



DONG TIEN SAFE COMMUNITY

Khoai Chau District- Hung Yen Province

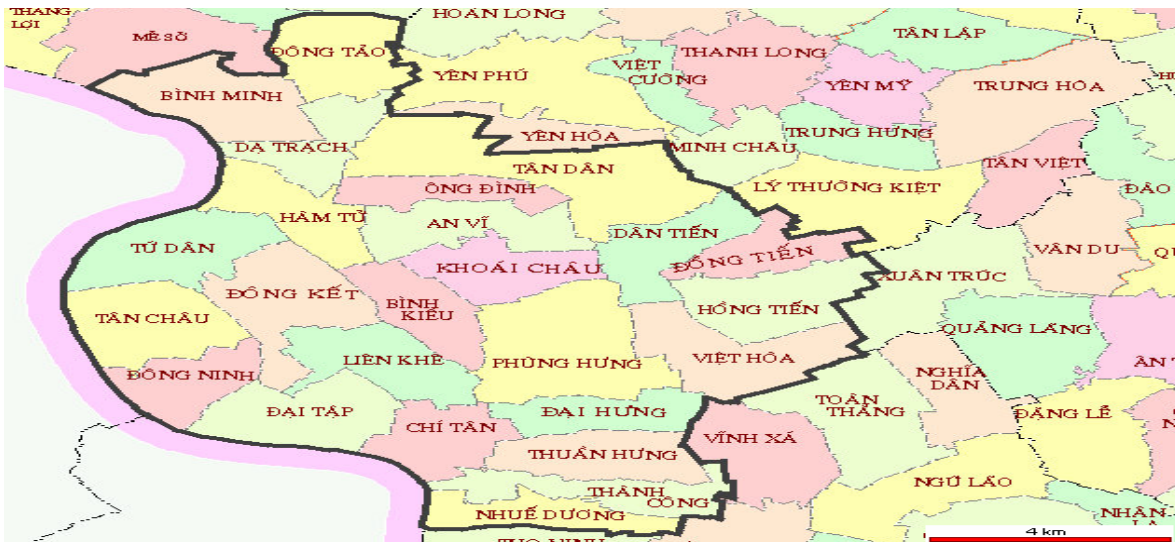
Name of the Community: Dong Tien

Country: Vietnam

Number of habitants: 6,000

Program started: 1997

Website: <http://www.moh.gov.vn/taianthuongtich/en>



Goal

To develop a Safe Community with a safe living and safe working environment for people living at the community

Mission

Dong Tien commune implemented a program on prevention of accident/injury and risks for potential injury/accident through a community-based approach. The program is designed to prevent and control accident and injury for a wide range of targeted groups through combination with activities of existing programs, and projects on socioeconomic development at the province with mobilization, and coordination of resources as well as research, intervention and information exchange.

Achievement

According to the evaluation at the end of 2005, 80% (877 out of 1096) households met the safe home standards and all the pre-, primary and secondary schools met the safe school standards. By the end of 2005, the injury incident rate has been decreased by 20% compared to that of 2003.

The program focused on the following activities:

- Child safety
- Home safety
- School safety
- Road safety
- Labor safety



IEC corner on injury prevention in communal health station

Activities on injury prevention and safety promotion target the following groups:

Children of 0-14 years old:

Safe home and school programs have been launched through the means of dissemination and education for mothers having children under 5 years old and women at the bearing age on activities of safety, accident/injury prevention such as drowning, falling, burn, food poisoning, electric stroke. The activities of the program are also through exhibition of home and school safety as well as encouragement and support of the use of safe devices such as children resistance containers. Consequently, the incidence of injury of children reported by the communal health station has been decreased during the period 2002-2004.

Youth 15-24 years old:

Social evil and traffic accident control programs have been implemented to prevent drug abuse, prostitution and to minimize traffic accidents through the mean of education with participation of volunteers, health workers and intervention measures by the community including repair, and renovation of inter-commune routes.

Adults 25-64 years old:

Activities on injury prevention were implemented by communication through mass media, direct conversations at home, at meetings, posters, flyers, exhibition... The labor injury/accident prevention program has been done to control and prevent the labor accidents, especially pesticide/chemical substance poisoning from farming and due to waste collection and treatment. The program of traffic accident prevention is designed to minimize traffic accident rate following the slogan of "Driving with helmets and without alcohol drinking".

Elderly 65+ years old:

Development of home safety and cultural-health-safe programs are conducted to mobilize and encourage the elderly practicing in health activities in order to have healthy life. Other activities of home improvement prevent the falling problems of the elderly including repairment and renovation of backyard, tiling bathrooms with anti-slippery materials, lowering the stairs and steps... As a result, the incident rate of falling has been decreased in recent years.

At the following environments:**Home:**

Home safety program has been implemented since 2000 to prevent and control accidents from falling of elderly, from daily life accidents of children such as drowning, burn, traffic accidents of youth. According to the results of an evaluation conducted at the end of 2005, 80% of households (877 of 1096 households) met the standards for home safety. Consequently, the injury rate and risks of accident/injury have been declined.

**Traffic:**

Through the implementation of home and school safety and traffic accident control programs with the participation of households, schools, police, youth and volunteers, the public awareness on traffic safety has improved and the traffic accident rate has been decreased from 28 cases in 2002 to 11 cases in 2005 although the population and transportation means have continuously increased.

Labor:

Providing education and intervention for prevention and control of injuries in farming and waste collection and treatment by members of the farmer Union, volunteers and health workers, awareness on labor safety has improved and the rate of accidents due to laboring has decreased.

School:

School safety program has been launched since early 2000 to provide education on traffic safety, daily life safety, recreation activities and sport safety. Students and their parents were provided information and data on accident and injury and how to prevent them. Injury prevention activities at school are intergraded into school master plan and curriculum consisting of the road traffic law, and school safety. Intervention activities to improve the play grounds at schools as well as stadium of football, volleyball, playing and to prevent drug abuse were undertaken by students, teachers, and members of the Red-Cross Association. Exhibition on school safety, daily life safety, and traffic safety are took place at the school library. As a result, the injury incidence in all schools has been kept under the control since 2003.

Sports/recreation:

Information, education and knowledge of intervention measures to prevent falls from sports/recreation by health workers, teachers and all players have been provided to improve awareness on sport/recreation safety as well as to minimize the injury rate from sport/recreation activities.

Violence prevention:

Being aware of the complex of security situation, the communal police sector in collaboration with the Fatherland Front and other relevant organizations has been assigned to develop measures and activities on violence and conflict. Conciliation activities by members of women and fatherland Unions have contributed to decreasing the rate of home violence and conflict. The incidence of injury due to violence and conflict is decreased from 12 cases in 2003 to 4 cases in 2005.



Suicide prevention:

According to the reports from the communal health and police station, the incidence of suicide in Dong Tien is low, despite that fact, the Steering Committee for Accident and Injury Prevention keeps providing information, education on safe and healthy living to the youth.

Programs towards the "High risk-groups":

- Children: at schools, and while playing
- The elderly: fall prevention
- Women: home violence

Surveillance of injury

Injury surveillance data are collected by the health stations from the injury recording sheets, patients and death log-book by health volunteers and hamlet health workers, police and judicial sectors. Data on injury and accident are reported and analyzed monthly with the assistant of the commune health stations.

Injury rate per year: The injury incidence rate has decreased from 46 cases in 2002 and 51 cases in 2003 to 38 cases in 2005. High morbidity rate due to traffic injury has been recorded. The total number of injury cases from 2002 to 2005 was 177 in which 2 deaths were reported.

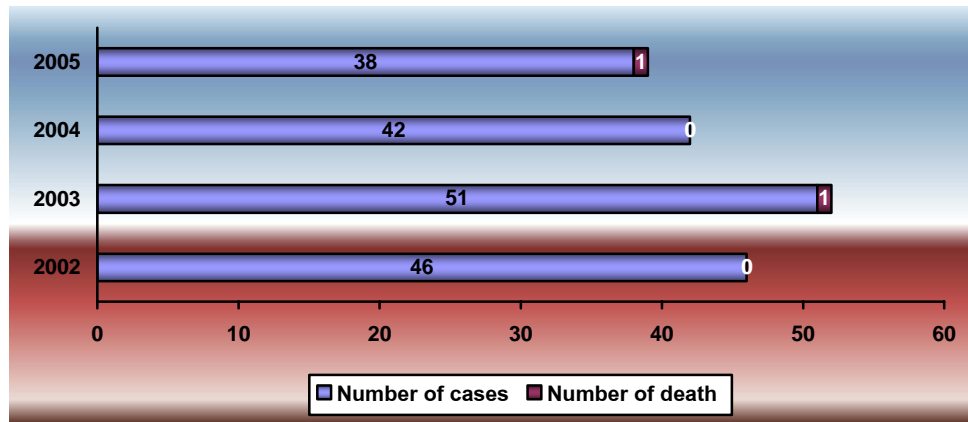


Table 1. Injury statistic data during 2002-2005

Publications:

- Newsletters on Public Health in Hung Yen, Hung Yen Health Service, 2003-2005: Dong Tien with bottle-up approach for Safe Community development
- Newsletters on Accident and Injury Prevention, Ministry of Health, 2004-2005: Injury and Injury preventive activities in Dong Tien: Experiences in community mobilization for Safe Community development.

Materials for dissemination:

- Leaflets on children safety.
- Exhibition on Injury Prevention and Safe Community development at the communal health station and the People’s Committee.
- Posters on home safety, school safety, and safe community

Members of the program:

Number: Two part-time members

Background: Medical Doctor

Permanent: N/A

Organization: Dong Tien health station

Specific intersectional leadership group:

There is a Steering Committee with 18 members representing for different branches, sections and organizations. Ten working groups meet and review activities of the program regularly. Each working group has a representative from the Steering Committee. Members of the Steering Committee are representative of the Women Union, Youth Union, Fatherland Front, Farmer Union, Elderly Union, Red Cross Association, Health Station, Schools, Policeman, War veterans Union, Party Cell, People’s Committee, Cultural-Information Sector and villagers.

International commitments:

Study tours: Study tour on Safe Community development in Australia, 2004 (Dr. Tran Xuan Khanh MD, Chief of professional and planning department of the Provincial Health Service, Hung Yen, Dong Tien permanent consultant for AIP/SC).

Participant in Safe Community conferences: The 3rd Asian regional conference on Safe communities in Taiwan, October 2005 (Dr Le Van Luong MD, Vice Chairman of AIP/SC steering committee of Khoai Chau, Dong Tien permanent consultant for AIP/SC).

Hosting Safe Community Conferences: N/A

Hosting "Traveling Seminars": N/A

Others:

In 2003-2004: Mr. Claudio, Junior consultant of Vietnam-Sweden Health Cooperation Program visited and provided advices on surveillance, intervention and IEC for Injury prevention and Safe Community Development.

In 2004, Prof. Ian Johnson, WHO short-term consultant visited and provided valuable advices to members of the Steering Committee on AIP/SC for improving the various activities on AIP/SC.

In 2005, Dr. Anders Norman, International short-term consultant, Vietnam-Sweden Health Cooperation and Sipu International AB, visited and provided valuable advices to improve surveillance and safe community development.

In 2006, Dr. Joon Pil-Cho, Director of Emergency Medical Center of Ajou University hospital, Suwon, Korea had a field visit for designation. He provided very valuable advices for Injury surveillance.

For further information contact:

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