

Safe Community history

The concept of Safe Community was initially launched as an official term in the General Program of World Health Organization (WHO) in the late 1980's. The co-operation between WHO and the Safe Community Movement commenced in 1986 and began its formal presence at the First World Conference on Accident and Injury Prevention held in Stockholm, Sweden in September 1989. In the Manifesto for Safe Communities, its resolution stated that the International Safe Community movement should put its efforts in line with "WHO Health for all" as a vision. The

:ground pillars of the Stockholm manifesto include

All human beings have an equal right to health and safety *

Accident and injury prevention have need of coordinated actions by a variety of groups *

Health sector have a critical role in gathering information on injured people, injury patterns, causes of injuries and danger situations *

Local programs must cover all citizens with focus on the most vulnerable people *

.It is important to evaluate the process and outcomes of a safety promotion program *

!A universal development working for safe communities is necessary *

All International Safe Communities serve as models for other communities. As resulted from investigations and research, the injuries diminish by .more than 25% annually in Safe Communities

The Safe Community initiative is different from other injury prevention programs. In an International Safe Community, the community itself plays the dominant role. The term Safe Community implies that the community work for increased safety in a structured approach, not that the community is already perfectly safe. Creative methods of education, physical planning and environmental changes aligned with suitable regulations and enforcement are important foundations for the safety of a community. An International Safe Community applies the traditional ways of control such as economics, regulations and governing by objectives and visions. A single approach is not sufficient for changing .current patterns of behavior. Raising public awareness is also extremely important

Programs to prevent and control injuries and accidents must recognize and characterize the injury problem and evaluate the effectiveness of .interventions to control injuries. Though epidemiology is not the soul of the safe community concept, its vital importance must be respected Characteristics of an International Safe Community are not only about the management of the Safe Community program, but also on the promotion and prevention of all kinds of injuries such as injuries relative to accidents, violence and suicide. It also embraces the prevention of the consequences (human injuries) related to natural disaster. The program covers all age groups, and both genders. It has a special focus on .the most vulnerable groups

While growing, the movement started a quality management programme leading to a peer review system where the leading communities (now about 360) were labeled International Safe Communities. Up to 2015, the leading unit was connected to the Karolinska Institutet, the WHO Collaborating Centre on Community Safety Promotion at Karolinska Institute Dept. Public Health Sciences. Step by step, when Regional Networks and more International Safe Community Support Centers were established, the network functions remained with those. Simultaneously, The WHO Collaborating Centre on Community Safety Promotion (WHO CCCSP) was encouraged to focus on the quality features of the International Safe Communities. A process of quality control developed includes a one-year training of International Certifiers .resulting in an international accreditation- now 48 are accredited

Regularly, the role of WHO CCCSP has been advanced to be a network organization for the Safe Community Movement and an organization for the quality management development, with less focus on its own research. The Karolinska Institutet Dept. Public Health Sciences is not .therefore a natural base for WHO CCCSP, any more