

Québec WHO Collaborating Centre  
for Safety Promotion and  
Injury Prevention

ACTIVITY REPORT

2011

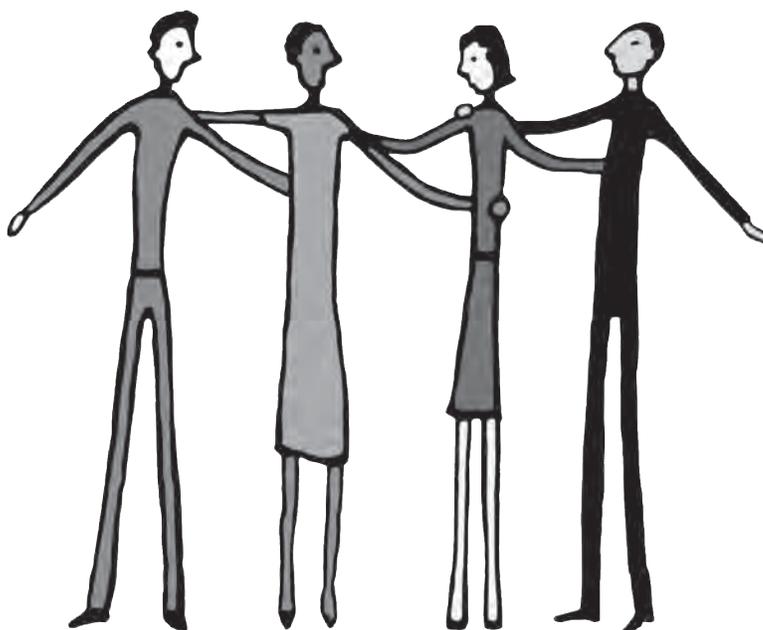




# Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention

ACTIVITY REPORT

# 2011



World Health  
Organization

Québec 

- Institut national de santé publique
- Ministère de la Santé et des Services sociaux
- Agences de la santé et des services sociaux de Montréal, de la Montérégie, de la Capitale-Nationale et du Bas-Saint-Laurent/Directions de santé publique

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LEGAL DEPOSIT – 3<sup>rd</sup> QUARTER 2012  
BIBLIOTHÈQUE ET ARCHIVES NATIONALES DU QUÉBEC  
LIBRARY AND ARCHIVES CANADA  
ISSN: 1918-3348 (FRENCH PRINTED VERSION)  
ISSN: 1918-3356 (FRENCH PDF)  
ISBN: 978-2-550-65999-0 (FRENCH PRINTED VERSION)  
ISBN: 978-2-550-66000-2 (FRENCH PDF)  
ISSN: 1918-3364 (PRINTED VERSION)  
ISSN: 1918-3372 (PDF)  
ISBN: 978-2-550-66001-9 (PRINTED VERSION)  
ISBN: 978-2-550-66002-6 (PDF)

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## DEFINITION OF THE CONCEPT OF SAFETY<sup>1</sup>

Safety is a state in which threats and conditions that can cause 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 that enables individuals and communities to realize their aspirations.

Regardless of the life setting considered, the attainment of an optimum level of safety demands that individuals, communities, governments and other interveners create and maintain the following conditions:

1. a climate of cohesion, social peace and fairness that protects rights and freedoms at the family, local, national and international levels;
2. the prevention and control of injuries and other consequences or other harm caused by accidents;
3. respect for the values and physical, material or psychological integrity of individuals;
4. access to effective prevention, control and rehabilitation measures to ensure that the first three conditions are achieved.

These conditions can be assured by initiatives that focus on:

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

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<sup>1</sup> Source: Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention, WHO Collaborating Centre on Community Safety Promotion, Karolinska Institutet, World Health Organization, *Safety and Safety Promotion: Conceptual and Operational Aspects*, October 1998.



## **DESCRIPTION OF THE COLLABORATING CENTRE**

The Centre is made up of institutions in the Québec public health network under the scientific coordination of the Institut national de santé publique du Québec (INSPQ), which, in conjunction with its mission, establishes links with Canadian and international organizations in order to foster cooperation and the pooling of knowledge.

### **PARTNER ORGANIZATIONS**

- Direction générale de la santé publique, Ministère de la Santé et des Services sociaux du Québec
- Institut national de santé publique du Québec
- Agence de la santé et des services sociaux du Bas-Saint-Laurent/Direction de santé publique
- Agence de la santé et des services sociaux de la Montérégie/Direction de santé publique
- Agence de la santé et des services sociaux de Montréal/Direction de santé publique
- Agence de la santé et des services sociaux de la Capitale-Nationale/Direction régionale de santé publique

### **DIRECTOR**

- Pierre Maurice, Head of the Scientific Unit, Sécurité et prévention des traumatismes, Direction du développement des individus et des communautés, Institut national de santé publique du Québec

### **COORDINATOR**

- Julie Laforest, Research Professional, Sécurité et prévention des traumatismes, Direction du développement des individus et des communautés, Institut national de santé publique du Québec

### **STEERING COMMITTEE**

- Marthe Hamel, Coordinator, Développement, adaptation et intégration sociale, Ministère de la Santé et des Services sociaux du Québec
- Julie Laforest, Research Professional, Sécurité et prévention des traumatismes, Direction du développement des individus et des communautés, Institut national de santé publique du Québec
- Michel Lavoie, Consulting Physician, Sécurité dans les milieux de vie, Agence de la santé et des services sociaux de la Capitale-Nationale/Direction régionale de santé publique
- Sylvain Leduc, Coordinator, Injury Issues, Agence de la santé et des services sociaux du Bas-Saint-Laurent/Direction de santé publique
- Daniel Lefrançois, Assistant Director, Services de traumatologie, Ministère de la Santé et des Services sociaux du Québec

- Pierre Maurice, Head of the Scientific Unit, Sécurité et prévention des traumatismes, Direction du développement des individus et des communautés, Institut national de santé publique du Québec
- Patrick Morency, Head of the Injury Prevention Program, Agence de la santé et des services sociaux de Montréal/Direction de santé publique
- Caroline de Pokomandy-Morin, Department Manager, Promotion de saines habitudes de vie et de dépistage, Ministère de la Santé et des Services sociaux du Québec
- Diane Sergerie, professional researcher, Agence de la santé et des services sociaux de la Montérégie/Direction de santé publique
- Danielle St-Laurent, Head of the Scientific Unit, Surveillance des maladies chroniques et de leurs déterminants, Direction de l'analyse et de l'évaluation des systèmes de soins et services, Institut national de santé publique du Québec
- Hélène Valentini, Coordinator of International Cooperation, Institut national de santé publique du Québec

## **MISSION**

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

## **2010-2014 MANDATE**

1. Collaborate in the activities of the WHO and the PAHO.
2. Satisfy the needs of the international community.
3. Support the Réseau francophone international de prévention des traumatismes et de promotion de la sécurité (French-speaking injury prevention and safety promotion network).

## **ANTICIPATED CONTRIBUTIONS**

1. Collaborate on WHO's program of activities in the realm of safety promotion and injury prevention.
2. Contribute to the maintenance and development of the Réseau francophone de prévention des traumatismes et de promotion de la sécurité.
3. Contribute to capacity building in respect of safety promotion in the French-speaking countries and in Latin America.
4. Offer technical support in the realm of safety prevent and injury prevent in French-speaking Africa.
5. Participate in the activities of the International Organizing Committee (IOC) of the World Conferences on Injury Prevention and Safety Promotion.
6. Comment on, validate and adapt, if need be, the French-language translations of WHO/PAHO reports and publications.

**NOTE TO THE READER**

This report is submitted each year to the WHO/PAHO and is part of the organization's management and monitoring requirements in respect of the **Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention**. It refers solely to activities related to the mandate received from the WHO/PAHO. To learn more about the other activities of the agencies that make up the Centre, please contact Julie Laforest (julie.laforest@inspq.qc.ca).



## FIRST ANTICIPATED CONTRIBUTION

### COLLABORATE ON WHO'S PROGRAM OF ACTIVITIES IN THE REALM OF SAFETY PROMOTION AND INJURY PREVENTION

#### A. Activities carried out

##### Meetings of WHO Collaborating Centres

*Participate in the annual meetings of the network of WHO Collaborating Centres for Violence and Injury Prevention:*

- participation in the 21<sup>st</sup> meeting of directors of WHO Collaborating Centres for Violence and Injury Prevention on November 27 and 28, 2011 at WHO headquarters in Geneva (Julie Laforest: [julie.laforest@inspq.gc.ca](mailto:julie.laforest@inspq.gc.ca));
- participation in the consultation organized by the WHO violence and injury prevention team on facets of support for capacity building, November 26, 2011, in Geneva (Julie Laforest: [julie.laforest@inspq.gc.ca](mailto:julie.laforest@inspq.gc.ca)).

##### Violence prevention

Pursue the dissemination and implementation of the *World Report on Violence and Health*:

- Town hall meeting – Prevention of Violence Canada

In conjunction with the annual conference of the Canadian Public Health Association, the Association pour la santé publique du Québec (ASPQ), the Institut national de santé publique du Québec (INSPQ) and Prevention of Violence Canada organized a town hall meeting. Speakers from all regions of Canada presented initiatives related to violence prevention, in particular focusing on the mistreatment of the elderly, alcohol and violence, and gun control. Over 60 participants took part in the discussion and attempted to pinpoint strategies to raise awareness among political decision-makers of violence and encourage them to adopt measures to prevent it. The activity took place on June 20, 2011 in Montréal. (Pierre Maurice: [pierre.maurice@inspq.gc.ca](mailto:pierre.maurice@inspq.gc.ca))

- Activities related to gun control

Étienne Blais appeared before the Standing Committee on Public Safety and National Security during public hearings on Bill C-19. His presentation focused on a demonstration of the impact on firearms-related homicide and suicide rates of Canadian gun control legislation, Ottawa, November 24, 2011. (Pierre Maurice: [pierre.maurice@inspq.gc.ca](mailto:pierre.maurice@inspq.gc.ca))

## Road safety

Pursue the dissemination and implementation of the *World Report on Road Traffic Injury Prevention*:

- Ongoing participation in the Table québécoise de la sécurité routière (TQSR)

The members of the Collaborating Centre are responsible for two working committees, one devoted to active and alternative transportation (Pierre Patry: [pierre.patry@msss.gouv.qc.ca](mailto:pierre.patry@msss.gouv.qc.ca)) and the other one to impaired driving and distractions while driving. (Pierre Maurice: [pierre.maurice@inspq.qc.ca](mailto:pierre.maurice@inspq.qc.ca))

- Activities pertaining to the Decade of Action for Road Safety 2011-2020

On May 11, 2011, the Ministère des Transports du Québec (MTQ) launched six major road safety committees that assemble partners from different sectors. The committees' deliberations devoted to speeding, alcohol and drugs, young people, infrastructure, sharing roads, and international cooperation will underpin the elaboration of the Québec government's action plan for the Decade. The members of the Collaborating Centre are involved in all of the working groups, except for the one examining infrastructure. (Pierre Maurice: [pierre.maurice@inspq.qc.ca](mailto:pierre.maurice@inspq.qc.ca))

- Organization of a thematic day during Annual Public Health Days (APHD)

In the wake of the launching of the Decade of Action for Road Safety, the members of the Collaborating Centre organized, in collaboration with the Ministère des Transports (MTQ) and the Société de l'assurance automobile du Québec (SAAQ), a thematic day at the APHD devoted to sustainable road safety. Some 60 participants took part in the event, held on December 1, 2011 in Montréal. (Pierre Patry : [pierre.patry@msss.gouv.qc.ca](mailto:pierre.patry@msss.gouv.qc.ca))

G. Burigusa, M. Lavoie, P. Maurice, D. Hamel, and A. Duranceau, "Sécurité des élèves du primaire lors des déplacements à pied et à vélo entre la maison et l'école au Québec," Annual Public Health Days (APHD), Montréal, December 1, 2011, oral presentation.

## B. Publications, presentations and other outcomes

### Violence

É. Blais, M.-P. Gagné, and I. Linteau (2011). "Effet des lois en matière de contrôle des armes à feu au Canada, 1974-2004," *Canadian Journal of Criminology and Criminal Justice*, Vol. 27-61.

É. Blais (2011). "On the importance of conceptual frameworks in evaluation research: The case of gun control laws," annual convention of the American Society of Criminology, Washington DC, November 16-19, 2011, oral presentation.

J. Laforest, and P. Maurice (2011). *Violence conjugale dans la région de la Côte-Nord : ampleur du problème, facteurs explicatifs et pistes d'intervention*, Québec, Institut national de santé publique du Québec.

J. Laforest. "Vers une approche systématique pour contrer la violence conjugale : Le cas de la Côte-Nord," Colloque internationale du Cri-Viff Violence envers les femmes : réalités complexes et nouveaux enjeux dans un monde en transformation, Montréal, June 1, 2011, oral presentation.

I. Linteau, and É. Blais (2011). "L'effet du contrôle des armes à feu (C-68) sur les homicides au Québec : une analyse des bornes extrêmes, 79<sup>th</sup> convention of the Acfas, Sherbrooke, May 2011, oral presentation.

### **Road safety**

AC. Lusk, PG. Furth, P. Morency, LF. Miranda-Moreno, WC. Willett and JT. Dennerlein (2011). "Risk of Injury for Bicycling on Cycle Tracks vs in the Street", *Injury Prevention*, 17(2):131-5.

É. Blais (2011). "La dissuasion et les progrès en sécurité routière," *Revue suisse de circulation routière*, 1: 18-21.

J.-F. Bruneau, P. Maurice, and M. Lavoie (2011). *Avis de santé publique sur la circulation des aides à la mobilité motorisées sur le réseau routier*, Québec, Institut national de santé publique du Québec.

J.-F. Bruneau, and P. Maurice (2011). "Un cadre légal pour la circulation des aides à la mobilité motorisée," 3<sup>rd</sup> Colloque francophone international du GERI-COPIE, Salon de Provence, France, October 2011, oral presentation.

G. Burigusa, M. Lavoie, P. Maurice, D. Hamel, and A. Duranceau. (2011). *Sécurité des élèves du primaire lors des déplacements à pied et à vélo entre la maison et l'école au Québec*, Québec, Institut national de santé publique du Québec.

D. Gagné, and P. Maurice (2011). *Effets potentiels sur le bilan de sécurité d'une mesure rendant obligatoire la formation et/ou le certificat de compétence pour les conducteurs de véhicules tout-terrain et de motoneiges de 18 ans et plus*, Québec, Institut national de santé publique du Québec.

LF. Miranda-Moreno, P. Morency, and A. Geneidy (2011). "The link between built environment, pedestrian activity and pedestrian-vehicle collision occurrence at signalized intersections", *Accident Analysis & Prevention*, 43(5):1624-34.

M.-É. Gagné, and É. Blais (2011). "Évaluation d'une stratégie policière de sécurité au Québec," *Revue canadienne de santé publique*, 101: 56-60.

P. Morency (2011). "Contribution des facteurs environnementaux aux inégalités socio-économiques observées dans la distribution géographique des blessés de la route à Montréal", *Revue de l'Observatoire français des conjonctures économiques (OFCE)*, 120 : 118-120.

P. Morency (2011). "Inequalities in pedestrian and cyclist injuries are primarily explained by traffic Volume and road design", Ecocity World Summit, Montréal, august 2011, oral presentation.

P. Morency, L. Gauvin, C. Plante, F. Fournier, and C. Morency (2011). "Analyse désagrégée des facteurs environnementaux associés au nombre d'enfants", *Cahiers de Géographie du Québec*, 55(156) : 449-468.

### **C. Other knowledge transfer activities**

G. Burigusa, M. Lavoie, P. Maurice, D. Hamel, and A. Duranceau. "Sécurité des élèves du primaire lors des déplacements à pied et à vélo entre la maison et l'école au Québec," Groupe de travail sur les transports actifs et alternatifs de la Table québécoise de sécurité routière, Québec City, December 2011, oral presentation.

G. Burigusa, M. Gagné, S.A. Girard, and P. Maurice. "Avis de santé publique sur la prévention des traumatismes à la ferme au Québec." Presentation to the members of the UPA-CSST liaison committee, Longueuil, September 2011, oral presentation.

D. Gagné (2011). "Effets potentiels sur le bilan de sécurité d'une mesure rendant obligatoire la formation et/ou le certificat de compétence pour les conducteurs de VTT et de motoneiges âgés de 18 ans et plus," Groupe de travail sur la sécurité en véhicules hors route, Ministère des Transports du Québec, November 16, 2011, oral presentation.

## **SECOND ANTICIPATED CONTRIBUTION**

### **CONTRIBUTE TO THE MAINTENANCE AND DEVELOPMENT OF THE INITIATIVES OF THE RÉSEAU FRANCOPHONE DE PRÉVENTION DES TRAUMATISMES ET DE PROMOTION DE LA SÉCURITÉ**

#### **Activities carried out**

*Participate in the organization of seminars in the Réseau francophone de prévention des traumatismes et de promotion de la sécurité.*

- › Member of the International Scientific Committee — the 9<sup>th</sup> seminar was held from May 5-7, 2011 in Beirut, Lebanon, under the theme “Jeunes et passion du risqué : À quel prix?” (Danielle St-Laurent: [danielle.st.laurent@inspq.qc.ca](mailto:danielle.st.laurent@inspq.qc.ca))



## THIRD ANTICIPATED CONTRIBUTION

### CONTRIBUTE TO CAPACITY BUILDING IN RESPECT OF SAFETY PROMOTION IN THE FRENCH-SPEAKING COUNTRIES AND IN LATIN AMERICA

#### Activities carried out

- › Organization of a training session devoted to injury epidemiology from April 5-9, 2011 in Bamako, Mali, in collaboration with the Injury Prevention Initiative for Africa (IPIFA) and the Canadian Network for International Surgery (CNIS).

Some 17 participants from police forces, the public health, transportation and health sectors took part in the training, which sought, in particular, to facilitate the implementation of an injury monitoring system in Bamako and support the Mali health ministry in the establishment of injury prevention programming. (Pierre Maurice: [pierre.maurice@inspq.qc.ca](mailto:pierre.maurice@inspq.qc.ca))

- › Technical support for the design of a study on injury and violence in light of the data collected by the emergency service at the CHU Gabriel Touré in Bamako and the Agence nationale de la sécurité routière (ANASER) in Mali.

The study, funded by the CNIS, is being conducted under the leadership of the Mali health ministry. It includes data collection, carried out between October 1 and December 31, 2011. A technical mission is planned in February 2012 to support data analysis and the drafting of the report. (Pierre Maurice: [pierre.maurice@inspq.qc.ca](mailto:pierre.maurice@inspq.qc.ca))

- › An exchange meeting was held with representatives of the Asociacion latinoamericana de medicina social (ALAMES Uruguay) concerning conjugal violence prevention initiatives carried out in Québec and Uruguay. The meeting took place on June 21, 2011 in Montréal. (Julie Laforest: [julie.laforest@inspq.qc.ca](mailto:julie.laforest@inspq.qc.ca))
- › Presentation of the INSPQ's road safety initiatives to Dr. Victor Méndez Dussan, President of the Nicaraguan Public Health Association (ANSAP). The objective was to discuss involvement by the Québec public health sector in road safety and the outcomes observed in changes in injuries in Québec. The meeting took place on June 23, 2011 in Montréal. (Diane Sergerie: [d.sergerie@rrsss16@gouv.qc.ca](mailto:d.sergerie@rrsss16@gouv.qc.ca))



## **FOURTH ANTICIPATED CONTRIBUTION**

### **OFFER TECHNICAL SUPPORT IN THE REALM OF SAFETY PROMOTION AND INJURY PREVENTION IN FRENCH-SPEAKING AFRICA**

#### **Activities carried out**

- Technical support for the realization of a road safety diagnosis study in Brazzaville and Pointe-Noire.

Through collaboration with the Canadian Public Health Association, a technical support mission was carried out with the Association congolaise pour la santé publique et communautaire from December 4 to 10, 2011. The Association, which wishes to conduct a road safety diagnosis study for Brazzaville and Pointe-Noire, received support from Dr. Pierre Maurice and Guillaume Burigusa to design the study's specifications, collect and analyze the data, and to draft the report. Members of the Association received practical training on the design and realization of such a study and the submission of a grant application. A presentation on principles and methods concerning road injury prevention was also made in Brazzaville and Pointe-Noire to representatives of the health, public security and municipal sectors. Dr. Ekeke Monono, coordinator of injury prevention for Africa, participated in the session organized in Brazzaville. (Pierre Maurice: [pierre.maurice@inspq.gc.ca](mailto:pierre.maurice@inspq.gc.ca))



## **FIFTH ANTICIPATED CONTRIBUTION**

### **PARTICIPATE IN THE ACTIVITIES OF THE INTERNATIONAL ORGANIZING COMMITTEE (IOC) OF THE WORLD CONFERENCES ON INJURY PREVENTION AND SAFETY PROMOTION**

No activity related to this contribution was carried out in 2011. Dr. Pierre Maurice, director of the Centre, resigned from the International Organizing Committee in September 2010.



## **SIXTH ANTICIPATED CONTRIBUTION**

### **COMMENT ON, VALIDATE AND ADAPT, IF NEED BE, THE FRENCH-LANGUAGE TRANSLATIONS OF WHO/PAHO REPORTS AND PUBLICATIONS**

#### **Activities carried out**

Neither the WHO nor the PAHO made any requests in 2011 in respect of this contribution.



## **OTHER PUBLICATIONS, PRESENTATIONS AND OUTCOMES**

### **Safety promotion**

L.M. Bouchard. "Formation sur les stratégies locales de promotion de la sécurité : atelier pratique," February 23, 2011, Mashteuiatsh.

### **Suicide**

M. Gagné, M. Julien, Y. Robitaille, and D. St-Laurent (2011). "Suicide : les statistiques et la prévention," Agence de la santé et des services sociaux de la Montérégie, Longueuil, April 27, 2011, scientific presentation.

### **Monitoring**

Y. Robitaille, and M. Gagné (2011). *La morbidité due aux traumatismes : une utilisation plus spécifique des données d'hospitalisation pour la surveillance - Note méthodologique*, Québec, Institut national de santé publique du Québec.

### **Agricultural injuries**

G. Burigusa, M. Gagné, S.A. Girard, and P. Maurice (2011). *Avis de santé publique sur la prévention des traumatismes à la ferme au Québec*, Québec, Institut national de santé publique du Québec.

G. Burigusa, M. Gagné, S.A. Girard, P. Maurice, and R. Lambert (2011). *Avis de santé publique sur la prévention des traumatismes à la ferme au Québec : synthèse*, Québec, Institut national de santé publique du Québec.

### **Injuries among young people**

J. Flores, M. Bordeleau, M. Lavoie, and D. Du Mays (2011). "Utilisation d'un équipement de protection pour la pratique de la bicyclette, du patin à roues alignées et de la planche à roulette au Québec : données de l'Enquête sur la santé dans les collectivités canadiennes, 2009-2010 de Statistique Canada," Annual Public Health Days, Montréal, November 1, 2011, poster presentation.



## **OUTLOOK FOR THE COMING YEARS**

This report covers the commitments under the 2010-2014 action plan of the Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention. The year 2011 was noteworthy for activities related to the launching of the Decade of Action for Road Safety.

During the coming year, our Centre will continue to play a leadership role in public health in the field of road safety by participating in five of the six working groups set up by the Ministère des Transports du Québec (MTQ). The recommendations that the working groups make will enable Québec to adopt a province-wide road safety action plan spanning the entire Decade.

In 2012, we also intend to consolidate our involvement in capacity building in French-speaking Africa. First, the Centre will continue to provide technical support to the groups that it is assisting in Mali and the Congo to finalize projects under way and develop new projects in keeping with those carried out in recent years. For example, if the political situation stabilizes in Mali, there are plans to set up an injury and violence prevention and monitoring unit. The possibility of mentoring one or two individuals who have actively participated in the projects in Mali and the Congo is also contemplated.

As for the development of capacity building and support for local communities, a safety promotion and violence prevention diagnostic kit will be made available in French and in English in the coming year. The kit, which is part of the “Vivre en sécurité, se donner les moyens” collection includes a series of methodological and technical guides intended for groups wishing to enhance safety and prevent violence in their territory. Dissemination activities are planned in the French-speaking countries, Latin America and through the Safe Communities network.

Lastly, our Centre is supporting the candidacy of Prevention of Violence Canada (POVC) to organize the 6<sup>th</sup> international meeting on violence prevention, “Milestones of a Global Campaign for Violence Prevention.” It goes without saying that we will contribute actively to the event if Canada’s candidacy is accepted.

### **Financial questions**

Under the agreement established, the action plan does not call for any financial commitment by the Collaborating Centre and WHO. Most of the initiatives described in this report have been carried out through contributions of human or financial resources from the agencies participating in the Centre and the other agencies and government departments mentioned in this report.



**APPENDIX**

**MEMBERS OF THE QUÉBEC WHO COLLABORATING CENTRE  
FOR SAFETY PROMOTION AND INJURY PREVENTION**



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

In keeping with other branches in the MSSS, the Direction générale de la santé publique assists the Minister in establishing health and social services policies and programs and ensures their implementation and administration by health and social services agencies and their evaluation. The DGSP coordinates the province-wide public health program and takes the necessary steps to protect public health.

In particular, the Direction générale de la santé publique is responsible for analyzing and monitoring the state of Quebecers' health, pinpointing priority health problems and the most vulnerable groups, and focusing on the determinants of 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.

Its initiatives are aimed specifically at reducing deaths from diseases and injuries, morbidity, disabilities and handicaps. Safety promotion and the prevention of intentional and unintentional injuries are a priority in the DGSP.

### **Institut national de santé publique du Québec**

The enabling legislation of the Institut national de santé publique (INSP), which was established in June 1998, stipulates that its mission is to support the Minister of Health and Social Services and the health and social services agencies in fulfilling their public health mission. It must consolidate and develop public health expertise and make it available to all Quebecers. To this end, it must help develop, disseminate and put into practice new knowledge, inform the Minister and the public about priority health problems and the measures necessary to deal with them, and contribute with the universities to public health training programs. Moreover, given Québec's willingness to share with other nations its experience and success in the realm of public health, the Institut must also establish links with a broad range of national and international organizations.

To fulfil its mission, the INSP has adopted an open, decentralized organizational model that relies on the public health expertise available in Québec centred on a network-based operating method in order to cover the full range of necessary research, training, communications and services. The network's resources are grouped by themes, one of which is development, adaptation and public safety.

It is under this theme that expertise related to the prevention of unintentional injuries, violence and suicide and expertise pertaining to safety promotion and security in the community are developed.

## **Regional public health branches**

The Québec public health network comprises 18 regional health branches. Under the mandate assigned to him by the Minister of Health and Social Services, the Québec regional public health director is responsible in his region for:

1. informing residents of the general state of individual health, priority health problems, the most vulnerable groups, key risk factors and the measures he deems to be the most effective to monitor their development and, if need be, conducting the necessary studies or research;
2. pinpointing situations likely to threaten public health and ensuring that the necessary measures are adopted to protect the public;
3. providing prevention and safety promotion expertise and advising the Agence de la santé et des services sociaux de la Capitale-Nationale on preventive services that are useful in reducing mortality and avoidable morbidity;
4. identifying situations in which intersectoral initiatives are necessary to prevent disease, injury or social problems that affect public health and, when he deems it appropriate, taking the steps that he judges necessary to promote such initiatives.
5. The director also assumes any other function attributed to him by the *Public Health Protection Act* (c. P-35).<sup>2</sup>

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

### **The Direction de santé publique du Bas-Saint-Laurent**

The Direction de santé publique du Bas-Saint-Laurent serves a population of over 203 585 inhabitants living in 117 municipalities. The regional public health team is made up of 42 employees in eight work units. The work units devoted to social adaptation and physical health are involved in the prevention of intentional and unintentional injuries and are staffed by a consulting physician and four health care professionals.

### **The Direction de santé publique de la Montérégie**

The Direction de santé publique de la Montérégie serves a population of nearly 1.3 million inhabitants living in 195 municipalities on the south shore of Montréal Island. It has roughly 160 employees, including three professionals assigned to the prevention of injuries, violence and suicide. Since 1985, this group has been responsible for the development, promotion and implementation of injury prevention programs covering roads, the home, and sports and recreational activities, and in respect of violence and suicide in all CLSC territories.

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<sup>2</sup> Gouvernement du Québec (2001). *Public Health Act*, R.S.Q., c. 60, Québec, Gouvernement du Québec, 42 pages.

### **The Direction de santé publique de Montréal**

The Direction de santé publique de Montréal serves a population of 1.8 million residents living on Montréal Island and has approximately 300 employees. The unintentional injury prevention program employs two professionals while five other professionals with training in the humanities and health contribute to suicide and violence prevention on other teams. Priorities for the next three years include pedestrian safety, fall prevention among elderly adults, a reduction in intentional injuries through safety promotion, and urban planning.

### **The Direction régionale de santé publique de la Capitale-Nationale**

The Direction de santé publique de la Capitale-Nationale serves a population of nearly 650 000 inhabitants living in 46 municipalities. It has roughly 200 employees working in nine 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. Fifteen health care professionals trained in epidemiology or public health, including seven physicians, staff the service.



The Québec WHO Collaborating Centre (CC) for Safety Promotion and Injury Prevention, established in 1995, comprises institutions in the Québec public health network, i.e. four regional public health branches (Montréal, Montérégie, Capitale-Nationale 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 (INSPQ). Through its mission of international cooperation, the INSPQ is responsible for ensuring the Centre's leadership and coordination.

Within their respective mandates, these partners run promotional activities on safety and prevention of intentional and unintentional injuries. These activities cover various fields of intervention such as violence and suicide prevention as well as safety promotion and injury prevention in urban environments, in transportation, in residential and in recreational and sports activities.



- Institut national de santé publique
- Ministère de la Santé et des Services sociaux
- Agences de la santé et des services sociaux de Montréal, de la Montérégie, de la Capitale-Nationale et du Bas-Saint-Laurent/Directions de santé publique

