

New Zealand regulatory approaches to tattooing

New Zealand/ Aotearoa: 4,467, 261



How we see ourselves

Outpost of Empire

Oriented to UK

Rule bound



Member of Commonwealth

Treaty of Waitangi, Pacific/Asian

“She’ll be right” attitude/

High level of tolerance for risk

Appetite for Risk



Image:<http://www.bungee.co.nz/kawarau-bungee-centre/kawarau-bungee>

All Blacks



Image October 5, 20122012-10-05 16:00:00 - Source: David Rogers/Getty Images Europe)

Features of NZ's health system and liability regime

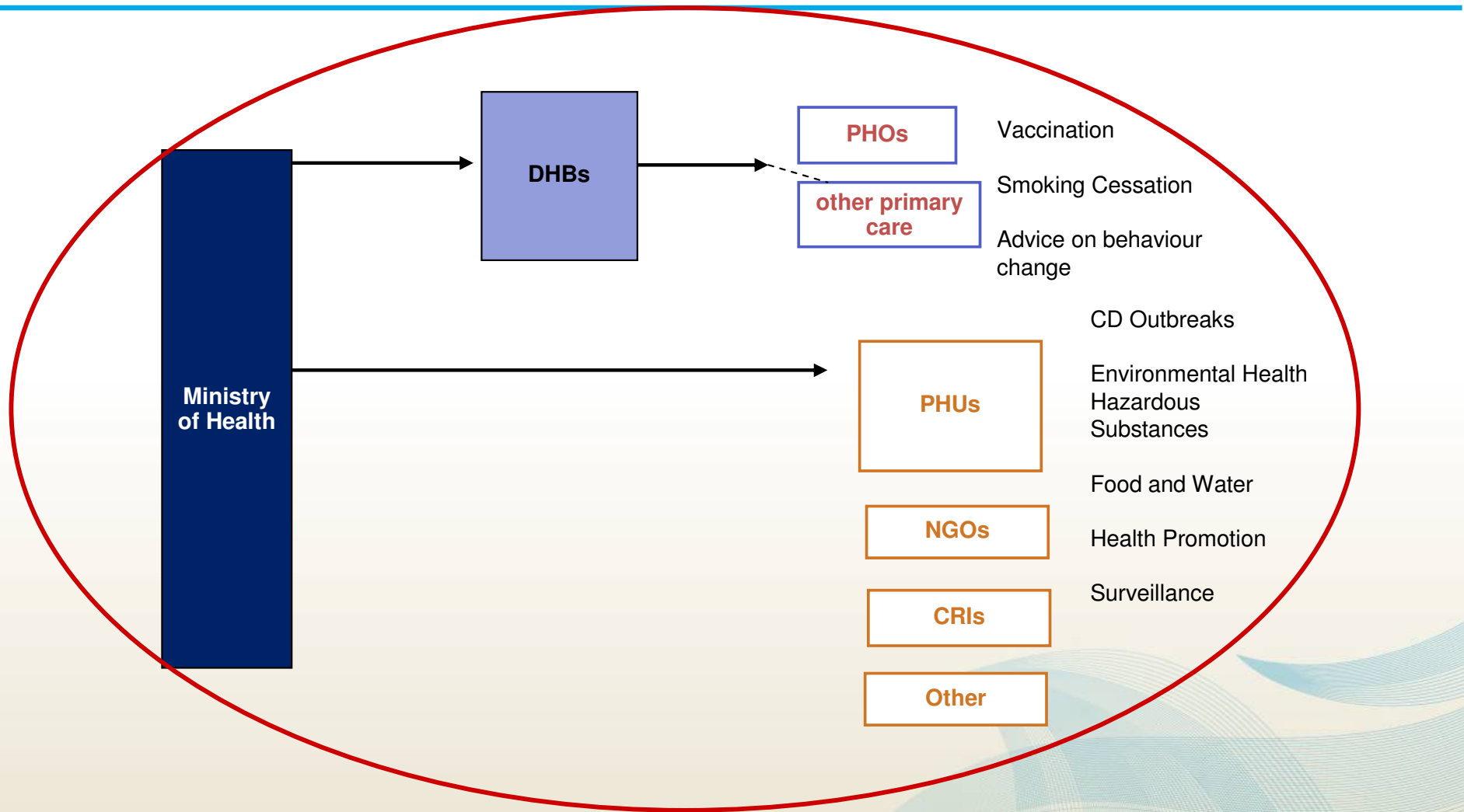
Publicly funded , universal access to healthcare for all citizens and permanent residents. Primary care significantly subsidised, hospital care free.

Comprehensive, compulsory, “no fault” national accident compensation regime. Extremely limited ability to sue in tort for compensation for personal injury.

System delivers well in terms of providing treatment, rehabilitation and compensation. Injury prevention needs further work (200 000 people harmed at work annually, economic, medical and social cost of this = 2% GDP).

Current Government preference for light handed regulation (“less red tape”)

Ministry of Health



Social context of tattooing in NZ

New Zealand is the most tattooed country in the world– 1/5 are tattooed (UMR Research 2009). New Zealanders under the age of 30 are more likely to have a tattoo than any other age group. 22% women, 17% of men.

Tattoo (moko, pe'a) has particular cultural significance for Māori and Pacific cultures.

Traditional tattoos denote links to culture and family, life achievements.

A *taonga* (treasure), protected under Treaty of Waitangi.

NZ becoming a destination for tattoo tourism due to popularity of so called “tribal” tattoos.

Tā moko/ moko kauae



(*Te Aho-o-te-Rangi Wharepu, Ngati Mahuta*),
oil on canvas painting by Charles Goldie, 1905,
Dunedin Public Art Gallery)



(Photothèque du Musée de l'Homme via French National Library)

Tradition Samoan Tattooing - Pe'a

*Tupu le tane, te le
tatau*

'The man grows up
and is tattooed'

*Tupu fafine
fanafanau*

'The woman grows
up and she gives
birth.'

(Image: July 24, 20122012-
07-24 16:00:00 - Source:
Sandra Mu/Getty Images
AsiaPac, www.zimbio.com)



Samoan Tattooing – Pe'a/ Malu

Rite of passage,
significant cultural
event, cause for
family celebration

Repeat sessions
over a few weeks,
usually done in
recipient's home

(Image Sandra Mu/Getty Images
AsiaPac, www.zimbio.com)



Traditional Tools



Traditional tattooing implements made
from boar tusk, shell, twine

(Image http://hankefamily.net/The_Samoan_Tattoo.html)

Problems experienced

Unrestricted importation and sale over internet of tattoo ink. Uncertain chemical constituents/ concerns about sterility.

Greatest problem: Infection, particularly associated with traditional Samoan tattooing.

Four cases of necrotising fasciitis, one death.

Bacterial culprits: Staphylococcus aureus, streptococcus pyogenes, pseudomonas aeruginosa, cutaneous corynebacterium diphtheriae, stenotrophomonas maltophilia

Customary tattoo risks

Case 1: 46 yo, NF both legs, septic shock, myocardial infarction, ICU admission, antibiotics, multiple debridements, skin grafts. Survived.

Case 2: 27 yo, NF anterior abdominal wall, back, buttocks. Septic shock, renal failure, coagulopathy. ICU, dialysis, transfusions, antibiotics, debridement, grafts. Survived.

Case 3: 30 yo, NF both thighs. Septic shock, multi organ failure, coagulopathy, laparotomy, bowel resection. Died.

Case 4: 50 yo, NF right thigh. Antibiotics, transfusion, debridement, skin grafts. Survived.

Further 2 cases of *C. diphtheriae* in Wellington: man who underwent traditional Samoan tattooing in Samoa infection transmitted to close family contact.

Current framework for regulating tattooing

Generic provision enables regulations to manage public health risks (s 117 Health Act 1956)

117 Regulations as to public health

(1) The Governor-General may from time to time by Order in Council make such regulations as may in his opinion be necessary or expedient for giving full effect to the provisions of this Act, and for all or any of the following purposes:

(a) the improvement, promotion, and protection of public health:

(b) the inspection, cleansing, purifying, disinfection, fumigation, and isolation of ships, aircraft, houses, buildings, yards, conveyances, drains, sewers, and things:

(c) the destruction of insanitary things:

(d) the vaccination of persons for the prevention of quarantinable diseases and other diseases, and the adoption of any other measures for the prevention and mitigation of disease:

(e) the provision of medical aid, transport, accommodation, and curative treatment for the sick:

(f) the transportation and disposal of the dead:

(g) the isolation, disinfection, and treatment of persons suffering from any infectious disease:

(...)

But no specific regulations for skin piercing activities.

Health Act 1956

Principal legislation dated, with low level sanctions:

136 General penalty for offences

Every person who commits an offence against this Act, or against any regulations made under this Act, for which no penalty is provided elsewhere than in this section is liable to a fine not exceeding \$500 and, if the offence is a continuing one, to a further fine not exceeding \$50 for every day on which the offence has continued.

New legislation before Parliament will enable better regulation (more focussed on addressing specific risks, more meaningful range of penalties).

Until then: National Guidelines

Ministry of Health *Guidelines for the Safe Piercing of Skin*

Minimising the risk of transmitting infection

Reducing cross contamination – cleaning, disinfection, sterilisation equipment (autoclaves)

Sterile piercing technique (sterile, single use materials, skin preparation, no touch technique, sharps management – (AS 4031:1992, AS/NZ 4261:1994)

Operator health and hygiene (health status, Hep B vaccination, HIV status, PPE)

Managing sharps injuries, bleeding

Biological waste management (NZS 4303:1990 Health Care Waste Management)

Informed consent procedures, record keeping, after care advice

o le tatau pe'ā māe'a

ma a'o le'i 'āmatalia le tā'aga fa'apēnā
lāina o le tatau po'o le tāgofia fo'i o
ua 'uma ona tāina. Fufulu mamā le

mā i taimi 'uma mo le tā'aga. Lāfoa'ia
tatau e 'ese mai i lāpisi masani a le

e tatau

lāvaina ia lāvalava e le āfāina ai le
omoe fa'atasi pe fa'aaogāina fa'asolo
solo tā'ele.

ina le tatau 'ae ia 'oti fa'apupu'u atigi
'alia ai le tatau.

na ia inumia fuālā'au o vāega tīgā o le
'ā mana'omia po'o le fa'afeso'ota'i o
lau foma'i fa'ale'āiga.

O fa'ailoga va'aia o le a'afiaga o le tatau e aofia ai le:
fufula ma 'ua tīgā, 'aloua ma 'ua fiva, (fa'alogoina o le
vevela ma le malūlū), manava tatā ma ma'i sua.

'Afai o i ai ni ou popolega i lou soifua mālōlōina, 'ua tatau
ona fa'afeso'ota'i vave loa lau foma'i fa'ale'āiga ma ia tauina
fo'i i lau tufuga tā tatau.

Pe'ā fia maua se fesoasoani fa'afeso'ota'i

Foma'i fa'ale'āiga:.....

Tufuga tā tatau:

TĀINA O LE TATAU SA



TĀINA O LE TATAU SAMOA

'O le ā le Tatau?

O le tatau o le lā'e'i Samoa moni 'ua fa'atinoina lona tāina i 'auala fa'asāmoa ma'ua sili atu nei i le lua afe tausaga. E tele tagata Pasefika 'ua tātāina a lātou tatau fa'aleagānu'u.

'O ai e fa'atinoina le tāina o le tatau?

O le tā tatau a Sāmoa 'ua ta'ua o le Tufuga. O lenei tōma'i e tu'u fa'asolo mai le tufuga i lona atalii, e ā'oga fa'ata'ita'i ai i le tāina o le tatau (pe'a) mai le tele o tausaga. O tufuga 'ua a'oa'oina ma fa'aaluina le tele o taimi e a'oa'o ma fa'amāsani ai i le tāina o mamanu e fa'aaogāina ai le au.

Fa'afitauli (A'afiaga)

O tāga tatau fa'alēagānu'u e i ai ona fa'afitauli. O le fa'amanuaina o le pa'u, o lona uiga 'ua fa'afaigōfieina ona a'afia i siama. O le a'afiaga o manuaga o le pa'u e o'o ina fa'atupulaia ai ma'i ma mā'ila'ila ai le tino.

E o'o lava i vāega o le toto 'ua i ai lona a'afiaga e mafai ona pipisi atu ai siama:

- O siama 'ua fa'asalalauina i le toto o lo'o i ai:
- O siama e mafua ai a'afiaga o le pau
- O a'afiaga o ne'i siama e ono maua ai i le Ate fefete B ma le C ma o'o ina le mafai ai ona toe togafitia pe maua ai fo'i i le kanesa.
- O siama o le HIV e tupuga mai ai le AIDS.

O le tū ma le aga o le tāina o le tatau e fa'aaogāina ai le au ma le lama 'ua fa'afaigatā ai ona fa'aititia nisi o a'afiaga mai siama o le toto' ua pisia. O le lava o le silafia o le

Fa'atalatalanoa ni a'afiaga o le soifu le (ma'i suka) po'o ni popolega e ono malosia pe afai e uma ona taina lau t

'O ā ni lagona e tulai m

'Aua e te fefe i le fesiligia o lau tufuga tā

- E taua le mamā o le tino a'o le'i 'ām muamua tā'ele, fa'aaogā le fasimoli le pau a'o le'i āmatalia le tatau.

O le Tufuga ma le autāpe'a e tatau o

- Fe'soasoani e fa'amālamalamaina l le fa'atinoina o le tatau, o ni fa'afitauli se fe'soasoani pe'ā mana'omia.
- la fa'aaogā totigi lima e lafoāia pe'ā 'u ma tioata e puipuia ai mata.
- la mamā ma ia sã le ulaula i totonu
- la fufulu mamā (fa'availā'au) au ma teu lelei i se apimau (pusa)

Customary Tattooing Guidelines for Operators

Response to cluster of NF cases. Reduce (but do not eliminate) risk. Guidelines cover:

Personal hygiene, PPE

Infection control

Premises hygiene

Cleaning, disinfecting, storing tools

Ink preparation, single use containers, not reusing ink

Biological waste management

Template informed consent and aftercare information provided in pamphlets in several Pacific languages.

Local government

Local authorities can make bylaws about sanitary precautions for any business or trade in their area (Health Act). Territorial authorities (TAs) can also regulate health issues under Local Government Act.

9/64 specifically regulate tattooing/ piercing. Auckland (Tamaki-Makaurau) currently harmonising tattooing/piercing regulations.

Local authorities appoint environmental health officers to inspect for compliance with bylaws and regulations (section 23 Health Act 1956).

EHOs work closely with regional public health practitioners, health protection officers and medical officers of health. MOUs and service level agreements set out operational responsibilities and collaboration between agencies.

Experienced personnel and quality working relationships support effective co-ordination.

Draft Auckland Council Health and Hygiene Bylaw 2013

Covers a range of activities (tattooing, piercing, acupuncture, electrolysis, nail care, colonic irrigation). Aimed at reducing risk of infection.

Applies to “traditional tools tattooing” but not traditional, non commercial, marae based, ta moko (Māori tattooing).

Allows Council to develop (after consulting with medical officers of health and industry):

Codes of practice relating to activities that pose a health risk

Minimum standards for premises, construction, fit out and maintenance

Best practice standards

Licensing tattooing studios

Penalties: \$20,000 NZD

Code of Practice

In addition to MOH skin piercing guidelines, Code of Practice requires:

More detailed informed consent/ record keeping including information about:

Clients health status (including infectious disease status, haemophilia, anticoagulant use, history of allergies, epilepsy/seizures)

Age restriction: 16 years for piercing/ 18 years for tattooing (unless parents consent)

Record keeping for: incidents where accidental exposure to customer's blood or body fluid occurs. Must keep name and address of those exposed and steps taken to respond to incident.

All records to be kept for 2 years and made available to Council.

Tattoo Inks

Tattoo ink : Concern about high levels of heavy metals, organic pigments, polycyclic aromatic hydrocarbons), poor sterility, inadequate labelling.

Regulated by Environment Protection Authority under the Hazardous Substances and New Organisms Act 1996.

Tattoo and Permanent Makeup Substances Group Standard 2011

Aligns with EU res AP (2008)


Excluded properties/maximum concentration levels based on Council of Europe recommendations

Composition information (including toxicological and ecological) and hazard identification required

Accurate labelling and safety data sheets required.

Where to next?

Depends on Government decisions/ priorities. Ideally:

- National law, comprehensive coverage
 - Clear obligations to manage risk
 - Clear compliance requirements
 - Adequate sanctions
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Public Health Bill

Would provide a better range of regulatory controls available:

Mandatory objectives (eg preventing disease transmission, minimising harm)

Functional requirements (equipment storage, use, sterilisation)

Performance measures eg, that all equipment is free of pathogens

Licensing via an *activity consent* specific to premises and or practitioner

Public health risk management plan –practitioners must systematically identify and document risk and how they will manage and minimise these risks.

Periodic compliance assessment. Compliance orders for enforcement. Medical Officer of Health can direct that an activity cease, or not be undertaken if it poses a serious risk to public health.

Next challenge

