



THE PROS AND CONS OF BECOMING A WHO SAFE COMMUNITY

PURPOSE

1. Each Safe Community Partnership is invited to consider seeking accreditation as a WHO Safe Community.
2. This paper has been prepared to identify the advantages and disadvantages (benefits and costs) of being designated as a WHO Safe Community, and thus becoming a member of the world-wide WHO Safe Community (SC) Network. This paper will also canvass mitigation strategies to reduce or eliminate the risks associated with any disadvantages identified.

CONSULTATION

3. The views of existing SC network members have been canvassed through the Victorian Safe Communities Network (VSCN) and the Australian Safe Communities Foundation (ASCF). The material available on international, national and regional SC websites has also been reviewed, particularly the following websites –
 - Karolinska Institute WHO Collaborating Centre on Community Safety Promotion (WHO CC CSP) - http://www.phs.ki.se/csp/index_en.htm
 - Canadian Safe Community Foundation (CSCF) - <http://www.safecommunities.ca/>
 - Safe Communities Foundation of New Zealand (SCFNZ) - <http://safecommunities.org.nz/>
 - Australian Safe Communities Foundation (ASCF) - <http://www.safecommunities.org.au/ascf/welcome.php>
 - Victorian Safe Communities Network (VSCN) - <http://www.vscn.org.au/pages/index.php>

DEFINITION

What is a WHO Safe Community?

4. The Safe Communities concept began its formal existence at the First World Conference on Accident and Injury Prevention held in Stockholm, Sweden in 1989. The Manifesto for Safe Communities, the resolution of the conference, states that "All human beings have an equal right to health and safety" - <http://www.phs.ki.se/csp/pdf/Manifesto.pdf>.
5. The worldwide WHO Safe Communities movement has been developed in response to this manifesto to encourage communities to develop partnerships and programs that will reduce the incidence and prevalence of injury and violence in all settings and for all people in those communities.
6. An accredited WHO SC has been assessed by the WHO CC CSP, or one of its accredited Certifying Centres (of which the ASCF is one), as meeting the six criteria for designation as a Safe Community. The criteria are available on the WHO CC CSP website [http://www.phs.ki.se/csp/pdf/indicators_2004/indicators_for_international_safe_communities.pdf].



7. 131 communities have been designated as WHO Safe Communities across 23 countries around the world - http://www.phs.ki.se/csp/index_en.htm and http://www.phs.ki.se/csp/who_safe_communities_network_en.htm .
8. A “Safe Community” can be a community of location, of interest or of common background and objectives, such as a municipality, a local area, a school, or an organisation, which is working with safety promotion, injury, violence, suicide and natural disaster prevention, covering all age groups, genders and areas and is a part of an international network of accredited programs.

SAFE COMMUNITY CRITERIA

9. The six criteria for becoming an accredited WHO Safe Community are -
Communities in a Safe Community setting have:
 - 1) An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community
 - 2) Long-term, sustainable programs covering all genders, ages, environments, and situations
 - 3) Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups
 - 4) Programs that document the frequency and causes of injuries
 - 5) Evaluation measures to assess their programs, processes and the effects of change
 - 6) Ongoing participation in national and international Safe Communities networks.
10. It has been said by many in the VSCN that many of the local government community safety programs in Victoria already meet these criteria to the standard required. This would mean that no additional programs or infrastructure would be required to meet the WHO SC criteria. This claim would however need to be assessed by an independent team of assessors as part of the application process should a local community safety program decide to proceed with making an application to become a WHO SC.
11. The application process has three main phases, as outlined in **Attachment 1**:
 - Pre-accreditation – to establish the local coalition, gather and analyse local data, establish local programs, prepare a proposal for accreditation, and arrange a site visit by a SC Certifying Centre Team to assess achievements and plans against the six SC criteria.
 - Accreditation – once the proposal for accreditation is approved by the WHO CC CSP, plan and conduct the designation and accreditation conferral ceremony
 - Post-accreditation – continue with the coalition and program operations, participate in regional, national and international safe community activities, and prepare for re-designation assessment in 5 years time.



BENEFITS AND COSTS

12. There are three categories of benefits and costs –
- 1) financial – affecting the revenue and expenditure budgets of individuals, families, community groups, businesses, agencies and governments;
 - 2) economic – affecting the economic development of the region or communities concerned; and
 - 3) social – affecting utility and the value of public goods available to and consumed by the whole community, eg environmental sustainability and social capital

BENEFITS OF BECOMING A WHO SC

13. The benefits (advantages) of becoming a WHO SC and working with the accreditation criteria relate to a number of key areas:
- Even more effective efforts to improve safety and prevent injuries leading to reduced risks of injury or harm in the local area – objective safety
 - Even more effective efforts to improve perceptions of safety and reduce concerns about safety in all settings – subjective safety
 - Even more effective community building and capacity building in the local community safety program and partnerships and in other community networks and programs
 - International recognition of the local program's achievements and its members which can then flow into local and regional recognition, which translates into a stronger positive image about living and working in the area, which flows through into a greater capacity to draw resources and businesses towards the region and to further develop the community as a safe place to live, learn, work, travel and play.
14. These benefits are discussed in **Attachment 2**, with the three kinds of benefits (financial, economic and social) grouped under each of the three phases: pre-accreditation, accreditation, and post-accreditation.

DISADVANTAGES OF BECOMING A WHO SC

15. Only three potential disadvantages have been identified to becoming a WHO SC. These are –
- the costs, being the resources consumed in the process that could have been applied to program development and services;
 - the possibility that the civic receptions, official occasions and public events associated with designation do not go as well as planned, with consequent adverse impact on the local program; and
 - the possible flagging of energy after designation, if SC accreditation has been the major objective for the partnership, which can lead to fragmentation of the partnership as people see the objective as having been achieved, and move on to other pursuits.
16. The potential disadvantages are listed in **Attachment 3**, again with the three kinds of cost (financial, economic and social) grouped under each of the three phases: pre-accreditation, accreditation, and post-accreditation



17. The financial costs relate to the application fee, travel and accommodation costs for a site visit to confirm the criteria are being met, and costs for a designation ceremony. As detailed in **Attachment 3**, these costs are greater if accreditation is sought through an international Certifying Centre than if sought through the ASCF as the 'local' WHO Certifying Centre. In total, the financial costs would be A\$3000, plus a domestic airfare and one night accommodation for one person, plus the designation ceremony costs.
18. These costs can however be viewed as an investment in achieving the SC accreditation which brings with it the benefits identified above and in **Attachment 2**, which are not fully realisable without this investment.
19. ASCF members associated with the applicant community safety program will not be involved in assessing the application. The ASCF assessment team will include ASCF members from other regions of Australia as well as members from other programs within the applicant's region.
20. The risks associated with civic receptions and other events are no different from nor any greater than the same risks for each such event, and the usual stringent project planning and management processes applied by local governments and community safety partners will mitigate these risks.
21. The likelihood that energy in the community safety coalition wanes after designation increases where SC accreditation is a primary objective for the coalition to have been formed in the first place. However, many of the local community safety partnerships in Victoria have been in operation for up to 10 years and have a very sound separate basis for their existence. In these circumstances, the risk of the coalition energy flagging after designation is rated as minor, and is easily overcome through the major focus continuing to be on core community safety strategies and activities.

SUMMARY OF BENEFITS AND COSTS

22. There are many financial, economic and social benefits to becoming a WHO Safe Community.
23. There is a modest cost, which is an investment to achieve the benefits, and few risks associated with becoming a WHO Safe Community. As discussed, these risks are readily mitigated.
24. On balance, the benefits are expected to substantially outweigh the costs and risks.

RECOMMENDATION

25. That local community safety partnerships endorse the preparation of a proposal to apply to become a WHO Safe Community.

Michael Bourne
Executive Member (Past Co-Chair) VSCN
Co Vice-Chair, ASCF
Member, Safety Promotion Research Group, Karolinska Institute
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Attachment 1: SC APPLICATION PROCESS

ASCF WHO SC APPLICATION PROCESS

The ASCF will apply the WHO CC CSP certification process. This will include at least the following 12 stages grouped in 3 phases, with continual reference to the six WHO SC criteria at each stage.

Phase 1 - Pre-accreditation – to establish the local coalition, gather and analyse local data, establish local programs, prepare a proposal for accreditation, and arrange a site visit by a SC Certifying Centre Team to assess achievements and plans against the six SC criteria.

1. Initial support at the early stages of a new SC development, with information and referral to other nearby SCs for practical advice and assistance, and to observe SC programs in operation
2. followed by ongoing discussion with and visits to other SC sites as opportunities allow, and invitations to participate in local, regional, national and international SC events
3. presentations to and facilitation at community, local government, business and agency meetings to assist in the formation of new and strengthening of existing local SC coalitions
4. assistance and advice in the identification of local priority injury issues, and the development and implementation of local injury prevention and safe community promotion initiatives to tackle identified issues, including reference to available data and best practice programs which are working 'on the ground' in other areas
5. assistance by designated members in the preparation and presentation of a SC accreditation proposal
6. review of the SC proposal by other members not previously or currently directly involved with this local SC program
7. discussion with the SC program representatives to explore and clarify issues as the certification review proceeds
8. when the program development and SC proposal are at a suitable stage to arrange and undertake a site visit in the local community to see first hand the programs and activities that are underway and discuss areas for further development against the six SC criteria, if any
9. continue to provide support and assistance to build further local capacity in the SC program and strengthen the SC accreditation proposal
10. at an appropriate stage when it is judged that the six criteria are being met, to report this to the WHO CCCSP, the ASCF Committee of Management and the local community



Phase 2 - Accreditation – once the proposal for accreditation is approved by the WHO CC CSP, plan and conduct the designation and accreditation conferral ceremony

11. if the recommendation for accreditation as a SC is accepted by the WHO CCCSP, liaise with the local community on arrangements for a suitable designation ceremony
12. conduct the designation to confer WHO accreditation as a SC

In total, the financial costs for application through the ASCF are A\$3000, plus a domestic airfare and one night accommodation for one person, plus the designation ceremony costs.

Phase 3 - Post-accreditation – continue with the coalition and program operations, participate in regional, national and international safe community activities, and prepare for re-designation assessment in 5 years time.

- Redesignation applications would follow a similar process with less emphasis expected to be required in the initial steps given a SC program is already established and operating.



SCFNZ WHO SC APPLICATION PROCESS

The process for designation as a Safe Community includes a written application, and a site visit. When a community considers it has achieved the above criteria they should apply for an application form from SCFNZ.

The application should include:

- Application fee (\$5000 NZ dollars+ GST) paid to SCFNZ. The application fee covers travel and accommodation costs associated with site visits, and designation ceremony (including the provision of a flag and plaque) and the international peer review process.
- A report describing the safety promotion / injury prevention activities in the “community” organised around each of the six criteria. Applicants need to describe / define the “communities” they are working with, in the context of their own environment. No universal definition is implied by the use of the word “community” within the criteria, but mostly it has been applied to a geographical area. SCFNZ is available to support communities as they develop this application.
- Send five hard copies including all appendices of which one is to be unbound and one electronic copy (including appendices) of the application

The application for membership to become a Safe Community of the WHO Safe Community Network has to be lodged at least one month before a site visit can be arranged.

A shorter text for inclusion in both the WHO Collaborating Centre on Community Safety and SCFNZ webpage is also required. Please note that your application will be available for international peer review through SCFNZ and the Karolinska website.

Representatives from SCFNZ will make the on-site visit (usually 1-2 days) to review your programme and application. Emphasis is given to how your community has achieved each of the six criteria and needs to include:

- a meeting with the cross-sectional group that is responsible for the safety promotion/injury prevention programme in your community; and
- a field visit with community groups/agencies that are responsible for initiatives and other relevant activities relating to injury prevention and safety promotion in your community arranged at a time and place suitable to both your community and the WHO representative.

Once all the above have been satisfactorily completed, a designation ceremony is arranged at a time and place suitable to both your community and WHO representative.

In addition to the requirement specified by the WHO collaborating centre on community safety, the group also needs to agree to:

- make an announcement celebrating their designation; including a SCFNZ billboard indicating that visitors/members of your community are in an International Safe Community region; and
- after receiving designation, work with SCFNZ staff as part of their ongoing commitment to international and national safe communities network.



KAROLINSKA INSTITUTE WHO SC APPLICATION PROCESS

"Communities" apply for appointment as a Safe Community according to the following procedure:

- a. An application describing the activities under each of the "Six Indicators" for a Safe Community is to be submitted as a hard copy and as a pdf file under the following title: "Application to Become a Member of the Safe Community Network" for International Designation as a Safe Community by the WHO Collaborating Centre on Community Safety Promotion.
- b. Text for web page of the WHO Collaborating Centre on Community Safety Promotion (a short version of the activities including photos).
- c. The applying "Community" covers all costs related to the "Site Visit", designation plus the Application Administration fee of 900 EUR. [As at 22/1/08, EUR 900 / [0.59433](#) = AUD 1514] (This fee and travel costs for the WHO representative(s) will be billed before the designation.)
- d. Safe Community flags can be ordered by the WHO CC at K.I. :
Moa.sundstrom@sl.l.se - or by the Certifying Centre evaluating your program
Big Safe Community flag: size 240 x 150 cm: Price: 35 EUR
Table flag (for a 50 cm pole) 24 x 15 cm: Price: 12 EUR



- e. An Agreement is signed between the Community and the Karolinska Institute, WHO Collaborating Centre on Community Safety Promotion – either at or prior to the civic designation ceremony.
- f. The Safe Community logo will be sent as a jpg file and can be used after the designation.
- g. The application report and file for web page is to be sent to:
Moa Sundstrom, Co-ordinator
Karolinska Institute
Department of Public Health Sciences
Division of Social Medicine
Norrbacka, 2nd Floor
SE-171 76 Stockholm, Sweden
Phone: + 46 (0)8-737 38 70
Fax: + 46 (0)8- 33 46 93
- h. The WHO Collaborating Centre on Community Safety Promotion at the Karolinska Institute has decided to perform the follow up of the Safe Communities activities after 5 years – each program is to be re-evaluated and re-accredited each 5 years.

The Pros and Cons of becoming a designated WHO Safe Community



Attachment 2: BENEFITS OF SC ACCREDITATION

Depending on the stage of development of existing coalitions and programs the following benefits may already be evident, or may be expected to be gained through working towards becoming a WHO accredited Safe Community.

Financial (budget impact, and productivity improvement)	Economic (development of the local economy)	Social (community strengthening and capacity building, increasing social capital)
Pre-accreditation phase – becoming the local SC network; and joining the regional and national SC networks		
Greater effectiveness in community safety programs – through identifying the real issues in the community, by conducting a community survey and analysing all the available data – including ED presentations, hospital admissions, WorkSafe statistics, road safety statistics, crime statistics and police call outs	Providing opportunities to establish relationships with local and interstate business, agency and academic partners	The greatest advantage is the joining with like-minded communities all around the world which can mentor, guide, advise and assist in developing and sustaining coordinated, integrated efforts to make their own populations safe
The discipline of having to address seriously the accreditation criteria helps communities examine their practices and policies in systematic ways which they might never have had the will to do previously	Generating a lot of interest and support from other communities who are watching what is happening	Helping identify 'who' is doing 'what' to target risk groups and bringing together diverse groups so that they are working together rather than in isolation
Access without charge through other SCs, to the global knowledge bank on 'what works' in injury prevention, crime prevention and other community safety programs	Working to develop business networks to encourage safety within the business but also in the community	Encouraging and allowing parties to work together such as the Council and schools, community groups and public housing
Demonstrating to funders that there are established partnerships and thus giving strength to funding applications	Gaining access to the vast experience and knowledge bank of what has worked and is emerging as promising in organisational injury risk management	Building relationships and partnerships to work jointly on identifying and tackling the priority local community safety issues

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<p>Giving major issues, such as child safety, substance abuse and interpersonal violence, media coverage</p>		<p>Safe Communities work to bring people together for a common cause to spread the safety messages to others in the community</p>
<p>Giving the community a platform to speak in a unified voice to federal, state and local government about local community safety issues</p>		<p>Attracting people to community safety as they see that they can be part of the solution</p>
<p>Providing support for the appointment of a coordinator that has been essential to drive the priority areas and collect relevant statistics and information</p>		<p>Giving the community a reach into other Safe Communities that has provided ongoing support and inspiration</p>
<p>Greater coordination of programs and effort with consequent increases in program efficiency and impact.</p>		<p>The mandate to include stakeholders means that communities start to work better at their communication channels between agencies and with their community members</p>
		<p>Helping the wider community understand the local issues and present their needs to the services within the community rather than the services coming in and telling the community what their problems are and what the solutions to these problems are going to be</p>

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Financial (budget impact, and productivity improvement)	Economic (development of the local economy)	Social (community strengthening and capacity building, increasing social capital)
Accreditation phase – joining the global SC network; and participating in national and international SC activities		
All of the above benefits - PLUS	All of the above benefits - PLUS	All of the above benefits - PLUS
Attracting support through partners for designation ceremony activities	Showcasing the local region as a place to conduct business in a safer community	Showcasing the local community and the programs underway to build stronger communities
Showcasing the work of the Community Safety Team and the impact of its programs	Showcasing program achievements to further build the 'brand image' and attract business development to the area	Continue to attract future residents to the area as a safer community in which to live, learn, work, travel and play – a safer place for families and businesses to prosper and grow.
Post-accreditation phase – continuing the local SC program; participating in regional, national and international SC networks; preparing for redesignation		
All of the above benefits - PLUS	All of the above benefits - PLUS	All of the above benefits - PLUS
WHO accreditation assists in the quest for funding, establishing the bona fides of the partnership in terms of a systematic approach to address community safety, injury and health issues and real commitment to community engagement	Continuing business development aimed at solving local community safety priorities and building the economic infrastructure required to further improve business opportunities and life outcomes in the area.	Continuing program development aimed at solving local community safety priorities and building the social infrastructure required to further improve people's life opportunities and life outcomes through living and working in the local area.

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Attachment 3 COSTS OF SC ACCREDITATION

Depending on the stage of development of existing coalitions and programs the financial costs will already be included in agency budgets.

Financial (budget impact, or reduced productivity)	Economic (hindering development of the local economy)	Social (consuming social capital)
Pre-accreditation phase – becoming the local SC network; and joining the regional and national SC networks		
Program costs already factored into existing budgets	None being experienced	Consuming, but at the same time replenishing and building social and human capital through the safe community program partnerships
No negative impact being experienced on productivity – in fact the reverse through deeper consideration of the standards required to meet the WHO SC criteria.	No negative impact on business development	No negative effects reported through existing programs
Preparation of application reports and materials – Community Safety Team and Community Safety Partnership members – within existing budgets.		

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Financial (budget impact, or reduced productivity)	Economic (hindering development of the local economy)	Social (consuming social capital)
Accreditation phase – joining the global SC network; and participating in national and international SC activities		
Application fee – administrative costs and initial desk top evaluation of proposal	None expected Grant applications and / or sponsorships may be sought to share and defray some costs.	Working with partners and supporters to be involved in organisation and participating in the designation conferral ceremony – both consuming but also building human and social capital. May attract international visitors if the designation ceremony is timed to coincide with travel to or from the 17 th International Safe Communities Conference in Christchurch, NZ in October 2008
ASCF = AUD 3000		
SCFNZ – NZD 5000 = AUD 4235		
WHO CC CSP – EUR 900 = AUD 1500		
Site visit costs – air and surface travel and accommodation for one or two people for two days (one night) to meet the local coalition and visit local programs		
ASCF – domestic airfare and accommodation		
SCFNZ – Included in application fee (subsidised by NZ sponsors)		
WHO CC CSP – international business or first class air fare and accommodation		
Designation Ceremony – as simple or as grand as the local coalition and local government are prepared to support, balanced by the expected benefits to be gained as detailed above.		
WHO SC flags - large Safe Community flag: size 240 x 150 cm: Price: 35 EUR [AUD 60] Table flag (for a 50 cm pole) 24 x 15 cm: Price: 12 EUR [AUD 20]		
Commemorative Plaque – local supplier (cost according to standard required)		

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Financial (budget impact, or reduced productivity)	Economic (hindering development of the local economy)	Social (consuming social capital)
Post-accreditation phase – continuing the local SC program; participating in regional, national and international SC networks; preparing for redesignation		
Program costs are already factored into ongoing budgets	None expected	Consuming, but at the same time replenishing and building social and human capital through the safe community program
No negative impact expected on productivity – in fact the reverse.	No negative impact expected on business development – in fact the reverse is expected	No negative effects expected on social capital through continuing and building on existing programs
Re-accreditation to be factored into future budgets		