

Victorian Safe Communities Network

“Communicating and selling safety”

Royal Children's Hospital

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About this presentation

- About the Royal Children's Hospital Safety Centre
- The peer education model
- Implementing injury prevention projects in CALD communities



About the Safety Centre

Established in 1979 aims to reduce accidental injury through:

Information & Advice including Telephone Advisory Line
Education Programs & Services e.g. First Aid Courses
Approved safety products for sale- Home Safety Shop
Media campaigns
Support for legislative reform
Support for improved product & environmental design

Providing information & support to:

families
professionals
organisations
communities



WHO SAFE Communities

- **An Affiliate Safe Community Support Centre Accredited by the World Health Organisation (WHO)**
 - It assists Local Government to gain WHO accreditation as a Safe Community
 - Co-founder of the Victorian Safe Communities Network (VSCN) and actively participates on the VSCN executive,
- **Specialising in Child and Adolescent Injury Prevention**
 - All injuries, all People
- **Safe Accident Free Environment (S.A.F.E) established in 1991 to reach Culturally and Linguistically Diverse Communities**
 - Initially designed to meet the needs of low-income and non-English speaking communities.
 - Using Peer Education Model & community development approach.
 - Delivers injury prevention to communities in their first language.



CALD PEER EDUCATORS

What is peer education?

- Involves information sharing and information transfer that attempts to influence knowledge, attitudes and/or behaviours
- Occurs between people who share common characteristics and have similar experiences
- Relies on influential members of a social group or category



CALD PEER EDUCATORS

A peer educator is a person who:

- has the necessary characteristics to be considered a peer (same cultural background and bilingual)
- is credible and influential
- has received training



Recruiting the CALD peer educators

- Drawing on an existing peer educators
- Identification of people that were “known” and had access to existing networks within their CALD community
- Had a passion for the topic but didn’t have to have the knowledge



Recruiting the CALD peer educators

- *“I had done a lot of voluntary work in my community and I was seen as a leader”*
- *“I knew that this was information that my community needed so it was good to be able to share it with them “*



Training the CALD peer educators

Based on adult learning principles:

- Direct action – leading to a project not just theory
- Recognising past experiences
- Respecting differences

Time frame:

- 12 days of training spread out over a 12 month period

Training the CALD peer educators

- *“It was essential and gave us credibility and status in our community – although we knew we weren’t experts”*
- *“The more we learnt the less we knew”*
- *“It was great to have all the back up resources when I was doing my project”*



Training the CALD peer educators

The content

- Policy and theoretical overview
- Factual information – statistical data
- Examples of injury prevention strategies
- Program development including submission writing, budgets, timelines
- Evaluation



Injury prevention areas addressed in the training

- Drowning prevention
- Poisons prevention
- Sports safety
- Dog bites
- Falls
- Road safety
- Home safety - scalds
- Home safety - choking and suffocation
- Home safety - product safety
- Residential fire safety



Benefits of involving CALD peer educators

- *“It is better to have us to talk to our community members as sometimes interpreters miss the true meaning and feeling of the messages and they take much more time”*
- *“The people are more open about asking questions, because they know we will understand and not see them as “dumb”. It can be scary to ask an outside expert.”*



Benefits of involving CALD peer educators

- *“I feel that I have given something extra to my community”*
- *“We bring great contacts/networks”*
- *“There is an appreciation of where my community is at – knowing their history and how they have come to be Australia, this helps me work with the group”*



The CALD injury prevention projects

- Croatian Community - *Home Fire Safety*
- Arabic Community - *Burns including Scalds Prevention for the under 4's*
- Maltese Community - *Making Home a Safer Place for Senior Members*
- Spanish Community - *Fall Prevention Project for the Elderly in Sunshine*
- Cantonese Community - *Fall Prevention in Elderly and Ways of Building Good Health*



The CALD injury prevention projects

- Vietnamese Community - *Safety Awareness for Vietnamese Children*
- Macedonian Community - *Home Safety – Choking and CPR Training*
- Sudanese Community - *Home Safety for Children 0 Months to 14 Years of Age*
- Turkish Community - *Prevention on Young Children from Poisoning*



The CALD injury prevention projects

- Serbian Community - *Scalds and Burns Prevention for the Under 5's*
- Somali Community - *Introducing Child Restraints to the Somali Community*
- Italian Community - *Improving Safety for Older Italian Drivers*
- Greek Community - *Falls Prevention Project for the Greek Elderly*



Selecting the injury prevention project for the CALD community

The peer educators identified the need for their community

- Using injury statistics
- Demographics for their community
- Focus groups
- Knowing their community



Selecting the injury prevention project for the CALD community

- *“Making a decision was difficult. I wanted to do all of them”*
- *“It was great to have a range of topics to choose from”*



Focus groups to identify the needs

- After running some focus groups with the newly arrived refugee Iraqi/Islamic women under Temporary Protection Visas it was decided to address burns and scalds in children under 4 years. The experiences in the camp is that the children are so attached and holding their mother's clothes all the time as they wanted to feel safe, but this put them at a high risk of getting burnt and/or scalded.



Designing and delivering the project

Factors that were considered:

- Literacy issues in both English and their first language
- Gender
- Generational issues
- Strategies for delivering the messages



Literacy issues in both English and their first language

Do not assume literacy in the first language

- *“I had to find a way to promote the message that didn’t need a lot of written material so I used pictures and hands on”*
- *“I had a drama presentation to get the message to the audience”*

Gender

- Awareness of the cultural differences about the roles in the family/home
 - Gaining permission for the women to attend information sessions
 - *“What a challenge to tackle the older Italian men about their driving”*



Generational issues

- Many grandparents are caring for young children
- Respectful of the older generation
- Challenging views about what is “right”



Generational issues

The older generation in the Vietnamese community are very influential to the young, but they “may not always have the most accurate information to share”. In fact one of the areas that is of concern is the fact that Vietnamese parents (soon to be grandparents) give their expectant children “baby walkers”, as a prestigious gift.



Generational issues

Vietnamese community - Baby Walkers

Group sessions for new parents

– *What to do if you get a baby walker?*

Group sessions for grandparents

– *Why not to give a baby walker?*

Translated materials

Telephone Interpreter Service



Strategies for delivering the messages

- Marketing the activity/issue
- Interactive presentations
- Using networks
- Practical gifts
- Face to face sessions
- Translated materials
- Continuing contact



Marketing the activity/issue

- Radio
- Newspapers – advertisements and articles
- Posters
- Word of mouth
- Using existing networks
 - Meetings
 - Newsletters



Marketing the issue

An example:

- Accessing elderly citizens to be the “actors” in a falls prevention video – the elderly citizens take on ownership of the project and they end up promoting the messages.
- More notice of a peer telling them what to watch out for in the home environment.

Interactive presentations

Some examples:

- Portraying the message about falls in the home to the Chinese community through the use of a drama presentation using students
- The Macedonian grandmothers doing CPR training rather than just talking about it
- Having the chance to ask questions in information sessions



Using networks

Some examples:

- Groups; Elderly citizens, grandparent, new mothers
- Church leaders and the community
- Tribal chiefs
- Health professionals
- Media contacts
- Safety product manufactures
- Injury prevention agencies/services



Practical gifts / strategies

- Offering injury prevention gifts and/or prizes to participants as a way of promoting the message further
- Giving suggestions for alternatives if a product is expensive and may limit the availability



Face to face sessions

Involving professionals (bilingual and English speaking) to support presentations of information by a peer educator:

- Physiotherapists
- Tai Chi instructors
- General Practitioners
- Emergency services representatives; Police, Ambulance, Fire brigade
- Occupational therapist



Translated materials

- Accessing materials that have already been translated - but check the messages
- Use of the spoken word as well as text
- Use of visual images to support text
- Focus testing translated materials for meaning



Continuing contact

- Meeting and working with a group on more than one occasion
- Connecting people with community based / local services

“Developing a walk, talk and sing group – the importance of fun and community connectedness cannot be underestimated in keeping elderly people fit and well”



Key messages

- Peer educators can play a key role in working with the CALD community, but need to be appropriately supported
- A combination of strategies is necessary and each needs to be tailored to the CALD audience

