**	Three submitters expressed concern about the consistency of the approach in identifying disabled people across surveys. 'The consultation document notes that the ACC survey includes a question for people to identify as disabled, given that self-identification questions have known issues in terms of identifying a well-defined disabled population, it would be helpful to understand more about the wording of this question and any testing that has been carried to understand its effectiveness and/or limitations. Would the addition of WGSS[13] questions be an option too for consistency with other survey data sources? This will be particularly important if in future years you are looking to add a question to an existing survey that already includes WG[14] questions.' 'Suggest that the disability responses include an identification system for type of disability to understand the different risks of injury for the population e.g. mobility impairments, cognitive impairments, sensory impairments (specify vision/hearing as will have different associated injury risk), age related etc.'	Link disability identifiers to comparable identifiers, for example the Washington Group Short Set.	We will work with partner agencies on the disability identifier in the survey. Focus groups and interviews will be considered as part of appropriate research methods for disabled people, as with other populations.

---

[13] Washington Group Short Set (WGSS) is a set of questions used in the New Zealand Census to identify disabled people.

[14] Washington Group – as above.

Themes	Submitter feedback	Changes proposed by submitters	Advice
7. Information specific to other populations: • **Consider including other groups, particularly women and LGBTQIA+ and age-related groups.**	Three submitters expressed the view that identified populations should be expanded. One submitter recommended the following groups: Māori, Pasifika, women, disabled people, rural communities, people of specific ages, e.g. younger persons and older persons. One submitter suggested looking at populations by 'geographic regions, aspects of the AC scheme, types of disability, receipt of specific supports (ACC, Disability Support Services), iwi/hāpu, or community.' 'The paper mentions the term gender in several places – including in relation to benchmarks, and the Stats NZ research database. In 2022, the Data standard for gender, sex, and variations of sex characteristics became a government mandated standard. The standard outlines the concept definitions and provides guidance on data collection (we'd encourage you to consult the guidelines for any survey data collection). The data system is still in the process of shifting to the updated standard and concept definitions and we do not yet have consistent capture of the gender concept across the system or reflected in the IDI.' 'We encourage further consideration of other communities experiencing unmet health needs beyond the three proposed groups. For example, we note the lack of consideration for the	Include women, rural communities, people of specific ages (older or younger), and LGBTQIA+ community.	Through research and work to develop ACC's approach to achieving our Mana Taurite | Equity goal, Māori, Pacific people, Asian people, and disabled people have been identified as ACC's identified populations. In recommending these groups, we considered several factors relevant to ACC, including health and social care access and outcomes, known barriers to access, availability of ACC and agency data, and reporting feasibility and methodological robustness. These groups are also identified, along with women, in ACC accountability documents, including the ACC Statement of Intent 2023-2027 and Huakina Te Rā. It is well documented in the health access literature that Māori, Pacific people, Asian people and disabled people experience inequitable access to health and social services. The

Themes	Submitter feedback	Changes proposed by submitters	Advice
	rainbow communities' needs within this paper, considering known existing barriers for access to health care experienced by this population in general.'		intersectional approach enables us to look at multiple aspects of identity (age, gender, location, amongst others) where possible. We have included an analysis of gender, location, age and other factors in the initial IDI analysis of claims rates.

Table 3: Engagement

Themes	Submitter feedback	Changes proposed by submitters	Advice
1. Be ‘relational’, not ‘transactional.’	Four submitters confirmed the importance of researching and engaging with communities in the right ways, with practical suggestions for how to achieve this. ‘Relational engagement to elevate voice, and support responsiveness and accessibility is a key consideration for the current and future methodologies. This will give it further credibility with the prioritised groups.’ ‘At every level of development of your kaupapa, there must be allowance for whanaungatanga, time to interact, hui together, the provision of kai, sending writing or oral recordings and transcripts back to contributors for checking and amending.’	Ensure that initial contact with research participants facilitates sustainable relationships.	We intend to work with population agencies to raise awareness of access reporting work. We will be guided by ACC’s internal and external experts on appropriate research methods and points of engagement with Māori and identified populations. For example, ACC is in the process of building formal relationships with iwi throughout the country. We will strengthen our relationship with iwi partners through whakawhanaungatanga/relationship building by correctly engaging with iwi partners on their terms, adopting their tikanga (tika), being honest, genuine and sincere when we engage (pono), and always demonstrating compassion, empathy and sympathy with all persons involved (aroha). We intend to develop our Māori-centred approaches through the Māori-centred workstream with relevant ACC staff, iwi partners, and other rangahau Māori experts to improve access, experiences and outcomes for Māori.
2. Use co-design or co-production methods to ensure that population voices are central to the research.	One submitter expressed support for the use of co-design research methods. ‘Move beyond just consultation to become a full co-design process between ACC and each of the population groups being researched, including disabled people.’	Co-design a research approach for each of the identified populations.	We will consider building co-designed approaches into access reporting documents and workstreams that can contribute to the larger access reporting work. We have the ability to be flexible about which groups we chose to report on as new research and data comes in. We intend to prioritise these voices as we work through access reporting.

Themes	Submitter feedback	Changes proposed by submitters	Advice
	‘Qualitative research about report 1 & 2 findings will provide best insights if co-produced with the targeted priority groups found in the previous years (not just Kaupapa Māori). Prioritised, higher risk disabled people, women, LGBT+, children and other minority ethnic groups will all require research methodologies which are suited and designed by themselves to be most revealing and productive.’		
3. The identified populations are over researched – how will the engagement approach address this?	Four submitters identified research fatigue that is present amongst identified populations. ‘There is survey exhaustion and consultation fatigue across the Pacific community.’ ‘Māori are over-researched and over-surveyed but “under-listened to” and under-actioned by government. Whānau Māori have told ACC (and others in government) what the issues are, and what their needs are, many times before. ACC need to prove that this research will be different by ensuring access reporting is tied to access action and solutions.’	Undertake a community approach with people to engage with the survey/research.	We will aim to give every opportunity to ensure that participants understand the context and purpose of the research. We understand that these issues are not new to identified populations. The research process for access reporting will meet our legislative requirements. Work is already underway to demonstrate our commitment to making positive changes on issues relating to access, barriers and outcomes for Māori and identified populations. Our access reporting approach will help us to understand what difference this work is making in access to the Scheme for Māori and identified populations.

Table 4: Kaupapa Māori methodology & Māori engagement

Themes	Submitter feedback	Changes proposed by submitters	Advice
1. Kaupapa Māori or Māori-centred?	Five submitters expressed support for the utilisation of kaupapa Māori approaches in the work. However, two submitters pointed out that the way the data has been collected in this work so far has not been Kaupapa Māori and suggested considering moving to a Māori-centred or Māori-focused approach. ‘Any interaction with Māori must be for the purposes of recording a Māori-lens, and must be culturally appropriate in order to capture the Māori story, the Māori experience of mainly, historically and very much present day, being on the receiving end of government 'initiatives' such as the services provided by ACC.’ ‘Engaging with people who are deeply engaged and experienced in developing Kaupapa Māori methodologies cannot be overstated. Engaging with people who simply happen to be Māori and who don’t have the prerequisite knowledge and experience isn’t enough.’ ‘Can Kaupapa Māori survey methods be employed? Can Māori researchers be engaged in the process for data collection, analysis and reporting?’	Pivot to Māori-centred approaches and continue to work with Māori experts to ensure quality data collection and reporting.	Where possible and practical, the fundamental principles of Kaupapa Māori methodologies will be employed. We acknowledge that data were not collected using kaupapa Māori based methodologies. Therefore, this requires this work to be reclassified as Māori-centred instead of Kaupapa Māori. The primary challenge will be to identify if and where any sampling gaps are present, and seek to address those gaps using Māori-centred approaches. Part of that approach is to design a Māori-centred workstream that works with relevant population agencies and prioritises Māori methods of engagement with whānau, marae, hapū, iwi, and/or hāpori (community).
2. Consider Māori data sovereignty.	Four submitters suggested considering Māori data sovereignty principles in the work.	Consider how Māori data sovereignty will be upheld in the research	Guidance and advice will be sought from relevant ACC Māori data experts regarding upholding principles of Māori data

Themes	Submitter feedback	Changes proposed by submitters	Advice
	‘How will Māori participants data be protected?’ ‘Data sovereignty and (mis)use of data pertaining to Māori and to disabled groups results in reluctance to engage. Further thought needs to be given to these issues and how ACC will uphold data sovereignty and ensure that data gathered is not weaponized against group such as disabled and Māori.’ ‘Any research undertaken must also incorporate all aspects of Māori data sovereignty.’		sovereignty, kaitiakitanga and mana-enhancing data sharing and usage practices.
3. Ensure accessibility and uptake of the survey for Māori.	Six submitters provided feedback on data quality for Māori and the historically low response rates to surveys, particularly those administered by government. Using Māori ways of engaging is required. ‘Bear in mind that census data for Māori from the 2018 census is not accurate and that Māori as a group have historically lower response rates to survey and census, which impacts on data validity’. ‘Mention is made of Kaupapa Māori research methods. However, the language remains stubbornly focused on interviews and focus groups, which are predominantly Pākehā qualitative research methods.’	Pivot to Māori-centred approaches driven by Kaupapa Māori values and methods of engagement.	We have a Māori-centred workstream. We will work with relevant population agencies and ACC staff to increase awareness of the workstream and the methodologies being employed will help to drive a greater response rate to the survey.

Themes	Submitter feedback	Changes proposed by submitters	Advice
	‘How will ACC reduce the risk of survey fatigue / research burden on Māori participants and their whānau?’		
4. Consult with Māori throughout the research and engagement.	Five submitters confirmed the requirement to consult with Māori throughout the engagement and development of the research. One group stressed the importance of engaging in partnership with iwi kanohi ki te kanohi. ‘How will the process be reciprocal and respectful to Māori participants and their time? How will Māori participants be compensated?’	Be deliberate in how we enact tikanga during our kaupapa.	ACC currently has consultation processes in place which are being followed. We need to better illustrate that these processes exist, and we are proactive in engaging with Māori. We must also illustrate that we both understand why we are engaging with Māori, and that we understand the significance of the processes in place.
5. Explain how the information will be used to enhance Māori access to the Scheme.	Three submitters expressed the view that information collected should be used to improve Māori access to the Scheme. ‘Data analysis on minority groups can take a deficit view, particularly towards disabled and Māori. How will those undertaking the analysis ensure they do not perpetuate negative/deficit-based attitudes? What protective mechanisms are in place to prevent this?’ ‘ACC should be clear on how access reporting will ultimately be used to improve access to ACC for Māori, including by building into the process that it will act on opportunities for ‘small wins’ while the three-year process	Use Māori data analysts who implicitly understand Kaupapa Māori Research principles.	We will seek to prioritise Māori epistemologies, and the intergenerational aspirations of Māori by flipping the deficit-based thinking approach and delve into Māori-centred methods of engagement. We will design Māori-centred approaches to collect, collate and analyse data with an explicit focus on the content of subsequent access reporting. Doing so will allow for an enhanced understanding of the barriers to access, the causes and inhibitors of access.

Themes	Submitter feedback	Changes proposed by submitters	Advice
	is occurring to ensure ACC don't repeat the same mistakes as past governments, agencies, and researchers (wait until the end to make meaningful change for whānau and share what whānau already know).' 'Ensure data is contextualised within a Māori framework that is meaningful for whānau Māori and shows how the data is being used to make a difference for them.'		An examination of the protective factors which are currently enabling access and continued engagement in the Scheme will be used to enhance the community-based approaches that protect people. Insights from the Māori-centred access reporting workstream will inform ACC work programmes, for example Kaupapa Māori commissioning services.

Feedback considered out of scope for access reporting

Whaikaha – Ministry of Disabled People discussed changing ACC forms to include a disability indicator.

Appendix 2: Method of feedback analysis

ACC used qualitative content analysis to summarise general themes from the submissions. First, staff conducted a reflexivity session to identify any gaps in perspectives. We were satisfied that we had good coverage across multiple aspects of identity.

We then used a grounded theory approach to identify themes arising from submitter feedback. These themes were summarised and presented with evidence to support the identification of the summary themes in the tables above.

Throughout the analysis process we consulted with ACC staff dedicated to working with Māori and identified populations. Their perspectives guided the shaping of the themes to ensure that identified population views were adequately raised through the summary themes.