

The Spectrum of Prevention

The Spectrum of Prevention outlines a **continuum of strategies** which, when blended together, create a potent recipe for Injury Prevention work. It is in keeping with the objectives and philosophy of the Ottawa Charter for Health Promotion, and compliments the Charter's broader action guidelines. This model is based on one used by the Contra Costa County Prevention Programme in California for a variety of prevention work. It has been slightly amended by Safekids to include a stronger focus on information.

The model is based on the recognition that individual education, on it's own, is not enough to significantly lower high rates of unintentional injury. **Effective prevention also requires educating communities, advocating for safety conscious legislation and policies, orienting organisations towards safer practices, and strengthening the awareness and skills of those who could be involved in prevention work.**

Prevention is most effective when all elements of the spectrum are addressed, because each feeds into, reinforces, and compliments others.

For example: Teaching children about road safety is not enough to prevent child pedestrian injuries. A clear understanding within the community of children's developmental limitations in making safe judgements around traffic also must be created. Drivers and people with a role in traffic planning need to understand child development, as do parents.

Similarly, while child safety conscious community traffic planning can reduce traffic flow in residential areas and provide traffic calming measures for high risk streets, addressing community attitudes of acceptance toward speeding is also a key needs.

Looking at each strategy in more depth:

(1) Building a solid base of Information:

A solid base of information is at the base of this model. It is extremely important to have up to date information. Injury data is important, as it demonstrates that there is a problem, but far more information is needed to create strong multidisciplinary solutions. This includes "what's going on?" "who is doing what?" and "how to?" information to aid the development of the most effective interventions. It involves collecting up to date information about each of the layers of this model.

What is the impact of present policy and legislation? What are the organisations involved in this area (the key influencers)? What is their current practice? Who are the "providers", or those that influence the public, that may be able to play a role in prevention? What is presently happening in terms of community and individual education? Who needs to be involved to form a strong coalition?

(2) Building Coalitions and Networks:

(People power!)

At the heart of the Spectrum of Prevention is the recognition that effective prevention usually involves many organisations and segments of the community **working collaboratively**. In prevention work, in any area, no one organisation has the mandate, resources or skill to reduce injury on it's own. Collaboration, and the building of strong local, regional and national networks is crucial, as is the **co-ordination** of that activity.

The whole is often greater than the sum of the parts. Coalitions, partnerships and networks **enable individuals, groups, communities and/or organisations to both share information and combine their efforts and strengths to create more effective preventative interventions**. By collaborating on strategies or projects, coalitions can often have **access to more funding and resources, wider skills and more "clout" when it comes to activities like advocacy for safety**. Coalitions can also make **co-ordination** of effort easier and reduce duplication of effort.

(3) Strengthening individual knowledge and skills:

This strategy involves increasing the knowledge and skills of individuals, encouraging them to change unsafe attitudes, behaviour and/or environments and helping them to overcome practical barriers. Contrary to the use of the term "individual", this kind of strategy can also take place in

groups. The term “individual” is used to separate this strategy from the next, rather than as a descriptor.

(4) Promoting Community Education:

Promoting community education might involve mass media campaigns, special community events, or posters and leaflet campaigns. This strategy is about raising public awareness and changing public attitudes. Obviously there is a degree of overlap between the two education based strategies, but whereas with ‘promoting community education’, the focus is on educating the community, the focus of ‘strengthening skills’ is on educating individuals or small groups within a community.

(5) Educating existing and potential providers:

Providers are those people who can be a prevention resource for someone else. They may be volunteers from local communities, paid workers in health, injury prevention, education, community, enforcement, or members of groups such as Protect the Brains Trust or the Maori Women’s Welfare League. It is important to ensure that these providers can develop their own skill base and knowledge in the prevention area.

(6) Changing Organisational Practices:

This strategy involves policy and practice change in existing organisations, which directly or indirectly will effect safety goals. Services can be re-oriented towards a renewed emphasis on injury prevention, or policy and practice may need to be altered as existing knowledge changes and develops.

(7) Influencing Public Policy and Legislation:

This is an extremely important injury prevention technique. This strategy provides perhaps the strongest and broadest changes to injury. This strategy can be aimed at all political levels. It often involves advocacy for change or improvement, and it is certainly an area in which strong coalition support will have a large emphasis.

Resources:

*Contra Costa County Health Dept. (1986) Beyond Brochures, California, Video.
Safekids (1990) The Spectrum of Prevention, NZ, Unpublished notes.*

(N.B. This version of the Spectrum of Prevention, including the graphic, has been adapted by Safekids New Zealand - www.safekids.org.nz - and is available through the Safekids Information and Resource Centre.)

