



Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention

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Gouvernement du Québec Ministère de la Santé et des Services sociaux Direction générale de la santé publique et Institut national de santé publique du Québec

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Régies régionales de la Santé et des Services sociaux : Directions de la Santé publique du Bas-St-Laurent de la Montérégie de Montréal-Centre et de Québec

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Appendix 1 Participing establishments

Definition of the notion of safety

Safety is a state in which hazards and conditions leading to physical, psychological or material harm are controlled in order to preserve the health and well-being of individuals and the community. It is an essential resource for everyday life, needed by individuals and communities to realise their aspirations.

Attaining an optimum level of safety requires individuals, communities, governments and others to create and maintain the following conditions, whichever setting is considered :

- 1) a climate of social cohesion and peace as well as of equity protecting human rights and freedoms, at a family, local, national or international level ;
- 2) the prevention and control of injuries and other consequences or harms caused by accidents;
- 3) the respect of the values and the physical, material and psychological integrity of the individuals ; and
- 4) the provision of effective preventive, control and rehabilitation measures to ensure the presence of the three previous conditions.

These conditions can be assured by initiatives aimed at:

- . the physical, social, technological, political, economic and organizational environment; and
- . behaviour.

Source: Safety and Safety Promotion : Conceptual and Operationnal Aspects, adapted from a definition proposed at a workshop of the community safety team, Québec City, August 1994.

Description of the Collaborating Centre Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention

Mission

The Collaborating Centre seeks to contribute at the international level to research and development and the dissemination of intersectorial approaches to promote safety and prevent intentional and unintentional injuries.

Objectives

The Collaborating Centre strives to:

- 1. promote at the international level the role of the health care sector in promoting policies, environments and behaviour likely to enhance the safety of populations;
- 2. contribute at the international level to the development of approaches that make it possible to better promote safety in the community;
- 3. provide direction at the international level to the promotion of knowledge, research and evaluation in order to satisfy the most pressing needs in the realm of safety;
- 4. disseminate the knowledge acquired and foster its practical implementation;
- 5. contribute to the development of international training programs in the realm of safety, particularly in the French-speaking countries.

Participating establishments (Appendix 1)

Direction générale de la santé publique (DGSP), ministère de la Santé et des Services sociaux du Québec

Institut national de santé publique de Québec

Direction régionale de la santé publique du Bas-Saint-Laurent

Direction régionale de la santé publique de la Montérégie

Direction régionale de la santé publique de Montréal-Centre

Centre de santé publique de Québec

Steering committee

Mrs. Hélène Bélanger Bonneau, coordinator of the injury prevention team, Direction de la santé publique de Montréal-Centre

Mrs. Diane Sergerie, consulting physician in injury prevention, Direction de la santé publique de la Montérégie

Mr. Desmond Dufour, head of the injury prevention program, Direction générale de la santé publique, ministère de la Santé et des Services sociaux

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Secretariat

Mr. Marc St-Laurent, injury prevention committee, Québec public health network

1. Introduction

The Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention comprises a number of institutions in the Québec public health network, i.e. four regional public health branches (Montréal-Centre, Montérégie, Québec City and Bas-Saint-Laurent), the Direction générale de la santé publique in the *ministère de la Santé et des Services sociaux du Québec*, and the *Institut national de santé publique du Québec*. Under their respective mandates, these organizations promote safety and the prevention of intentional and unintentional injury. Without being exhaustive, this report examines the main local, national and international initiatives that these organizations have undertaken in the realms of safety promotion and injury prevention. These activities cover an array of fields of intervention, i.e. safety promotion and injury prevention in urban areas, the transportation sector and the home and in conjunction with leisure activities and sports. They also cover the prevention of violence and suicide.

2. Review of activities (November 1998 to October 1999)

2.1 Programming

During the year, the Centre participated actively in elaborating a program of public health initiatives in respect of injury prevention and safety promotion. The program proposes a series of activities to be carried out over the next three years by the *ministère de la Santé et des Services sociaux du Québec*, the *Institut national de santé publique du Québec*, the Collaborating Centre and the regional public health branches. It covers surveillance, safety promotion, and the prevention of violence, suicide and injury. The first draft of the program has been completed and will be submitted for consultation in the coming months.

2.2 Training

In addition to supervising trainees at the master's level and community health medical residents, the Centre is participating actively in a number of training programs. It collaborated in various ways in training undergraduate students enrolled in medicine or other programs. On October 20, 21 and 22, 1999, the *Centre de santé publique de Québec* organized a training session devoted to safety promotion and injury prevention attended by 12 participants from the health, justice and public security sectors. It offered participants theoretical presentations on the underlying principles of public health initiatives in the fields of safety promotion and the prevention of violence, suicide and injury. These presentations were followed by discussions of cases intended to illustrate operational aspects of intervention.

2.3 Technical cooperation

Proposed cooperation between France and Québec announced last year was implemented this year and a grant was obtained from the *Commission permanente de coopération France-Québec*. The project is intended to support the initiatives of the Québec and French governments with respect to the prevention of violence, suicide and unintentional injury, aimed at youngsters, including the safety promotion approach and reducing access to firearms and small arms. A seminar was organized from October 24 to 27, 1999 in conjunction with the project, in order to:

- foster cooperation between France and Québec as regards the prevention of violence, suicide and injury, including youngsters people, through the pooling of expertise and a comparative analysis of problems and the measures adopted by the Québec and French governments;
- establish links between the public health, public security, socio-economic development and education initiatives of the French and Québec governments ;
- strengthen cooperation between sectorial departments, non-governmental organizations of civil society and experts in France and Québec.

Working groups were set up to focus on four themes, i.e. safety and security in the community and the prevention of violence, road safety, suicide prevention, and the prevention of household accidents and injury. The composition of the working groups and the commitment of respondents and partners with respect to a work program centred on the realization of concrete initiatives made it possible to satisfy the initial conditions for the attainment of the seminar's objectives.

More specifically, the seminar made it possible to answer the following questions:

- What basic issue of common interest underpins cooperation between France and Québec?
- What outcome is ultimately desired, i.e. what do the four groups of experts in France and Québec hope to achieve at the conclusion of the project?
- What objectives must be achieved at the end of the year 2000?
- What initiatives must be carried out to attain the objectives?
- What physical, financial and human resources will be needed to attain these annual objectives?

A report on the seminar was written.¹ It indicates the working groups' conclusions and outlines the exchange and technical cooperation program in each of the fields pinpointed.

¹ Got, C., Le Gall, L., Chapdelaine, A., Sauvageau, L. «Coopération France-Québec pour prévenir la violence, les suicides et les traumatismes, notamment chez les jeunes, par la promotion de la sécurité dans les milieux de vie et par la réduction de l'accessibilité aux armes », Rapport final pour 1999, octobre, 1999, pp. 27.

More specifically, in the realm of **firearms and small arms injury prevention**, it should be noted that the French government received technical assistance following the tabling in France of a private bill to better control firearms in France. Following the seminar discussed earlier, a mission will be organized to enable a French delegation to visit Québec and learn about practical aspects of firearms injury prevention and gun control in Québec.

2.4 Initiatives

. Safety in the cities

An intersectorial committee chaired by the Association des directeurs généraux des municipalités du Québec produced a document entitled Guide d'amélioration de la sécurité dans les milieux de vie destiné aux municipalités du Québec.² The Centre helped write the guide, which was distributed to all Québec municipalities and to many of their partners. The guide proposes a definition of safety and a general approach to community mobilization with a view to enhancing public safety in the cities. It is based largely on the monograph entitled "Les concepts et approche en promotion de la sécurité"³ produced by the Centre in collaboration with the Karolinska Institutet in Sweden and the World Health Organization.

Through a grant obtained from the federal Department of Justice, two pilot projects based on the approach proposed in the guide were set up, one in Longueuil and the other in Mont-Joli, Québec. The Centre participated in the request for a grant and in designing and evaluating the pilot projects.

We also collaborate with cities through our participation in the process of reviewing development plans produced by the regional county municipalities (RCMs). Each project is submitted to critical analysis in order to delineate the key public security issues and formulate the appropriate recommendations.

Our collaboration with the municipal sector also focuses on specific safety issues such as the prevention of injury among cyclists and the prevention of drowning. In the Bas-Saint-Laurent region, the public health branch is working with the community to support the development of cycle paths (*La Route verte* project). The *Direction de la santé publique de la Montérégie* is participating in a committee on private swimming pools that is responsible for developing a standard municipal by-law aimed at preventing drowning in private pools.

² Comité intersectoriel sur la sécurité dans les milieux de vie, rédigé par Renée Levaque Charron, Centre de santé publique de Québec, « Guide à l'intention des municipalités, Sécurité dans les milieux de vie, Pour le mieux-être des citoyens, des citoyennes et des familles », mai, 1999, 69 p. + annexes.

³ Centre collaborateur OMS du Québec pour la promotion de la sécurité et la prévention des traumatismes, le Karolinska Institutet de Suède et l'Organisation mondiale de la Santé «Sécurité et promotion de la sécurité: Aspects conceptuels et opérationnels », septembre, 1998, 22 p. + annexes.

Household safety

Several projects were implemented or progressed significantly during the year in the realm of injury prevention in the home. Mention should be made of:

- the *Programme intégré d'équilibre dynamique (P.I.E.D)* established by the Direction de la santé publique de Montréal-Centre, which seeks to reduce risk factors pertaining to falls among the elderly. It focuses on balance, the home environment and behaviour through group activities held three times a week for 10 weeks. The results of the evaluation of the program were disseminated this year.⁴ They reveal that the program enjoyed high participation rates despite its intensity and that it can improve participants' balance. The dissemination and evaluation of the program are ongoing;
- . the publication of a brochure entitled "*Les surfaces sous les appareils de jeu : c'est important même à la maison*," distributed in Réno-Dépot and Toys'R'Us stores in Québec. The brochure was designed to inform the general public of the importance of installing home playground equipment on the appropriate protective surfaces;
- . the implementation in March 1998 by the *Régie régionale de la santé et des services sociaux du Bas-Saint-Laurent* of an initiative aimed at preventing injury among children in the home, by means of a kit, which includes simple preventive means, e.g. a sticker with the telephone number of the *Centre Anti-Poison du Québec*, ipecac syrup, latches for cupboards, smoke detectors, electrical outlet covers, and so on. Nurses making home visits gave the kits to 200 low-income families in conjunction with *Centre local de services communautaires (CLSC)* perinatal programs in the region. The study made it possible to evaluate the extent to which the families followed recommendations concerning the enhancement of safety in the home. It was noted that the families reached had, by and large, implemented the preventive measures related to the items in the kit and that the kit had had a ripple effect with respect to measures that were not covered by counselling.⁵

This initiative was proposed in addition to another experience put forward by the *Régie* régionale de la santé et des services sociaux de la Mauricie (région 04) and the *Québec Collaborating Centre*. In cooperation with the *Centre Anti-Poison du Québec*, a kit was also introduced in this region to prevent and control poisoning among children

⁴ Trickey, F., Robitaille, Y., Laforest, S., Gosselin, C., Parisien, M. « Prévenir les chutes chez les aînés : Évaluation du programme P.I.E.D. » Rapport synthèse, direction de la santé publique, Régie régionale de la santé et des services sociaux de Montréal-Centre, 1999, 4 p.

⁵ Leduc, S. « Évaluation d'une trousse de prévention des traumatismes à domicile survenant à de jeunes enfants ». Direction de la santé publique, de la planification et de l'évaluation, RRSSS Bas-St-Laurent, 1998, 43 p.

(Programme Trousse RAPPID). The small cardboard kit contains, along with the sticker bearing the telephone number of the *Centre Anti-Poison du Québec* (CAPQ), three information booklets on alternatives to hazardous products and advice on prevention and protection. Moreover, it contains a paediatric dose of ipecac syrup and activated charcoal, of which the CAPQ recommends the very prompt use in the event of poisoning in the home. Nurses participating in perinatal programs in the 11 CLSCs in the territory distribute this kit free of charge when 12-month-old children attend vaccination clinics. Five thousand families with young children in region 04 received the kit. An evaluation of the project^{6,7} reveals that the distribution of the kit has broadened knowledge and enhanced attitudes and behaviour with respect to the prevention of poisoning in the home among children up to the age of five. The initiative has also aroused the interest of parents, interveners in the CLSCs, the public health branch and the *Centre Anti-Poison du Québec*, which is advocating province-wide implementation of this measure.

Safety among young people

A proposal to produce a guide entitled *Prévenons les blessures chez nos enfants : guide à l'intention des intervenants* was launched in January 1999, funded under the Community Action Program for Children at Health Canada. It is intended for organizations that deal with families, e.g. interveners in the CAPC and in the CLSCs. The program seeks to develop the interveners' knowledge and skills in the realm of injury prevention. The guide will be presented in the form of a kit made up of two sections, the first one devoted to scientific information on the sites of accidents (roads, the home, recreational and sports activities, and the farm), and a second section containing brochures and posters that the intervener can use during meetings with families. The Montréal-Centre, Lanaudière and Laurentides public health branches are participating in the project. The *Centre de santé publique de Québec*, the *Centre de santé publique du Bas-Saint-Laurent*, the *Centre de santé publique de Chaudière-Appalaches et de la Mauricie* and the *Centre de santé publique du Centre du Québec* have also collaborated. A steering committee has been established made up of interveners from the organizations participating in the CAPC and the CLSCs.

. Road safety

In 1999, the Québec government announced that it planned to review a number of provisions in the *Highway Safety Code* in order to reduce the number of injuries and deaths on Québec roads. Following the tabling of the green paper on road safety,⁸ all member institutions of the Collaborating Centre mobilized in order to contribute to the preparation of a brief on various issues covered by the green paper.⁹ Specifically, the brief examines right turns on red, the compulsory use by cyclists of helmets, authorization for roller-skaters to use certain public roads, the use of photo radar to reduce speed, and the strengthening of measures aimed at

⁶ Bourgeois Pelletier, C., Ferland, P. « Rapport d'évaluation de la Trousse RAPPID », Direction de la santé publique, Régie régionale de la Mauricie-Bois-Francs, Drummonville, 1995, 47 p.

⁷ Bourgeois Pelletier, C., Ross, C. « Rapport d'évaluation d'implantation de la Trousse RAPPID », Direction de la santé publique, Régie régionale de la Mauricie-Bois-Francs, septembre 1996, 37 p.

⁸ Ministère des Transports du Québec (1999). « La sécurité routière au Québec : Un défi collectif ». Livre vert. Document de consultation, 69 p.

⁹ Conseil des directeurs de santé publique « La sécurité routière au Québec : un défi collectif, Mémoire», présenté par le Conseil des directeurs de santé publique, janvier 2000, 47 p.

reducing drunk driving. The brief will be submitted next February to the Parliamentary commission organized by the Québec Minister of Transport.

Mention should also be made of our involvement in certain initiatives aimed at promoting the use of cycle helmets, reducing drunk driving and fostering pedestrian safety and our participation in a subsidized study carried out in collaboration with the Université de Montréal that examines the safety of pedestrians and cyclists. This study reveals that traffic flows, road signs, sex and age are, in descending order, the main factors related to compliance by pedestrians with road signs. Pedestrians are more inclined to obey road signs when there are traffic lights for pedestrians than when there are traffic lights for vehicles. The study was completed in 1999 and its findings will be disseminated in the coming year.¹⁰

. Safety in recreational and sports activities

In the realm of recreational activities and sports, aside from the by-law governing private swimming pools mentioned earlier, we wish to emphasize our involvement in the safety of playground equipment. In 1998 and 1999, the Direction de la santé publique de la Montérégie produced a guide to the safety of playground equipment intended for municipalities, schools and day care centres. The Direction de la santé publique de Montréal-Centre disseminated the findings of a longitudinal study on playground equipment in Montréal area public parks.^{11,12}

¹⁰ Bélanger Bonneau, H., Bergeron, J., Rannou, A., Bourbeau, R., Thouez, J.-P. « Les piétons respectent-ils la signalisation? » Actes du Congrès AQTR/CITE 1999, Montréal, Québec, 3 au 5 mai 1999, 19 pages.

¹¹ Laforest, S., Robitaille, Y., Dorval, D., Lesage, D., Pless, B. « Severity, of fall injuries on sand or grass in playgrounds ». Journal of Epidemiology and Community Health. Accepté pour publication.

¹² Robitaille, Y., Laforest, S., Lesage, D., Dorval, D. « Search for a Simple Means to Identify Dangerous Surfaces under Play Equipment ». Journal of Safety Research. Accepté pour publication.

. Violence

In keeping with the policy governing intervention in the case of conjugal violence¹³ published in 1995, the member institutions of the Collaborating Centre, following the example of the Québec public health network overall, participated actively in their respective territories in the implementation of inter-organization referral protocols in respect of the victims of conjugal violence. They also participated in the province-wide campaign to prevent violence towards women, which targeted young people 13 and 14 years of age and the public at large. The campaign included a province-wide section for which the ministère de la Santé et des Services sociaux du Québec assumed responsibility and a regional section organized by various public health branches.

Aside from these initiatives, mention should also be made of the publication by the Régie régionale de la santé et des services sociaux du Bas-Saint-Laurent of a report on the design, implementation, testing and evaluation of a socio-legal protocol concerning conjugal violence¹⁴ and the implementation by the Centre de santé publique de Québec of a project designed to enable professionals in family medicine units to deal with the problem of conjugal violence in the eight units in eastern Québec.¹⁵ Moreover, a task force on children exposed to conjugal violence was set up, made up primarily of interveners who deal with children in shelters in the Québec City area.

. Suicide

With respect to suicide prevention, in the wake of the publication of the Québec strategy to deal with suicide,¹⁶ member establishments in the Collaborating Centre followed the example of the Québec public health network and mobilized during the year to produce within their respective territories an action plan on suicide in keeping with the strategy.

In addition to this broad mobilization around the strategy to deal with suicide, the Direction de la santé publique de la Montérégie initiated an experimental suicide prevention project aimed at general practitioners. The project's key components are training, access to psychiatric consulting and support for physicians when they deal with individuals at risk.

 ¹³ Gouvernement du Québec « Prévenir, dépister et contrer la violence conjugale, Points saillants », 1995, 38 p.

¹⁴ Cadrin, H., en collaboration avec Francine Alary et Marie-Josée Pineault « Le protocole sociojudiciaire en matière de violence conjugale du Bas-St-Laurent : conception, mise en œuvre, expérimentation et évaluation », Régie régionale de la santé et des services sociaux, Bas-St-Laurent, déc. 1999, 137 p. + annexes.

¹⁵ Centre de santé publique de Québec en collaboration avec le Comité sur la famille du Département de médecine familiale de l'Université Laval et le D^{re} Line Langlois, du Centre de santé des Etchemins, « Formation sur l'intervention auprès des femmes victimes de violence conjugale à l'intention des médecins enseignants et résidents en médecine familiale », 1999-2000, 75 p.

¹⁶ Gouvernement du Québec « S'entraider pour la vie », 1998, 94 p.

2.5 Participation in international events

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The Centre participated in a number of events abroad. We were invited to discuss Québec's experience in the realm of the prevention of family violence at the *Séminaire atelier sur la prise en charge des victimes de violence* held from December 13 to 16, 1998 in Constantine, Algeria. The seminar brought together over 100 Algerian participants from various sectors to reflect on violence in general and to propose courses of action to better deal with the problem at the local level. It led to a WHO-sponsored pilot project in an Algerian community.

The Centre participated actively in the organization of the *Troisième séminaire international du Réseau francophone de promotion de la sécurité et de prévention des traumatismes et des accidents*, held in Ascona, Switzerland from June 21 to 23, 1999. The WHO-sponsored seminar assembled nearly 80 participants, mainly from French-speaking countries, under the theme "act effectively." It was intended to maintain ties between French-speaking experts, pool experience from the standpoint of effective, promising measures, and devise means of effectively verifying initiatives, establishing recommendations to achieve efficacy and ensuring follow-up to the deliberations of working groups in the network.

The seminar was a resounding success. The workshops and discussions during plenary sessions enabled the participants to attain all of the objectives mentioned earlier. It also allowed them to agree on a mission for the network, i.e. to create and strengthen ties between French-speaking interveners from various sectors and disciplines in order to develop, disseminate and share expertise with a view to promoting public safety and preventing violence, suicide and accidental injury. Agreement was also reached on a process to update the directory of French-speaking specialists in safety promotion and injury prevention.¹⁷ In response to an invitation from the organizers of the Fifth World Conference on Injury Prevention and Control to be held in New Delhi from March 5 to 8, 2000, it was decided to organize at that time two French-language workshops under the themes "effective strategies for enhancing safety in the community" and "intersectorial mobilization strategies to enhance public safety and prevent injury and accidents." Moreover, it was decided that Belgium would host the fourth seminar in 2001 and that a course would be organized on safety promotion and injury prevention similar to the one offered at Université Laval in June 1997.

The Direction de la santé publique du Bas-Saint-Laurent and the Centre de santé publique de Québec have been actively involved in the organization of a workshop on individual and collective violence in conjunction with the 3^e Congrès des responsables locaux des Amériques to be held in Québec City from March 13 to 16, 2000. During the workshop, seven papers will be presented, followed by brief discussions, with a view to attaining the following objectives:

¹⁷ Organisation mondiale de la Santé du Réseau international francophone de prévention des traumatismes et des accidents, « Promotion de la sécurité et prévention des traumatismes, Annuaire des ressources », Educa Santé, Belgique,1999.

- 1. recognize the importance of violence and armed conflicts as a public health problem;
- 2. pinpoint certain forms of individual and collective violence that prevail in North America;
- clarify the role of the health network in the realm of the prevention of violence and its consequences;
- 4. pinpoint the most promising strategies to prevent violence and promote a culture of peace.

2.6 Sixth World Conference on Injury Prevention and Control

Considerable effort was expended during the year to launch the organization of the Sixth World Conference on Injury Prevention and Control, to be held in Montréal, Canada from May 12 to 15, 2002. A meeting was organized in Ottawa on December 8, 1998 with government partners from the health, transportation, justice and other sectors and representatives of a number of non-governmental organizations in Canada that are involved in safety promotion and injury prevention. The purpose of the meeting was to inform participants of the project, arouse interest in it, and seek collaboration in organizing the main conference and satellite conferences. A national organizing committee and several subcommittees have been set up to carry out various facets of conference preparations. The national organizing committee met several times and a meeting with the international organizing committee took place in September. Fundraising has begun and scientific programming is under way. The Montréal conference will be announced at the Fifth World Conference on Injury Prevention and Control in Delhi and at other conferences planned in the coming months.

3. Publications

Bélanger Bonneau, H., Bergeron, J., Rannou, A., Bourbeau, R., Thouez, J.-P. « Les piétons respectent-ils la signalisation? » Actes du Congrès AQTR/CITE 1999, Montréal, Québec, 3 au 5 mai 1999, 19 pages.

Bergeron, J., Bélanger Bonneau, H, Rannou, A, Bourbeau, R., Thouez, J-P. « *Le respect des feux de signalisation chez les cyclistes : Principaux facteurs de variation et piste d'intervention »* Actes du Congrès AQTR/CITE 1999, Montréal, Québec, 3 au 5 mai 1999, 24 p.

Cadrin, H. en collaboration avec Francine Alary et Marie-Josée Pineault « *Le protocole sociojudiciaire en matière de violence conjugale du Bas-St-Laurent : conception, mise en œuvre, expérimentation et évaluation »*, Régie régionale de la santé et des services sociaux du Bas-St-Laurent, décembre 1999, 137 p. + annexes.

Comité intersectoriel sur la sécurité dans les milieux de vie (rédaction Renée Levaque Charron). « *Guide à l'intention des municipalités - Sécurité dans les milieux de vie - Pour le mieux-être des citoyens, des citoyennes et des familles* » Comité intersectoriel sur la sécurité dans les milieux de vie, mai 1999, 69 pages + annexes.

Cukier, W., Chapdelaine, A., De Villiers, P., Ford, B. "*Westwick V. Combatting the illicit trafficking and misuse of firearms*". A submission to the united nations commission on crime prevention and criminal justice and the ad hoc committee on transnational organized crime (ioc) convention, Vienna, april 27 - may 4, 1999.

Cukier, W., Chapdelaine, A., Collins, C. "Globalization and small/firearms : a public health perspective". development journal, Sage publications. december 1999. 42.4, 40-44. proceedings of the international roundtable on 'responses to globalization : rethinking health and equity'. jointly organized by the society for international development (sid) - World health organization (who) - the Rockefeller foundation (rf), (12-14 july 1999) Geneva, ch.

Direction de santé publique de la Montérégie « Organiser des activités avec alcool sans conséquence et en toute sécurité...C'est possible ! Un guide à l'intention des municipalités », septembre 1999, 21 p.

Direction de santé publique de la Montérégie « *Protocole régional cadre de collaboration pour l'aide psychosociale et l'accompagnement sociojudiciaire des victimes de violence conjugale* », révisé 1999, 19 p.

Fortier, D., Sergerie, D. « *Le Guide des aires de jeu* 98 - *Outil d'interprétation et de gestion de la norme CAN/CSA Z614-98 sur l'aménagement sécuritaire des appareils*» Direction de santé publique de la Montérégie, 1999, 81 p.

Groulx, J. « Violence et suicide dans les médias, État de situation et analyse des pratiques journalistiques de la presse écrite en Montérégie et de la presse écrite nationale », 1999, 204 p.

Quesnel, G., Viens, C., Sergerie, D. « *Politiques municipales de gestion de l'alcool , Étude de faisabilité d'un projet pilote en Montérégie »*, 1999, 27 p.

Laforest, S., Robitaille, Y., Dorval, D., Lesage, D., Pless, B. « *Severity, of fall injuries on sand or grass in playgrounds* ». Journal of Epidemiology and Community Health. Accepté pour publication.

Laforest, S., Trickey, F., Robitaille, Y., Gosselin, C., Parisien, M. « *L'évaluation de capsules d'information pour réduire les risques de chutes dans le logement des aînés* ». Le Gérontophile, Vol. 21, 1998, pp. 25-29.

Larochelle, P., Bouchard, F., Chapdelaine, A. *et al. Mémoire de l'Association pour la santé publique du Québec* déposé à la cour suprême du Canada dans l'affaire relative au chapitre 27(1) de la loi judiciaire, s.r.a., 1989, chapitre J-1, en appel d'un jugement de la cour d'appel d'Alberta dans la cause pour défendre la constitutionnalité de la Loi sur les armes à feu (chapitre 39 des lois du canada). 10 mai 1999, pp. 21. extraits publiés dans le bulletin de santé publique de l'ASPQ, Vol. 20, no. 2 & 3, été / automne 1999, pp. 24-27.

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4. Supervision of students

- Brent Hagel, doctorate, Epidemiology and Biostatistics, McGill University, "Helmet use and effectiveness in child and adolescent skiers and snowboarders."
- Patrick Morency, community health resident (Université de Sherbrooke and Université de Montréal joint programs). Supervision of a training session from November 1998 to February 1999. Production of a fact sheet on the prevention of injury and suicide intended for general practitioners.

- Monique Rainville, master's degree in community health, Université Laval. "La perception qu'ont les aîné(e)s de leur sécurité dans le quartier et au domicile" (in progress) and "Identification et promotion des outils d'intervention les plus susceptibles de renforcer les facteurs de protection chez les enfants exposés à la violence conjugale."
- Sonia Mathieu, master's degree in community health, Université Laval. "Motivation des organismes publics et privés de la communauté urbaine de Québec à s'impliquer dans la réduction du risque environnemental de chute au domicile des personnes âgées" (in progress) and "Identification et promotion des outils d'intervention les plus susceptibles de renforcer les facteurs de protection chez les enfants exposés à la violence conjugale."
- Pierrette Doyon, master's degree in community health, Université Laval. "Facteurs critiques d'implantation de mesures préventives dans les petites entreprises" (in progress).

5. Outlook for 1999-2000

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Several initiatives should move ahead significantly during the coming year. The submission of a province-wide public health program in the realm of injury prevention and safety promotion should engender widespread collaboration between the Collaborating Centre, the injury prevention committee in the Québec public health network, the *Institut national de santé publique du Québec* and public health branches throughout Québec.

In cooperation with the network of Canadian injury prevention centres and the injury prevention committee, the Collaborating Centre will also help develop a training program intended for various target clienteles, especially representatives of municipalities and local community service centres (CLSCs) and coroners. The program will cover the foundations of injury prevention and safety promotion and methodological questions such as planning, programming and evaluating intervention. It will also focus on various tools available in Québec and elsewhere to enhance safety in living environments. In addition to enhancing practitioners' skills in respect of injury prevention and safety promotion, the training will likely heighten community awareness of safety issues. The pooling of knowledge among interveners in different sectors on common problems and the appropriate solutions will promote intersectorial cooperation and contacts between professionals in different disciplines.

In keeping with the programming agreed upon by the four groups of experts during the October 1999 seminar, the technical cooperation project between France and Québec pertaining to the prevention of violence, suicide and unintentional injury, especially among young people, will also advance considerably during the coming year.

The Centre will also be actively involved during the coming year in preparations for the Sixth World Conference on Injury Prevention and Control, to be held in May 2002.

Financial questions

6.

Under the agreement established, the plan of action does not call for any financial commitment by the Collaborating Centre and WHO. Most of the activities discussed in this report have been carried out through funding from the ministère de la Santé et des Services sociaux du Québec, the Québec public health network, the ministère des Relations internationales du Québec, the ministère de la Sécurité publique du Québec, the French Consulate General in Québec City, the French ministère des Affaires étrangères, the Rockefeller Foundation, the Society for International Development, Health Canada, Justice Canada, the World Health Organization, the members of the international French-speaking injury and "accident" prevention network, the Régie régionale de la Mauricie, and the Régie régionale du Centre du Québec.

7. Conclusion

For many years the member organizations of the Collaborating Centre have carried out safety promotion and injury prevention initiatives at the local, regional, national and international levels, focusing on training, research and the development of measures in the field. After four years of operation, the WHO Collaborating Centre project to promote safety and prevent injury in which these organizations are involved has produced worthwhile spinoff for the Québec public health network. It has facilitated contact with experts in other countries with whom we are elaborating concrete technical cooperation projects. It has led to the implementation of training programs in which many Québec public health interveners have participated. There is every indication that, in the coming years, these training programs will continue, that they will involve growing numbers of internationally recognized experts, and that they will reach an increasingly diversified clientele. Moreover, the mandate received from WHO to propose an approach in respect of safety promotion has fostered reflection centred on expertise developed in various countries. Such reflection, in turn, has proved highly useful in the elaboration of a guide to enhance safety in living environments intended for all Québec municipalities. The organization in May 2002 in Montréal of the Sixth World Conference on Injury Prevention and Control, to be attended by over 1500 experts from all of the continents, will make it possible not only to share a significant body of knowledge with Québec professionals but also to disseminate the expertise that we have developed in this field.

Appendix 1

Participating establishments

The Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention is made up of the organizations listed below.

Direction générale de la santé publique, ministère de la Santé et des Services sociaux du Québec

In keeping with other branches in the department, the Direction générale de la santé publique assists the Minister in establishing health and social services policies and programs and ensures their implementation and application by the regional health and social services boards, and their evaluation. The DGSP coordinates the public health program and takes the necessary steps to protect public health.

In particular, the Direction générale de la santé publique is responsible for analysing and monitoring the state of Quebecers' health, pinpointing priority health problems and the most vulnerable groups, and focusing on factors that affect health and well-being by intervening directly with the public and the systems governing Quebecers in order to prevent social and health problems and to promote good health.

Specifically, its initiatives are aimed at reducing deaths from disease and injuries, morbidity, disabilities and handicaps. Safety promotion and the prevention of intentional and unintentional injuries are a priority in the branch.

The National Public Health Institute of Quebec

In its statutes, the National Public Health Institute of Quebec created in 1998, has the mission to advise the minister of Health and Social Services and the Regional Boards on their Public Health missions. It must build upon and develop the expertise in Public Health and put it at the service of all the population of Quebec, For that purpose it must contribute to develop, disseminate and put into practice new knowledge, inform the minister and the population about priority health problems and what measures to implement to counter them as well as collaborate with Universities in Public Health training programs. Considering Quebec's will to exchange with other nations on the experiences and successes of Public Health, the Institute must also establish links with a broad range of national and international organisations.

To fulfil this mission, the Institute adopts an open and decentralised organisational model that will call on the Public Health expertise that is available in Quebec in a networking organisational mode so as to cover the full range of research, training, communications and services needed. The resources of this network will be grouped according to themes such as *the development, the adaptation and the safety and security of the population*. Although the Institute's full program is not completed, it is under this one theme that the activities of expertise related to the prevention of non-intentional injuries, of violence, of suicides as well as the expertise pertaining to safety promotion and security in communities.

Regional public health offices

The Québec public health network is made up of 16 regional offices. (he following legislated responsabilities are defined for the regional public health director :

- informing residents of the general state of individual health, priority health problems, the most vulnerable groups, key risk factors and the measures he deems effective, for monitoring their development and, if need be, for conducting the necessary studies or research;
- (2) pinpointing situations likely to endanger public health and ensuring that the necessary measures are adopted to protect the public;
- (3) ensuring the development of expertise in the realm of prevention and health promotion geared to all of the programs for which the regional health and social services boards are responsible.

In keeping with this mandate, several regional public health offices in Québec have undertaken initiatives to promote safe environments and behaviour and to prevent intentional or unintentional injuries. The four regional public health offices involved in the Collaborating Centre are indicated below.

a) Direction régionale de la santé publique du Bas-Saint-Laurent

The Direction de la santé publique du Bas-Saint-Laurent serves a population of over 200 000 inhabitants living in 138 municipalities. The regional public health team is made up of 44 employees in eight work units. The work units devoted to social adaptation and physical health are involved in the prevention of unintentional and intentional injuries. Two consulting physicians and three health care professionals are working in this field.

b) Direction régionale de la santé publique de la Montérégie

The Direction de la santé publique de la Montérégie serves a population of over 1.3 million inhabitants living in 205 municipalities south of Montréal Island. It has roughly 160 employees, including four professionals working within an injury prevention program. The group has been responsible since 1985 for the development, application and evaluation of an injury prevention program.

c) Direction régionale de la santé publique de Montréal-Centre

The Direction de la santé publique de Montréal-Centre serves a population of nearly 1.8 million inhabitants living in 29 municipalities. It has about 300 employees. The injury prevention program brings together six professionals from different backgrounds in the human and health sciences, e.g. demographics, epidemiology and pediatrics. The team has received a mandate to pinpoint and monitor injuries, inform the public and promote the implementation of effective measures with a view to preventing injuries and minimizing their consequences.

d) Centre de santé publique de Québec:

The Direction régionale de la santé publique de Québec serves a population of over 600 000 inhabitants living in 74 municipalities. It is responsible for the Centre de santé publique de Québec, which has roughly 200 employees in seven administrative units. Among these units, the community safety service promotes safe, non-violent environments and behaviour and seeks to reduce the incidence and consequences of intentional and unintentional injuries. The service is staffed by ten health care professionals trained in epidemiology or public health, including seven physicians.