

Response ID ANON-7GCE-MR63-E

Submitted to National Injury Prevention Strategy

Submitted on 2020-06-13 02:59:07

SECTION A: About you

1 What is your name? (Optional)

Name:

Dr Michael Craig Watson

2 The Department of Health would like your permission to publish your consultation response. Please indicate your publishing response.

Publish response (your email address will not be published but all other answers, including your name, will be published)

3 Please provide your personal or organisation's email address below (optional). Your email will be used to allow a PDF of your response to be automatically sent to you after you submit your response. If you enter your email address, the Department will be provided with your email, and you will automatically receive an acknowledgement email when you submit your response.

Email address:

mcwatson100@gmail.com

4 Are you providing your response as: (select all that apply)

Other - specify in text box below

Other:

Trustee - Institute of Health Promotion and Education

5 Where are you based?

Outside Australia - if yes, provide location in text box below

Location if outside Australia :

UK

6 Are you providing your response on behalf of an organisation, government department or agency? If you are responding on behalf of an organisation, government department or agency, please provide the name and area of expertise of the organisation below.

Yes

If applicable, please specify the name of your organisation, department or agency:

The Institute of Health Promotion and Education (IHPE)

<https://ihpe.org.uk/>

If applicable, please specify the area of expertise of your organisation, department or agency:

IHPE - Health Promotion/Health Education/Public Health

+ I have worked in injury prevention for over 25 years (Practitioner first, then as an academic)

7 In which country were you born?

Outside Australia (Please specify below)

If selected Outside Australia, please specify country of birth:

Scotland

8 How old are you?

55-64

9 Are you of Aboriginal and/or Torres Strait Islander origin?

No

10 Do you identify as a person from one or more of the priority populations identified in the Strategy? (Select all that apply)

None of the above

11 Do you or your organisation represent one or more of the priority population groups? (Select all that apply)

Adults (25-64 years)

SECTION B: Structure of the Strategy

12 Regarding the entire Strategy, is the overall structure of the Strategy appropriate and easy to follow?

Yes

Please provide comments on the overall structure of the Strategy (250 word limit):

Overall structure is logical and easy to follow.

This document will be targeted at a fairly wide audience in order to promote maximum action. But is it more in the style for those that are already converted to the issues?

The planned case studies will make it more accessible. Photographs will also help.

Can some of the tables be put in the appendix?

I have suggested some diagrams below in question 15.

The European Child Injury Prevention Report is excellent - easy to read and very accessible - it could be used to provide further ideas (e.g. graphics).

Sethi, D; Towner, E; Vincenten, J; Segui-Gomez, M; Racioppi, F;. (■2008)■. European report on child injury prevention. World Health Organization. Regional Office for Europe.

Smaller point - can the cover include more positive images?

e.g. Safe cycling.

e.g. Safe swimming.

e.g. Medicines locked safely away.

13 Context and background for the Strategy: Do the sections 'Introduction' and 'Setting the Scene' provide adequate context and background for the Strategy?

No

14 Is there anything missing or should be changed in the 'Introduction' section?

Please provide comment below on the Introduction (250 word limit):

There are links between accident prevention and other important issues on the public health agenda. Programmes that promote accident prevention can also support other indicators of wellbeing.

-Encouraging active lifestyles.

-Tackling alcohol and drug abuse.

-Reducing obesity.

e.g. improving the safety of cyclists and pedestrians encourage more activity.

e.g. preventing older people falling allows them to be more active.

15 Is there anything missing or should be changed in the 'Setting the Scene' section?

Please provide comment below on the section 'Setting the Scene' (250 word limit) :

1) In public health we often concentrate on the problem in a negative way to gain more resources. But perhaps we should highlight past success more. Accident prevention has been very successful in the past.

• Watson M C and Errington G. Preventing unintentional injuries in children: successful approaches. Paediatrics and Child Health.2016; 26(5), 194-199

• Hemenway D. While We Were Sleeping. Success Stories in Injury and Violence, Berkeley: University of California Press, 2009.

• CDC. Ten Public Health Achievements of the Twentieth Century - United States, 1900-1999. MMWR Weekly 1999;48(12):241–3

• Ten Great Public Health Achievements --- United States, 2001--2010

<https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6019a5.htm>

Workplaces.....Car safety.....

2) Could this section also be used to inform about successful approaches

e.g. 3 "Es" Very important. History of public health indicates that we often just get information campaigns. Whereas combined approaches are more likely to be effective (and are in line with the Ottawa Charter for Health Promotion). Diagram could be used.

e.g. Public Health Approach (as in European and World Child Injury Reports). Diagram?

3)Add the Iceberg diagram – to show deaths are just the tip.

SECTION C: Vision and Call for Action

16 Is the overarching vision for the Strategy appropriate? The Strategy Vision reads as follows: "To reduce the overall burden of injury in Australia and address inequities that contribute to the disproportionate burden of injury experienced by specific population groups"

No

Please provide comments to explain your selection (250 word limit):

Could an addition be made to make it more positive.

The strategy aims to promote safe and active lives.

17 The Strategy has three core outcome indicators reflecting the Vision. Are the three core outcome indicators appropriate? Please specify for each core outcome indicator below.

Appropriateness of the three core outcome indicators - 1. Reduced rates of injury in key priority areas. Target: To reduce the overall rate of injury burden by 30%:

Very appropriate

Appropriateness of the three core outcome indicators - 2. Reduced burden of injury in priority populations Target: To reduce the overall rate of injury by 40% among the priority populations:

Very appropriate

Appropriateness of the three core outcome indicators - 3. Reduced risk of injury due to the three cross-cutting priority areas:

Very appropriate

Please provide comments on core indicators including whether they should be amended and the rationale for a suggested amendment. Please specify the indicator number (1, 2 and/or 3) when commenting (500 word limit):

Could some positive health indicators be added?

Watson M C and Watson E C. (2013) Premature deaths across England. Time to focus on positive health indicators to reduce health inequalities. BMJ 2013;347:f4210.

<https://www.bmjjournals.org/content/347/bmj.f4210>

18 Are the six principles underpinning the Strategy appropriate? Please specify for each principle below.

Appropriateness of six principles - Evidence-based:

Very appropriate

Appropriateness of six principles - Equity:

Very appropriate

Appropriateness of six principles - Engagement:

Very appropriate

Appropriateness of six principles - Coordination:

Very appropriate

Appropriateness of six principles - Resourcing:

Very appropriate

Appropriateness of six principles - Responsibility:

Very appropriate

Please provide comments on the principles, including if there are principles that are missing or any suggested amendments, providing rationale for suggested changes (500 word limit):

19 Call for Action: Does the section 'Call for Action' adequately frame the approach for and intent of the Strategy?

Yes

Please provide comments on the section 'Call for Action', specifically whether it adequately frames the approach and intent of the Strategy (250 word limit):

Is the final strategy going to have the endorsement of key organisations, community groups and others.

For example in England the National Strategy had the endorsement of organisations such as the Institute of Health Promotion and Education, Faculty of Public Health and the Royal College of Paediatrics and Child Health. + Their logos were included in the document.

RoSPA. Safe and active at all ages: a national strategy to prevent serious accidental injuries in England. Birmingham: RoSPA, 2018.

<https://www.rospa.com/national-strategy/>

SECTION D: Priority populations

20 Priority population: Aboriginal and Torres Strait Islander people. Do the sections 'Understanding context' and 'Burden of injury' provide adequate context and background for injury relating to Aboriginal and Torres Strait Islander people?

Yes

Please provide comments on the sections 'Understanding context' and 'Burden of injury' in relation to Aboriginal and Torres Strait Islander people (500 word limit):

21 Priority population: Aboriginal and Torres Strait Islander people. Does the section 'Applying the Strategy principles for Aboriginal and Torres Strait Islander people' adequately describe how to apply the Strategy principles for Aboriginal and Torres Strait Islander people?

Yes

Please provide comments below regarding Applying the Strategy principles for Aboriginal and Torres Strait Islander people (500 word limit):

22 Priority population: Aboriginal and Torres Strait Islander people. Do you agree with the Strategy's approach to working appropriately with Aboriginal and Torres Strait Islander people, communities and organisations?

Yes

Please provide your comments below regarding the Strategy's approach in relation to working appropriately with Aboriginal and Torres Strait Islander people, communities and organisations (500 word limit):

23 Priority population: Rural and remote populations. Do the sections 'Background' and 'Burden of injury' provide adequate context and background for injury relating to rural and remote populations?

Yes

Please provide your comments below regarding background and burden of injury relating to rural and remote populations (500 word limit):

24 Priority population: Socio-economically disadvantaged people. Do the sections 'Background' and 'Burden of injury' provide adequate context and background for injury relating to socio-economically disadvantaged people?

Yes

Please provide your comments below regarding background and burden of injury relating to socio-economically disadvantaged people (500 word limit):

25 Are the priority areas for action across the priority population groups appropriate? (See Table 3)

Yes

Please provide your comments below regarding the priority areas for action across the priority population groups, including if anything is missing or suggested amendments. Please specify objective number/s where possible (500 word limit):

SECTION E: Life-stages

26 Do you agree with the life-stage approach identified for the Strategy? • Babies and Children (0-14 years) • Youth (15-24 years) • Adults (25-64 years) • Older people (65+ years)

Yes

Please provide comments to explain your selection regarding the life-stage approach for the Strategy (250 word limit):
Sensible categories. (Same as the Accident Strategy for England)

27 Life-stage 1: Babies and Children (0-14 years). Do you agree with the priority areas for action specified for Babies and Children (0-14 years)?

Yes

Please provide comments on the priority areas for action specified for Babies and Children, including if anything is missing or any suggested amendments. Please specify objective number/s where possible (500 word limit):

28 Life-stage 2: Youth (15-24 years). Do you agree with the priority areas for action specified for Youth (15-24 years)?

Yes

Please provide comments on the priority areas for action specified for Youth, including if anything is missing or any suggested amendments. Please specify objective number/s where possible (500 word limit):

29 Life-stage 3: Adults (25-64 years). Do you agree with the priority areas for action specified for Adults (25-64 years)?

Yes

Please provide comments on the priority areas for action specified for Adults, including if anything is missing or any suggested amendments. Please specify objective number/s where possible (500 word limit):

30 Life-stage 4: Older people (65+ years). Do you agree with the priority areas for action specified for Older people (65+ years)?

Yes

Please provide comments on the priority areas for action specified for Older people, including if anything is missing or any suggested amendments. Please specify objective number/s where possible (500 word limit):

31 Life-stage: Antenatal. The Strategy has taken a life-stage approach to injury prevention. While the antenatal period is key life-stage, this stage does not have its own section. Do you agree with this approach?

Yes (this life-stage is adequately captured in other sections)

32 Life-stage: Antenatal. Are there any injury areas or interventions relating to the antenatal period that should be included?

Please provide comments regarding any injury areas or interventions relating to the antenatal period that are missing and should be included, or any other comments relating to this life-stage. Please provide evidence for any suggested actions and note which objective/s you are referring to where possible. (500 word limit):

SECTION F: Cross-cutting priority areas (across the lifespan)

33 Cross-cutting area 1: Reducing injury associated with alcohol. Do the priority areas for action adequately address injury prevention for this cross-cutting issue?

Yes

Please provide comments below regarding priority areas for action in relation to Reducing injury associated with alcohol. If commenting on objectives, please provide objective number/s in your comments. (250 word limit):

Does a sentence need to be added about the positive aspects of alcohol before discussing the many negative aspects?

"Alcohol consumed in moderation is enjoyed by many."

34 Cross-cutting area 2: Reducing injury associated with an increase in extreme weather events. Do the priority areas for action adequately address injury prevention for this cross-cutting issue?

Yes

Please provide comments below regarding priority areas for action in relation to Reducing injury associated with an increase in extreme weather events. If commenting on objectives, please provide objective number/s in your comments. (250 word limit):

35 Cross-cutting area 3: Better planning of the built environment. Do the priority areas for action adequately address injury prevention for this cross-cutting issue?

No

Please provide comments below regarding priority areas for action in relation to Better planning of the built environment. If commenting on objectives, please provide objective number/s in your comments. (250 word limit):

Creating supportive environments is one of the five action areas of the Ottawa Charter because of the irrefutable links between people's health and their environment. The Charter led to the development of the settings approach where environments are designed to support healthy behaviours.

This is an important section - it should be bigger.

Discussion about active/ passive approaches to accident prevention.

+ Provide examples of successful passive approaches.

+ Diagrams and or photos?

Other ideas>>

Improving health by creating supportive environments <https://www.bmjjournals.org/content/369/bmj.m795/rr>

An innovative scheme>>

Royal Society for the Prevention of Accidents. Safer by design. A framework to reduce serious accidental injury in new-build homes. Birmingham: RoSPA, 2019. <https://www.rospa.com/home-safety/Advice/Safer-by-design>

SECTION G: Current research gaps

36 Do the research gaps outlined in 'Current Research Gaps' adequately address the specific research needs to reduce injury across life-stages and across priority populations?

Yes

Please provide comments regarding 'Current Research Gaps', including any suggested amendments (250 word limit):

However, this section is a little long. Can the research be further prioritised.

Reduce the section.

+ Can a sentence be added to acknowledge that research will be being carried out in other countries on some of these areas and the findings may be relevant.

SECTION H: Case studies

37 Are the case studies outlined across the Strategy appropriate?

Yes

Please provide any comments on the case studies for the Strategy, including any suggested changes (250 word limit) :

Will they be brought to life with photographs?

Positive ones if possible.

SECTION I: Making Progress

38 Does the section Making Progress adequately address the activities required at the National, State/Territory and Local levels to progress the Strategy?

Yes

Please provide comments relating to the Making Progress section, specifically in relation to it addressing activities required at the National, State/Territory and Local levels to progress the Strategy (250 word limit):

There are many players (individuals and organisations) who are involved in accident prevention. Coordination is key at National State/Territory and local levels. Coordination will create synergy.

A National Injury Prevention Lead Agency is very important. It would not only coordinate current players but stimulate more into becoming involved.

I have witnessed first hand over decades the excellent work of RoSPA in England. Coordinating, galvanising individuals and organisations into action, and promoting evidence based approaches. The organisation has had much success.

39 Do the Priority Areas for Action throughout the Strategy align with strategies within your organisation, department and/or agency?

Yes

Please provice comments relating to how the Priority Areas for Action of the Strategy align with those of your organisation, department and/or agency, and specify objective number/s where possible (250 word limit):

1) Our organisation is still guided by the Ottawa Charter for Health Promotion. This strategy appears to be in line with the Charter.

2) It is also in line with our position statement on the prevention of home injuries to children.

Watson M C and Lloyd J (2019) IHPE Position Statement: Unintentional Home Injuries to Children (Under 5s) (June 2019). Lichfield, Institute of Health Promotion and Education.

40 Several lead agencies are tasked with progressing the Strategy. Do you agree with the lead agencies for the priorities areas for action?

Yes

Please provide comments relating to the lead agencies tasked with progressing the Strategy, and specify recommended changes, referring to objective number/s where possible (250 word limit):

SECTION J: Appendices

41 Do the appendices add value to the Strategy?

Yes

Please provide comments regarding the appendices, including any suggested changes. Please specify the appendix where possible. (250 word limit):

Can some of the earlier tables also be added to the appendices so that the document as a whole is made more accessible to a wider audience.

Accident prevention specialists/ academics will read it all easily, but it needs to be targeted far wider.

SECTION K: Final Comments

42 How useful would the Strategy be to you?

Very useful

What is your main reason for this rating? (250 word limit):

We would promote the strategy and encourage other countries to develop one.

The Literature Review that was published last year was excellent and we have already promoted it via different media.

43 Are there any other comments relating to the Strategy that you would like to make?

Please provide any final comments relating to the Strategy (500 word limit):

1) The authors of the Literature Review should be thanked for producing a robust review that will have an impact in Australia and other countries.

2) Similarly, this innovative strategy overall is very good and could have a substantial impact on the lives of families in Australia.

3) Some key points:

>>Government support will be needed if this strategy is to be successful.

>>A National Injury Prevention Lead Agency is very important.

>>Good data is needed for: assessing need; monitoring and evaluation; and finding out about new issues. It is also important for promoting action - public + professionals.

>>Funding is also a critical issue. Adequate resources are needed.

4) This Injury strategy has the potential to prevent many injuries, save lives, promote active lives, and in the long term make savings to organisations such as the health service and fire service.