

# Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention

ACTIVITY REPORT

## 2013-2014



Organisation mondiale de la santé  
World Health Organization

Québec 

## **EDITOR**

Guillaume Burigusa, Scientific Advisor  
Unité Sécurité et prévention des traumatismes  
Direction du développement des individus et des communautés

## **COORDINATOR**

Pierre Maurice, MD, M.B.A., FRCPC, Head of the Scientific Unit and Director  
Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention  
Unité Sécurité et prévention des traumatismes  
Direction du développement des individus et des communautés

## **TO OBTAIN ADDITIONAL INFORMATION, PLEASE CONTACT**

Guillaume Burigusa  
Direction du développement des individus et des communautés  
Institut national de santé publique du Québec  
2400, avenue d'Estimauville  
Québec (Québec) G1E 7G9  
Canada  
Telephone: 418-666-7000, ext. 214  
Email: [guillaume.burigusa@inspq.qc.ca](mailto:guillaume.burigusa@inspq.qc.ca)

*This document is available in its entirety in electronic format (PDF) on the Institut national de santé publique du Québec Web site at: <http://www.inspq.qc.ca>.*

*Reproductions for private study or research purposes are authorized by virtue of Article 29 of the Copyright Act. Any other use must be authorized by the Government of Québec, which holds the exclusive intellectual property rights for this document. Authorization may be obtained by submitting a request to the central clearing house of the Service de la gestion des droits d'auteur of Les Publications du Québec, using the online form at <http://www.droitauteur.gouv.qc.ca/en/autorisation.php> or by sending an e-mail to [droit.auteur@cspq.gouv.qc.ca](mailto:droit.auteur@cspq.gouv.qc.ca).*

*Information contained in the document may be cited provided that the source is mentioned.*

LEGAL DEPOSIT – 1<sup>st</sup> QUARTER 2015  
BIBLIOTHÈQUE ET ARCHIVES NATIONALES DU QUÉBEC  
LIBRARY AND ARCHIVES CANADA  
ISSN: 1918-3348 (FRENCH PRINTED VERSION)  
ISSN: 1919-3356 (FRENCH PDF)  
ISBN: 978-2-550-72459-9 (FRENCH PRINTED VERSION)  
ISBN: 978-2-550-72460-5 (FRENCH PDF)  
ISSN: 1918-3364 (PRINTED VERSION)  
ISSN: 1918-3372 (PDF)  
ISBN: 978-2-550-72468-1 (PRINTED VERSION)  
ISBN: 978-2-550-72469-8 (PDF)

© Gouvernement du Québec (2015)

## Table of Contents

<b>Definition of the concept of safety</b> .....	<b>1</b>
<b>Description of the Collaborating Centre</b> .....	<b>1</b>
Partner organizations .....	1
Director .....	1
Coordinator .....	1
Steering committee .....	1
Mission .....	2
2010-2014 Mandate .....	2
Anticipated contributions .....	2
<b>First anticipated contribution</b> .....	<b>3</b>
Collaborate on WHO's program of activities in the realm of safety promotion and injury prevention .....	3
<b>Second anticipated contribution</b> .....	<b>9</b>
Contribute to the maintenance and development of the initiatives of the Réseau francophone de prévention des traumatismes et de promotion de la sécurité .....	9
<b>Third anticipated contribution</b> .....	<b>9</b>
Contribute to capacity building in respect of safety promotion in the French-speaking countries and in Latin America .....	9
<b>Fourth anticipated contribution</b> .....	<b>10</b>
Offer technical support in the realm of safety promotion and injury prevention in French-speaking Africa .....	10
<b>Fifth anticipated contribution</b> .....	<b>10</b>
Participate in the activities of the International Organizing Committee (IOC) of the World Conferences on Injury Prevention and Safety Promotion .....	10
<b>Sixth anticipated contribution</b> .....	<b>10</b>
Comment on, validate and adapt, if need be, the French-language translations of WHO/PAHO reports and publications .....	10
<b>Other publications, presentations and outcomes</b> .....	<b>10</b>
<b>Outlook for the coming years</b> .....	<b>11</b>
<b>Appendix 1 Members of the Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention</b> .....	<b>13</b>



## 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.

## 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.

<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.

## 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

---

- Guillaume Burigusa, Scientific Advisor, Sécurité et prévention des traumatismes, Direction du développement des individus et des communautés, Institut national de santé publique du Québec

## Steering committee

---

- André Lizotte, Coordinator, Développement, adaptation et intégration sociale, Ministère de la Santé et des Services sociaux du Québec
- Guillaume Burigusa, Scientific Advisor, 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, Direction régionale de santé publique de la Capitale-Nationale
- Sylvain Leduc, Coordinator, Injury Issues, Agence de la santé et des services sociaux du Bas-Saint-Laurent/Direction de santé publique



- 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, Direction de santé publique de Montréal
- Pierre Patry, Promotion de saines habitudes de vie et de dépistage, Ministère de la Santé et des Services sociaux du Québec
- Yovan Fillion, 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, Direction de santé publique de la Montérégie
- 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.

## 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**. Exceptionally, this report covers a period of 16 months, i.e. the year 2013 and the first four months of 2014, given that the Centre's 2010-2014 mandate expired at the end of April 2014. The next report will cover a period of eight months, starting with the new 2014-2018 mandate. The report 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 Guillaume Burigusa ([guillaume.burigusa@inspq.qc.ca](mailto:guillaume.burigusa@inspq.qc.ca)).

## 2010-2014 Mandate

- Collaborate in the activities of the WHO and the PAHO.
- Satisfy the needs of the international community.
- 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 promotion and injury prevention 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.

## 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 a meeting of the directors of WHO Collaborating Centres for Violence and Injury Prevention at WHO headquarters in Geneva in December 2013 (Pierre Maurice : maurice.pierre@inspq.qc.ca).
- Participation in a teleconference via Elluminate organized by the PAHO on November 19, 2013.

##### Violence prevention

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

- Dr. Pierre Maurice, Director of the Collaborating Centre, served as a member of the Steering Committee of the Canadian Injury Prevention and Safety Promotion Conference held in Montréal from November 5 to 7, 2013. The main role of Dr. Maurice was to integrate the theme of violence prevention into the conference. He took the opportunity to present WHO publications related to violence prevention in a paper he gave during one of the plenary panel sessions (Pierre Maurice: pierre.maurice@inspq.qc.ca).
- Initiation of work to produce a Québec report on violence and health.

At the request of the ministère de la Santé et des Services sociaux (MSSS), we developed specifications for defining the feasibility of producing a Québec report on the theme of violence prevention and health. This report will shed more light on the phenomenon of violence in Québec and on the interaction of the various forms of violence that might be experienced at different stages in life. It will thus help to identify effective violence prevention strategies. The report will draw largely on WHO's

*World Report on Violence and Health* (Julie Laforest: julie.laforest@inspq.qc.ca).

- Initiation of a project on intra-family homicide in conjunction with the Quebec Press Council (QPC).  
A member of the Collaborating Centre was approached by the Quebec Press Council to take part in a project on media coverage of intra-family homicides in Québec, focusing specifically on the impact of such coverage on the incidence, characteristics and consequences of this type of homicide. The objectives of the project are to describe and analyze media coverage of domestic homicide, analyze cases of domestic homicide in the Coroner's files and conduct a literature review of the effects of media coverage of spousal homicide. A report analyzing media coverage of intra-family homicide from 2007 to 2012 was tabled within the scope of this project in November 2013 (Julie Laforest: julie.laforest@inspq.qc.ca).
- Initiation of an intervention project to act on social norms in the workplace in order to prevent intimate partner violence.

This project is part of intimate partner violence prevention efforts currently being deployed in Québec. According to the WHO, a promising strategy for preventing this type of violence involves changing the social norms that foster it. Therefore, steps should be taken to develop interventions based on this strategy and targeting a range of settings. To that end, the project seeks to explore the use of a new intervention setting, i.e. the workplace, to prevent intimate partner violence. Since this is a new research topic, the project is designed to be exploratory. More specifically, it aims to examine openness to interventions in the workplace as a means for preventing intimate partner violence, explore the feasibility and appropriateness of using the workplace to carry out prevention activities designed to influence social norms regarding intimate partner violence, identify the conditions needed to conduct such activities, and pinpoint possible courses of action based on a literature review and data collection. The project is being carried out as part of a Masters in Community Health and the report will be available in spring 2015.

- Initiation of work to prepare a public health advisory on self-induced intoxication through over-the-counter drugs.

In September 2013, the MSSS tasked the INSPQ with preparing a public health advisory on self-induced intoxication through over-the-counter drugs and on effective prevention strategies that could be applied in Québec. The work is under way and an expert panel has been created. This panel is responsible for providing the INSPQ with assistance and support in preparing the advisory. The advisory will be available in summer 2015 (Louise-Marie Bouchard: [Louise.Marie.Bouchard@inspq.qc.ca](mailto:Louise.Marie.Bouchard@inspq.qc.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 to impaired driving and distractions while driving. (Pierre Maurice: [pierre.maurice@inspq.qc.ca](mailto:pierre.maurice@inspq.qc.ca)). In the TQSR's third report, published in October 2013, the working committee on active and alternative transportation made the following recommendations in connection with the theme of active and safe transportation for three types of vulnerable users, namely, young people aged 14 or under, people aged 65 or over and handicapped people:

1. Encourage municipalities to develop a sustainable mobility plan favouring modal shift and safe active transport within the perspective of universal accessibility.
2. Encourage municipalities to adapt the length of time allowed for crossing intersections with traffic lights in sectors with a high concentration of elderly or handicapped people.
3. Encourage municipalities to build sidewalks on both sides of the streets along school zones, school routes, playground zones, and residences for elderly people and hospitals and to clear sidewalks of snow in winter.

4. Encourage municipalities, police forces, associations, community and school sectors, as well as the health and social services network, to work together, in their community, to improve the safety of vulnerable persons using active transportation.
5. Encourage municipalities to use all the information tools available in terms of road safety to encourage exchanges on good practices to improve road safety.
6. Promote use of the standards recorded in the volumes of the Normes – Ouvrages routiers collection published by the Ministère des Transports du Québec, notably those concerning sidewalks, bicycle paths and road infrastructure, in order to encourage safer transport for vulnerable users.
7. Increase public awareness of the need to respect the rules concerning right turns on red and of police surveillance activities, when necessary.
8. Remind network managers of the need to keep track of the performance of intersections, in terms of accident statistics on specific situations that involve right turns on red, for example.
9. Reinstatement of a follow-up committee on right turns on red made up of representatives of target groups of users, the municipal sector, ministries, municipal organizations, and experts on road safety.
10. Revise the guide entitled *Mise en œuvre du virage à droite au feu rouge* to update the criteria implementing right turns on red with regard to the safety issues concerning all vulnerable users.
11. Better promote the tools and initiatives aiming to encourage safe, active and alternative transportation for children on their way to school.
12. Propose that the Ministère de l'Éducation, du Loisir et du Sport (MELS) explore new ways to integrate the concepts of road safety into youth interventions at the primary and secondary levels.



In addition, the working committee on impaired driving and distractions while driving made the following recommendations on the theme of impaired driving in the TQSR's third report:

1. Plan cooperative mechanisms between the organizations concerned with road safety to raise awareness, inform, and educate the Québec population on the subject of new legislative measures and the effect of drugs when driving a motor vehicle, as well as to design tools for this purpose.
2. Examine the legal and practical feasibility of implementing the same administrative sanctions that are immediately applied under the *Highway Safety Code* to drivers who are arrested for a minor criminal offence relating to impaired driving due to consumption of alcohol and/or drugs.
3. Increase the frequency of selective breath testing (SBT) for impaired driving due to consumption of alcohol and/or drugs and ensure that the necessary financial, human, and technical resources are available for all the organizations concerned.
4. Support the position presented by the Québec government to the federal-provincial-territorial work group on impaired driving with respect to random breath testing (RBT). The government would like the matter to be referred to the Supreme Court so that the Court can rule on the constitutional value of RBT before the legislation is implemented.

### **Injuries among children and young people**

Continue efforts to disseminate and implement the *World report on child injury prevention*:

- Participation in a federal committee under the Community Action Program for Children (CAPC), designed to meet the health and development needs of children aged 12 or under living in vulnerable situations. The committee's objective is to analyze projects to promote safety and prevent unintentional injuries among this clientele (Yovan Fillion: yovan.fillion@msss.gouv.qc.ca).

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

### **Violence**

Baril, K et Maurice, P. (2013). La couverture journalistique des agressions sexuelles dans la presse écrite au Québec : portrait et enjeux concernant la prévention. 7<sup>e</sup> Congrès international francophone sur les agressions sexuelles – CIFAS 2013.

Beaulieu, M., Laforest, J., Maurice, P., Belzile, M. (2013). Détecter la maltraitance envers les personnes âgées à l'aide d'outils validés dans différents pays: Comment vulnérabilité et risques sont-ils appréhendés? Colloque « Vieillesse, citoyenneté, vulnérabilités : mise en perspectives de recherches internationales », organisé par la Maison des sciences de l'homme de Bretagne, Rennes, France, Novembre.

Blais, É., Linteau, I., et Gagné, M-P. (2013). Le contrôle des armes à feu, les homicides et les violences armées, in M. Cusson, S. Guay, J. Proulx et F. Cortoni (Eds), *Traité des violences criminelles*, pp. 651-672. Montréal : Hurtubise.

Laforest, J., Maurice, P., Beaulieu, M., Belzile, L. (2013). Recherche de cas de maltraitance envers des personnes âgées par des professionnels de la santé et des services sociaux. Institut national de santé publique du Québec.

Laforest, J., Maurice, P., Beaulieu, M., Belzile, L. (2013). Favoriser la recherche de cas de maltraitance commise envers des aînés – Réflexion critique pour la pratique en première ligne. Conférence canadienne sur la prévention des traumatismes et la promotion de la sécurité. Montréal. 5 au 7 novembre 2013.

Laforest, J et Maurice, P. (2013). Perspectives de santé publique pour prévenir la violence conjugale. Séminaire du Centre de recherche interdisciplinaire sur la violence familiale et la violence faite aux femmes (CRI-VIFF). Québec, 1<sup>er</sup> février, 2013.

Laforest, J et Maurice, P. (2013). « Repérer l'exploitation financière et matérielle commise envers des personnes âgées : les outils de détection peuvent-ils nous aider? » 81<sup>e</sup> congrès de l'Association francophone pour le savoir (ACFAS). Colloque « L'exploitation financière des personnes âgées : prévention, résolution et sanction ». Québec, 9 mai 2013.

Légaré, G, Gagné, M, St-Laurent D, Perron, P.A. *La mortalité par suicide au Québec : 1981 à 2011, mise à jour 2014*, INSPQ, janvier 2014, 20 p.

Légaré, G. *Suicide de personnes âgées au Québec, tendance des 30 dernières années*, Journée régionale en prévention du suicide de Montréal, Association québécoise de prévention du suicide, Montréal, février 2014, (publication d'un abrégé).

Légaré, G. *Suicide de personnes âgées au Québec, tendance des 30 dernières années*, Journée régionale en prévention du suicide de Laval, Association québécoise de prévention du suicide, Laval, février 2014, (publication d'un abrégé).

Légaré, G., Gagné M. *Épidémiologie de suicide au Québec, mise à jour 2014*, Journée du Crise, Montréal, janvier 2014.

Légaré, G., Hamel, D. (2013). An age-period-cohort approach to analyzing trends in suicide in Quebec between 1950 and 2009, *Revue canadienne de santé publique*, 104(2), i18-i23.

Légaré, G, Gagné, M, St-Laurent D, Perron, P.A. *La mortalité par suicide au Québec : 1981 à 2010, mise à jour 2013*, INSPQ, février 2013, 19 p.

Légaré, G. Hamel, D. *Tendance du suicide au Québec entre 1950 et 2009, Analyse âge période cohorte*, Conférence canadienne de prévention des blessures, Montréal, novembre 2013.

Légaré, G., Hamel, D. *Le suicide est-il affaire de génération au Québec, une analyse âge période cohorte sur 60 années*, Congrès mondial sur le suicide 2013, Montréal, juin 2013.

Légaré, G. *Suicide de personnes âgées au Québec, tendance des 30 dernières années*, Journée régionale en prévention du suicide du Centre-du-Québec, Association québécoise de prévention du suicide, Drummondville 2013, (publication d'un abrégé).

Légaré, G. *Suicide de personnes âgées au Québec, tendance des 30 dernières années*, Journée régionale en prévention du suicide de Lanaudière, Association québécoise de prévention du suicide, St-Liguori (Joliette) 2013, (publication d'un abrégé).

Légaré, G. *Suicide de personnes âgées au Québec, tendance des 30 dernières années*, Journée régionale en prévention du suicide des Laurentides, Association québécoise de prévention du suicide, St-Jérôme, février 2013, (publication d'un abrégé).

Légaré, G., Hamel D. *Le suicide est-il affaire de génération au Québec*, INSPQ, Québec, janvier 2013.

Maurice, P., Laforest, J. (2013) *La violence au Canada : une perspective de santé publique*. Conférence canadienne sur la prévention des traumatismes et la promotion de la sécurité. Montréal. 5 au 7 novembre 2013.

Michaud, C. & Légaré, G. *L'estimation de la dangerosité du passage à l'acte : une nouvelle façon d'intervenir auprès de la personne à risque suicidaire*, Journée annuelle de formation en maladies chroniques, Agence santé et services sociaux du Bas-Saint-Laurent, Rimouski, 2013.

Reeves-Latour, M., et Blais, É. (2013). *The relationship between firearms availability and homicides in Canada*. Présentation faite au Congrès annuel de l'American Society of Criminology. Atlanta, GA, 20-23 novembre 2013.

### **Road safety**

Bellefleur, O. (2014). *Des voies de circulation de 3,0 m de large en milieu urbanisé*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. (2014). *Traffic Lane Width of 3.0 m in Urban Environments*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. et Gagnon, F. (2014). Des normes municipales novatrices favorables au transport actif sécuritaire : introduction à une série de notes documentaires. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. et Gagnon, F. (2014). *Innovative Municipal Norms Conducive to Safe Active Transportation: Introduction to a Series of Briefing Notes*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. (2013). Apaisement de la circulation urbaine et inégalités de santé : effets et implications pour la pratique. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. (2013). *Urban Traffic Calming and Health Inequalities: Effects and Implications for Practice*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bellefleur, O. et Gagnon, F. (2013). *Transport planning and engineering: seeing opportunities for public health*. Webinaire présenté aux membres de la COALITION Bâtir un Canada en santé, 14 mai, 2013.

Blais, É., Sergerie, D., et Maurice, P. (2013). The effect of ignition interlock programs on drinking-and-driving: a systematic review. Paper published in the proceedings of the 23<sup>rd</sup> Canadian Multidisciplinary Road Safety Conference. Montréal: Québec. 26-29 mai.

Blais, É., Sergerie, D., et Maurice, P. (2013). The effect of ignition interlock programs on drinking-and-driving: a systematic review. Paper presented at the 23<sup>rd</sup> Canadian Multidisciplinary Road Safety Conference. Montréal: Québec. 27 mai 2013.

Blais, É. (2013). Activités policières et sécurité routière : comment les études scientifiques contribuent au changement des pratiques et politiques. Présentation faite le 29 mai 2013 dans le cadre de la conférence annuelle du CIRRELT. Montréal Québec, 29-30 avril 2013.

Blais, É. (2013). On the importance of environments and contexts in deterrence research: the case of traffic infringements. Présentation faite au Key Centre For Ethics, Law and Governance. Brisbane QD : Griffith University, 11 février 2013.

Carnis, L., et Blais, É. (2013). An assessment of the safety effects of the French speed camera program. *Accident Analysis and Prevention*, 51 : 301-309.

Bowman, S. (2013). *Les régimes routiers : des voies publiques plus minces et favorables à la santé*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bowman, S. (2013). *Road Diets: Fitter, Healthier Public Ways*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Bruneau, J.-F., Maurice, P., Quinones, M. (2013) La perception des usagers de la voie publique du statut et des règles de circulation applicables aux aides à la mobilité motorisées. *Recherche Transports Sécurité*, no 29, p. 295-312.

Bruneau, J.-F., Crevier, G., Maurice, P., Quinones, M. (2013) Safety of personal mobility devices on public infrastructures, Conférence canadienne 2013 sur la prévention des traumatismes et la promotion de la santé, Montréal, 5-7 novembre 2013.

Bruneau, J.-F., Crevier, G., Maurice, P. (2013) Circulation en conditions réelles des aides à la mobilité motorisées, 23<sup>e</sup> Conférence canadienne multidisciplinaire sur la sécurité routière, Montréal, 26-29 mai 2013.

Bruneau, J.-F., Crevier, G., Maurice, P., Quinones, M. (2013) Safety and travelling patterns of personal mobility devices (PMDs) on public infrastructures, Canadian Workshop on Mobility Scooters, Organized by Transportation Development Centre of Transport Canada, Calgary, November 27, 2013.

Bruneau, J.-F., Crevier, G., Maurice, P., Quinones, M. (2013) Safety of personal mobility devices on public infrastructures, Conférence canadienne 2013 sur la prévention des traumatismes et la promotion de la sécurité, Montréal, 5-7 novembre 2013.

Bruneau, J.-F., Crevier, G., Maurice, P. (2013) Circulation en conditions réelles des aides à la mobilité motorisées, 23<sup>e</sup> Conférence canadienne multidisciplinaire sur la sécurité routière, Montréal, 26-29 mai 2013.

Bruneau, J.-F., Maurice, P. (2013) Quoi de neuf en accessibilité universelle : état de situation des grands projets provinciaux, Colloque annuel du Réseau Québécois de Villes et Villages en santé, Victoriaville, 19 septembre 2013.

Bruneau, J.-F., Crevier, G., Maurice, P., Quinones, M. (2013). Travelling patterns of personal mobility devices on public infrastructures, Walk 21 Conference, Munich, Germany, September 11-13, 2013.

Bruneau, J.-F., Crevier, G., Maurice, P. (2013) Sharing Multi-use and Cycling Infrastructures With Personal Mobility Devices. Velo-City Conference, Vienna, Austria, June 12, 2013.

Bruneau, J.-F., Crevier, G., Maurice, P. (2013) Safety and Travelling Patterns of Personal mobility Devices. International Congress: Mobility & Road Safety in an Ageing Society, Vienna, Austria, June 19-20, 2013.

Bruneau, J.-F., Quinones, M., Maurice, P. (2013) Usage réel et perceptions du public à l'égard des aides à la mobilité motorisées. 48<sup>e</sup> Congrès annuel de l'AQTR, Montréal, 25-27 mars 2013.

Burigusa G, Lavoie M, Maurice P, Turmel É (2013). Évaluation d'un projet pilote visant à promouvoir l'utilisation correcte des sièges d'auto pour enfants dans deux régions du Québec. Institut national de santé publique du Québec, 172 p.

Burigusa G, Lavoie M, Maurice P, Hamel D, Duranceau A. Sécurité des élèves du primaire lors des déplacements à pied et à vélo entre la maison et l'école au Québec. Colloque organisé par l'AQTR : De la zone scolaire à la ville active : mieux intervenir pour sécuriser les déplacements actifs. 15 mai 2013. Montréal.

Burigusa G, Lavoie M, Maurice P, Hamel D. Transport actif et sécuritaire au primaire. 23<sup>e</sup> Conférence canadienne multidisciplinaire sur la sécurité routière. Montréal, Québec, 26-29 mai 2013.

Fuller D, Morency P. A population approach to transportation planning: Reducing exposure to motor-vehicles. *Journal of Environmental and Public Health*. 2013;2013:916460. doi: 10.1155/2013/916460.

Fuller D, Gauvin L, Morency P, Kestens Y, Drouin L. The impact of implementing a public bicycle share program on the likelihood of collisions and near misses in Montreal, Canada. *Preventive Medicine*. 2013 Dec;57(6):920-4. doi: 10.1016/j.ypmed.2013.05.028.

Gagnon, F. (2014). Une limite de vitesse de 30 km/h sur les rues locales. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Gagnon, F. (2014). *A 30-km/h Speed Limit on Local Streets*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Gagnon, F. (2013). Des carrefours giratoires pour la santé publique. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Gagnon, F. (2013). *Roundabouts for Public Health*. Montréal, Québec : Centre de collaboration nationale sur les politiques publiques et la santé.

Lusk AC, Morency P, Miranda-Moreno LF, Willett WC, Dennerlein JT. Bicycle Guidelines and Crash Rates on Cycle Tracks in the United States. *American Journal of Public Health*. 2013 Jul;103(7):1240-8. doi: 10.2105/AJPH.2012.301043.

Lusk AC, Morency P, Miranda-Moreno LF, Willett WC, Dennerlein JT. Lusk & al. Respond. *Am J Public Health*. 2013 Oct;103(10):e8. doi: 10.2105/AJPH.2013.301531.

Morency P, Archambault J, Cloutier MS, Tremblay M, Plante C, Dubé AS. Aménagements routiers aux intersections majeures: un risque accru pour les piétons. COPIE 2013 – Colloque international francophone piétons : La ville sous nos pieds, connaissances et pratiques favorables aux mobilités piétonnes. Montréal (Canada), 20-22 novembre 2013. (à paraître).

Morency P, Archambault J, Cloutier MS, Tremblay M, Plante C, Dubé AS. Sécurité des piétons en milieu urbain: enquête sur les aménagements routiers aux intersections. 2013. Agence de la santé et des services sociaux ; direction de santé publique: Montréal. 2013. 34 p.

Morency P, Archambault J, Cloutier MS, Tremblay M, Plante C, Dubé AS. Sécurité des piétons en milieu urbain: enquête sur les aménagements routiers aux intersections - Rapport synthèse. Agence de la santé et des services sociaux ; direction de santé publique: Montréal. 2013. 4p.

Morency, P, Tessier, F, Thérien, F, Archambault, J. La sécurité des piétons à Montréal : améliorer les aménagements routiers. Présenté à la Commission permanente sur le transport et les travaux publics de la Ville de Montréal., 2013, 36 pages.

Morency P. Paquin S. Une perspective de santé publique sur le transport et la sécurité des piétons à Montréal. Forum URBA 2015, Université du Québec à Montréal, 20 novembre 2013.

Morency P. Public health approach to reduce pedestrian injuries in urban settings. Hands on Sustainable Urban Mobility, a Canada-Germany workshop, McGill University, Montréal, June 18<sup>th</sup> 2013.

Morency P, Grondines J, Pépin F, Tessier F, Archambault J. Comparaison de la sécurité des déplacements en automobile et en autobus de la STM. 48<sup>e</sup> Congrès de l'Association québécoise du transport et des routes (AQTR), 25 mars 2013.

Strauss J, Miranda-Moreno LF, Morency P. Cyclist Activity and Injury Risk Analysis at Signalized Intersections: A Bayesian Modeling Approach. Accident Analysis & Prevention. 2013 Oct;59:9-17. doi: 10.1016/j.aap.2013.04.037.

## C OTHER KNOWLEDGE TRANSFER ACTIVITIES

Morency P. Circulation et sécurité des piétons dans Rosemont – Petite Patrie. Ateliers d'information « Vieillir en santé dans des quartiers sécuritaires », Centre Lapalme, Montréal, 16 septembre 2013.

Morency P. Circulation et sécurité des piétons dans Côte des Neiges - Notre-Dame de Grâce. Ateliers d'information « Vieillir en santé dans des quartiers sécuritaires », Centre de ressources communautaires de Côte des Neiges, Montréal, 13 septembre 2013.

Morency P. Circulation et sécurité des piétons dans Ahuntsic – Cartierville. Ateliers d'information « Vieillir en santé dans des quartiers sécuritaires », Centre Y Cartierville, Montréal, 12 septembre 2013.

Morency P. Aménagements des intersections et piétons blessés : Dix ans de recherches à la DSP. Direction de santé publique, Montréal, 19 mars 2013.

Morency P, Tessier F. Comparaison de la sécurité des déplacements en automobile et en autobus de la STM. Secteur Environnement urbain et santé, Direction de santé publique, Montréal 12 février 2013.

## 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:

- The Réseau was not active in 2013 since the French-language seminar was cancelled because of the economic context.

## Third anticipated contribution

### Contribute to capacity building in respect of safety promotion in the French-speaking countries and in Latin America

---

#### Activities carried out

- Due to the prevailing political and security context in Mali in 2013, support activities to the Ministry of Health and the Agence nationale de sécurité routière (ANASR) had to be suspended.



## Fourth anticipated contribution

### Offer technical support in the realm of safety promotion and injury prevention in French-speaking Africa

---

#### Activities carried out

- Support for preparation of a scientific article on road safety in Brazzaville and Pointe-Noire.

The Association congolaise de santé publique et communautaire (ACSPC) received support for preparing a scientific article based on the results of a safety diagnosis as part of efforts to provide technical support for the drafting of a report on road safety in Brazzaville and Pointe-Noire in 2012. The article was to be published in a special edition of the French journal *Santé publique*, entitled “Promotion de la santé en Afrique” (Pierre Maurice: pierre.maurice@inspq.qc.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 2013. 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 2013 in respect of this contribution.

## Other publications, presentations and outcomes

### Agricultural injuries

Burigusa, G., Gagné, M., Girard, S.A., Maurice, P. (2013). « Regard de la santé publique sur la sécurité à la ferme : le cas des blessures chez les jeunes travailleurs et les travailleurs migrants », Conférence annuelle de l'association canadienne de sécurité agricole, Québec, 10 octobre 2013 – présentation orale.

### Evaluation of the injury prevention media kit website

Burigusa, G. (2013). Rapport d'évaluation du site de la trousse média en prévention des traumatismes. Rapport interne, remis au Ministère de la Santé et des Services sociaux en décembre 2013. Institut national de santé publique du Québec.

### Fall injury prevention

Gagné M, Robitaille Y, Jean S, Perron PA (2013). Évolution de la mortalité associée aux chutes chez les personnes âgées au Québec, 1981 à 2009. *Maladies chroniques et blessures au Canada*. 2013 Sep; 33 (4) : 255-65.

Gagné M, Robitaille Y, Jean S, Perron PA (2013). Changes in fall-related mortality in older adults in Quebec, 1981-2009. *Chronic Diseases and Injuries in Canada*. 2013 Sep; 33 (4) : 226-35.

Gagné, M., Dubé, P.-A., Perron, P.-A., Langlois, É., Légaré, G., Sirois, M.-J., St-Laurent, D. (2013). Décès attribuables aux intoxications par opioïdes au Québec : 2000 À 2009. Montréal, Québec : Institut national de santé publique du Québec.

Gagné M & B Tremblay. Sports and recreational injury surveillance: A Scoping review of indicators. *Surveillance*.

Canadian Injury Prevention and Safety Promotion Conference. Montréal. 5 au 7 novembre 2013.

Gagné M., Dubé PA, Perron PA, Langlois E, G Légaré et al. Changes in opioid-related mortality in Quebec, 2000–2009. *Suicide and Self Harm*.

Canadian Injury Prevention and Safety Promotion Conference. Montréal. 5 au 7 novembre 2013.

Gagné M, Sirois MJ & L Moore. Injury severity measures based on the International Classification of Diseases (ICD) used in administrative dataset : a systematic review. Poster session. Canadian Injury Prevention and Safety Promotion Conference. Montréal. 5 au 7 novembre 2013.

## 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. In 2013, the Québec WHO Collaborating Centre was closely involved in the organization and holding of the Canadian Injury Prevention and Safety Promotion Conference, under the theme “Evidence to Action: Prevent Injury and Violence Now!” The conference took place in Montréal from November 5 to 7, 2013. It is important to note that major events like this are an excellent opportunity for disseminating information and WHO recommendations in the realm of safety promotion and injury prevention.

In 2013, we continued our support for the Association congolaise de santé publique et communautaire as part of efforts to provide technical support in the realm of safety and injury prevention in French-speaking Africa. Moreover, our Centre plans to help the association finalize all the steps required to publish an article entitled “Étude exploratoire de la sécurité routière à Brazzaville et à Pointe-Noire, République du Congo” in the French journal *Santé publique*.

Given that the designation period for the Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention was to expire at the end of April 2014, this is the last report on the commitments made under the Centre’s 2010-2014 action plan. Between February and April 2014, we initiated the redesignation process by proposing a new work plan to the WHO and the PAHO for the next four years. At the time of writing this report, the Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention had already received official confirmation of the renewal of its designation as a WHO collaborating centre for the next four years. In keeping with previous commitments, the Centre and the WHO/PAHO have agreed to focus their activities on the following contributions:

1. Collaborate on WHO’s program of activities in the realm of violence and injury prevention and safety promotion.
2. Contribute to the maintenance and development of the Réseau francophone international 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 promotion and injury prevention in French-speaking Africa and Latin America.
5. Comment on, validate and adapt, if need be, the French-language translations of WHO/PAHO reports and publications.

In 2014, the Collaborating Centre will continue to disseminate the WHO’s recommendations on road safety through local leveraging initiatives. Specifically, it will take part in the work of the Table québécoise de sécurité routière, as well as in work to prepare a government strategy for sustainable intervention in road safety within the scope of the Decade of Action for Road Safety. The Collaborating Centre will also continue to disseminate the WHO’s recommendations on violence prevention through the Québec report on violence and health. Lastly, the Collaborating Centre will play an active role in developing a new national public health program, which will define priority actions to be carried out in the realm of public health in Québec at the provincial, regional and local levels. As part of this work, the policy directions and recommendations included in reports published by the WHO will be considered with a view to supporting proposals on safety promotion and the prevention of injuries and violence.

### Financial questions

Under the agreement established, the Collaborating Centre’s action plan does not call for any financial commitment by the Collaborating Centre and the 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 1 Members of the Québec WHO Collaborating Centre for Safety Promotion and Injury Prevention

### **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 du Québec (INSPQ), 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 201 000 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 1.5 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.

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

The Direction de santé publique de Montréal serves a population of nearly 2 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 over 725 000 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.

---

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





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.

**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



Organisation mondiale de la santé  
World Health Organization

