Health New Zealand
Te Whatu Ora

29 June 2026

Nigel Gray
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Tēnā koe Nigel

Your request for official information, reference: HNZ00204182

Thank you for your email on 31 May 2026, asking Health New Zealand | Te Whatu Ora (Health NZ) for the following under the Official Information Act 1982 (the OIA):

> *1. Medication-Exposure Field in Suicide Reporting Please provide all documents, policies, internal guidance, data standards, or reporting frameworks that explain:*
>
> *why medication exposure (including prescribed psychotropic and non-psychotropic medicines) is not a mandatory field in national suicide reporting systems,*
>
> *whether this omission is intentional, historical, or the result of system-design constraints, and*
>
> *any assessments, reviews, or discussions regarding the inclusion of medication-status fields in suicide surveillance datasets.*
>
> *2. Risk-Warning Alignment*
> *Many commonly prescribed medications include adverse-effect warnings for:*
>
> *aggression*
>
> *akathisia*
>
> *behavioural toxicity*
>
> *self-harm*
>
> *suicidal thoughts or actions*
>
> *Please provide any documents, risk assessments, or internal analyses that consider whether these known risks should require medication-exposure data to be collected in suicide reporting.*
>
> *3. System-Design Decisions*
> *Please provide all documents that describe:*
>
> *how the decision was made not to include medication exposure as a standard data field,*
>
> *any consultations with Medsafe, coronial services, or mental-health services regarding this decision, and*
>
> *any evaluations of the impact of this omission on suicide-prevention policy, pharmacovigilance, or public-health surveillance.*

4. Future Plans
Please provide any documents, proposals, or work programmes that relate to:

adding medication-exposure fields to suicide reporting,

linking coronial toxicology data with national health datasets, or

improving monitoring of medication-related behavioural adverse effects.

If no such documents exist, please confirm this explicitly.

5. Data Held
Please confirm whether Health NZ holds any dataset — historical or current — that records whether individuals who died by suicide were:

taking prescribed medication,

recently started or stopped medication, or

undergoing dose changes.

If no such dataset exists, please state the reason.

Response

Health NZ has considered your request regarding medication exposure in suicide reporting systems. Following consultation with our relevant teams, we are not aware of any documents, policies, guidance, data standards, or analyses that address the inclusion or exclusion of medication-exposure fields in national suicide reporting, including any rationale, risk assessments, or system design decisions. We are also not aware of any current work programmes or proposals specifically focused on adding such fields, linking coronial toxicology data with national datasets, or monitoring medication-related behavioural adverse effects in this context.

In New Zealand, information on suicide is managed via the Office of the Chief Coroner in the Ministry of Justice and in Health New Zealand's national Mortality Collection. A death can only be determined to be a suicide by a coroner. Deaths where intentional self-harm is suspected are referred to the Coroner for investigation to determine intent. The Coronial Services Unit manages and maintains information relating to these cases throughout the investigation process. Information on confirmed suicides is then provided to Health New Zealand to include in national mortality data.

Where individual cases are subject to a serious adverse event review and have also been referred to the coroner, Health NZ is unable to comment on the specific circumstances.

In practice, where a suicide is considered an adverse event, a local review may be undertaken, and medication use may be considered as part of that process. Adverse event reporting datasets do not routinely capture medication information unless the adverse event relates to a medication error. These reporting requirements are set by the Health Quality & Safety Commission. Health NZ also confirms it does not hold a national dataset capturing whether individuals who died by suicide were taking, starting, stopping, or changing prescribed medications.

We consulted with the Ministry of Health (Suicide Prevention Office) and the Ministry of Justice (Coronial Services) regarding your request. Both agencies advised they do not hold information in scope of the specific information you requested, and therefore a transfer under section 14 of the OIA was not made to their agencies.

Accordingly, your request is refused under section 18(e) of the OIA, as the information requested does not exist or, despite reasonable efforts, cannot be found. To the extent that your request seeks explanations, analyses, or reasoning that are not documented, it is also refused under section 18(g), as the information is not held by Health NZ and we have no grounds for believing it is held by another agency subject to the OIA.

How to get in touch

If you have any questions, you can contact us at hnzOIA@tewhatuora.govt.nz.

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at www.ombudsman.parliament.nz or by phoning 0800 802 602.

As this information may be of interest to other members of the public, Health NZ may proactively release a copy of this response on our website. All requester data, including your name and contact details, will be removed prior to release.

Nāku iti noa, nā

Matthew McLay

Manager Government Services

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