

Building Bridges to Prevent Child Deaths and Injuries



Why should it matter and how can it be done?

Carolyn Cumpsty Fowler, PhD, MPH

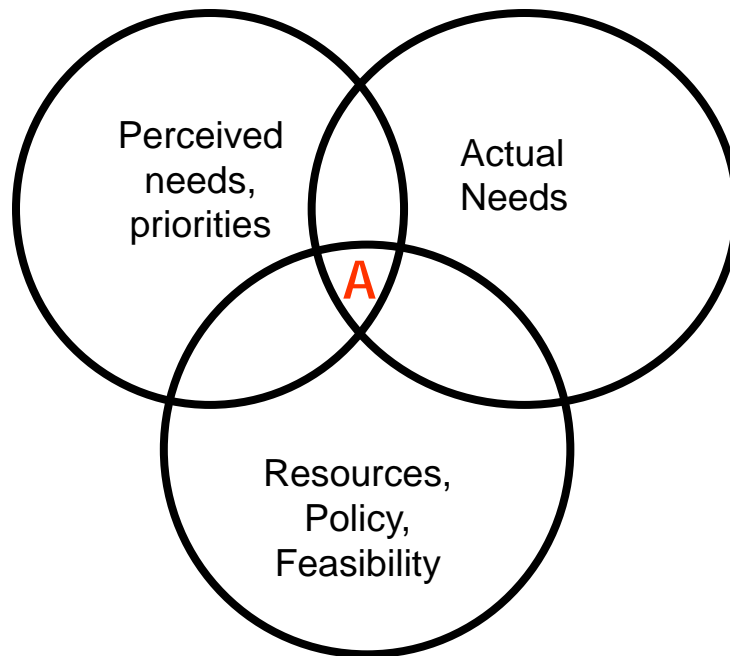
Keeping Kids Alive Symposium, May 21-22, 2009

If it is comfortable for you to do so ...

Please stand up

(and await further instructions)

“Houston, we have a problem”



Preventable childhood injury is a huge problem with far-reaching consequences

Graphic adapted from Green & Kreuter; 1999

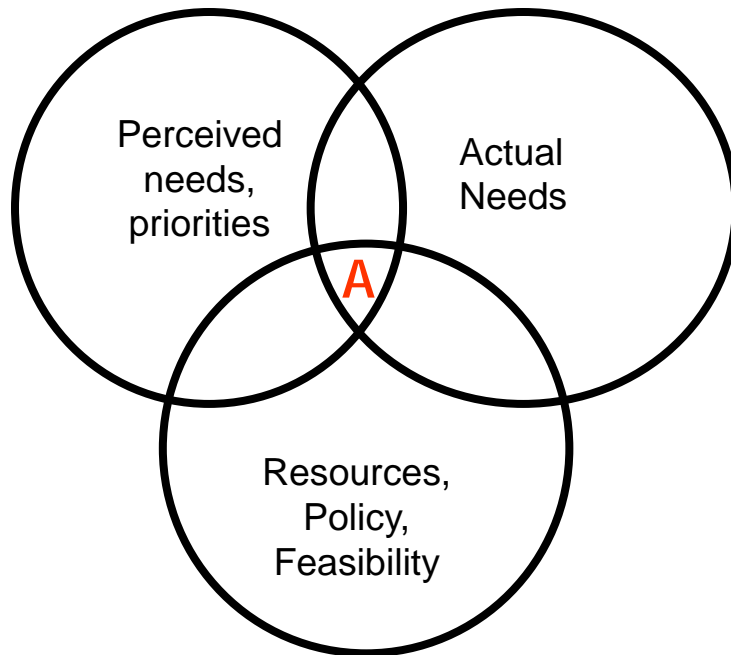
Losing a child unexpectedly leaves families and communities with emotional wounds that take decades to heal and which, for many parents, never do. The pain is even greater if simple measures could have prevented the incident that caused the death in the first place.

Even when the outcome is not fatal, the medical costs and the special care that is often needed for a severely injured or disabled child can place a huge financial burden on parents and create challenging practical and emotional difficulties for families and/or carers.

World Health Organization (2005)

Child and adolescent injury prevention: a global call to action.

Correction: “Houston, we have 2 problems”



1. Preventable childhood injury is a huge problem with far-reaching consequences, and
2. Very few people are aware ... or even care

Graphic adapted from Green & Kreuter; 1999

The consequences of the public's misperception can be seen in our lack of infrastructure

Social and Political Contextual Influences

IVP Problem Identification

IVPP Problem Analysis

IVP Program Design

IVP Program Delivery

IVPP Impacts

Infrastructure

-Internal

- External

Epidemiology, Program Design, Implementation, Evaluation, Information Sharing

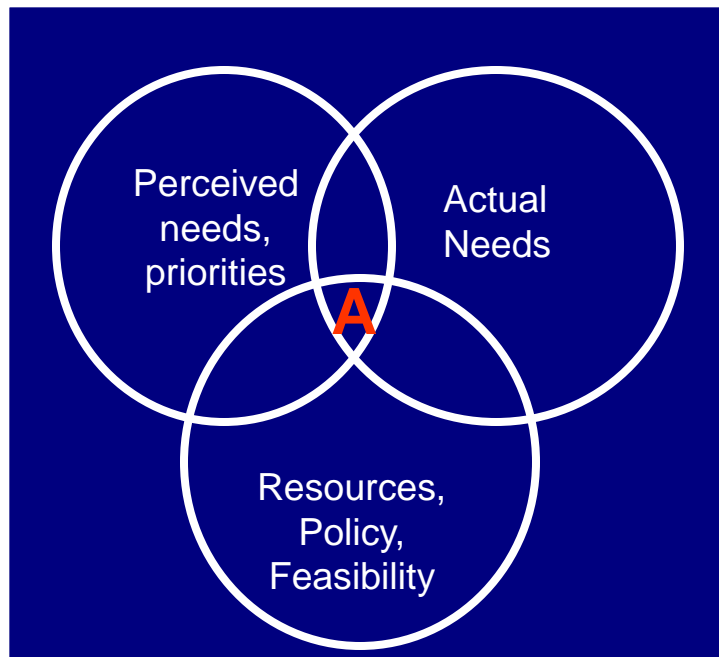
Human Resource Issues, Funding, Partners, Socio-Political Influence

How can we possibly ignore this impact on our society?



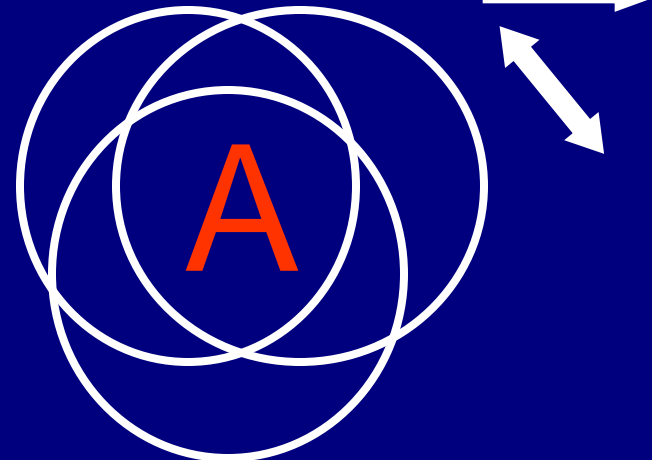
Can we reconcile differences?

Reconciling differences among public's perception of need, health sector's assessments, and political assessments.



Strategies to reconcile perceived and actual needs and resources.

1. Participatory research 
2. Community mobilization & organizational development 
3. Health education & advocacy



Adapted from Green & Kreuter; 1999

Our Challenge: Building Injury Prevention Capacity:

“The sustained ability of people - as individuals, groups, communities, institutions, and societies - to anticipate, identify and address injury problems and threats to safety in a strategic, effective, ethical and equitable manner”

This is my definition of Injury Prevention Capacity

Solving the Prevention Puzzle

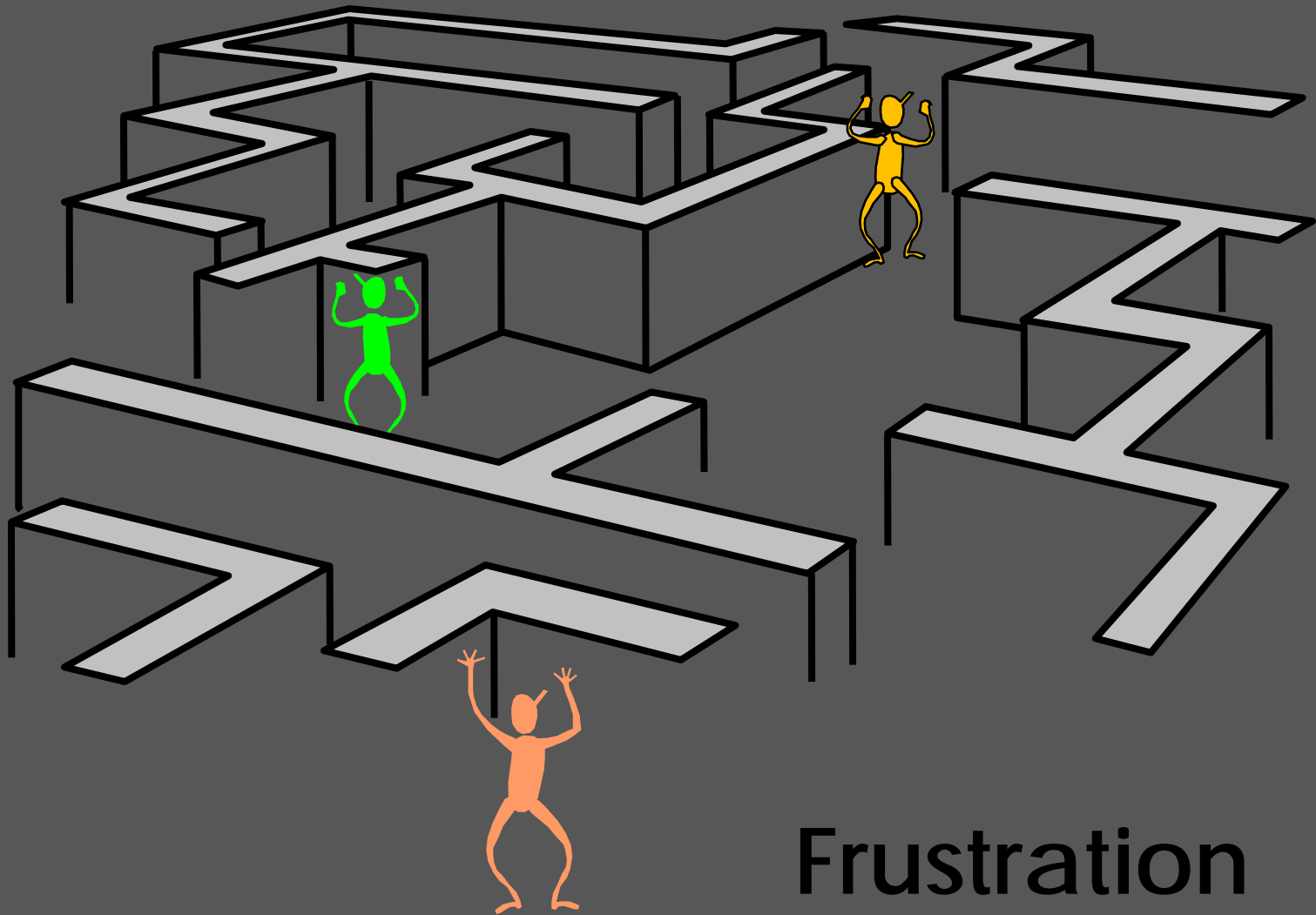
Requires multi-disciplinary collaboration
beyond CDR teams



Collaboration is Challenging



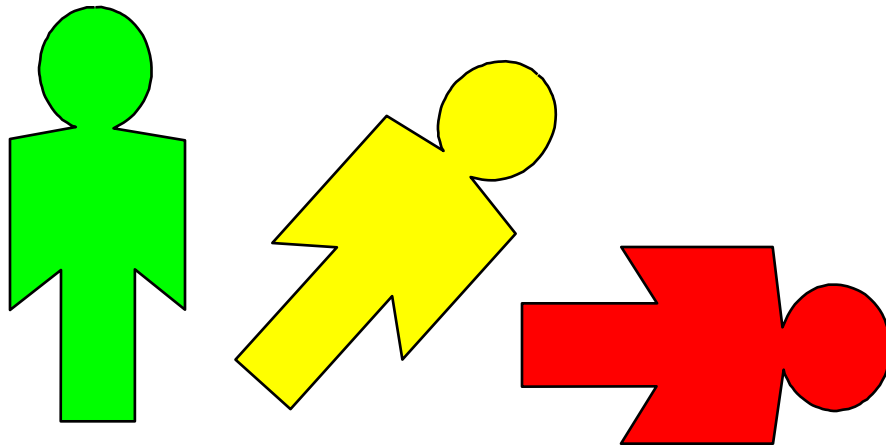
But ... not collaborating is worse!



Frustration

The problem that inspired the development of Child Death Review:

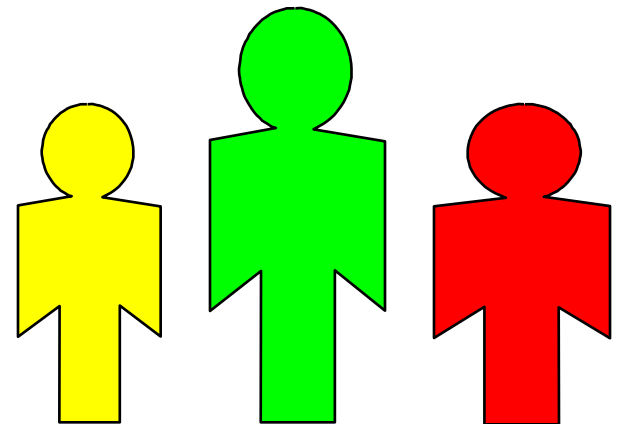
“No single health, social service, law enforcement, or judicial system exists to track and comprehensively assess the circumstances of child deaths”



Michael Durfee, 1989 & 1992

Let's re-write the statement

PROBLEM: No single health, social service, law enforcement, or judicial system **can prevent** child deaths and injuries



A Focus on Discreet Programmatic Areas May Limit Our Reach

- Illness Paradigm, vs.
- Wellness Paradigm

- Individual Focus, vs.
- Population-based Focus

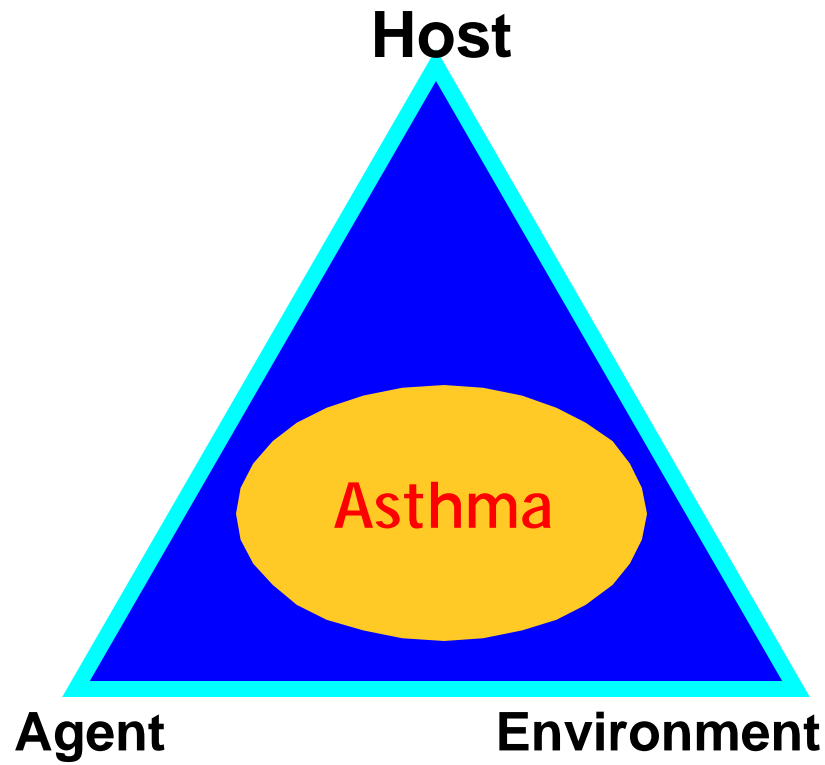
- The consequences of narrow focus are of strategic and ethical importance.

Children must be protected within their environments ---

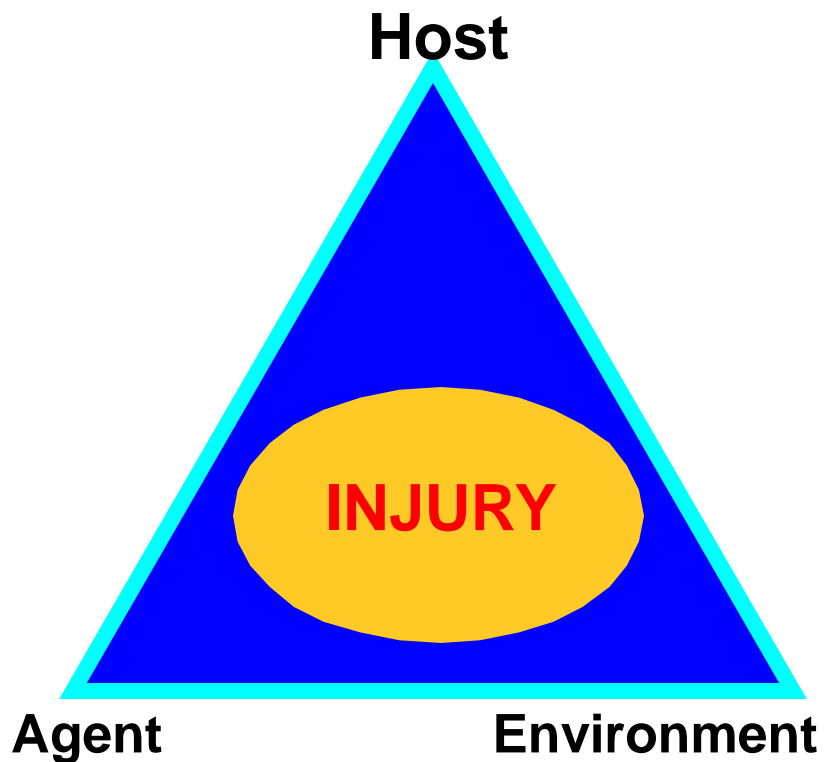


-- not isolated from them

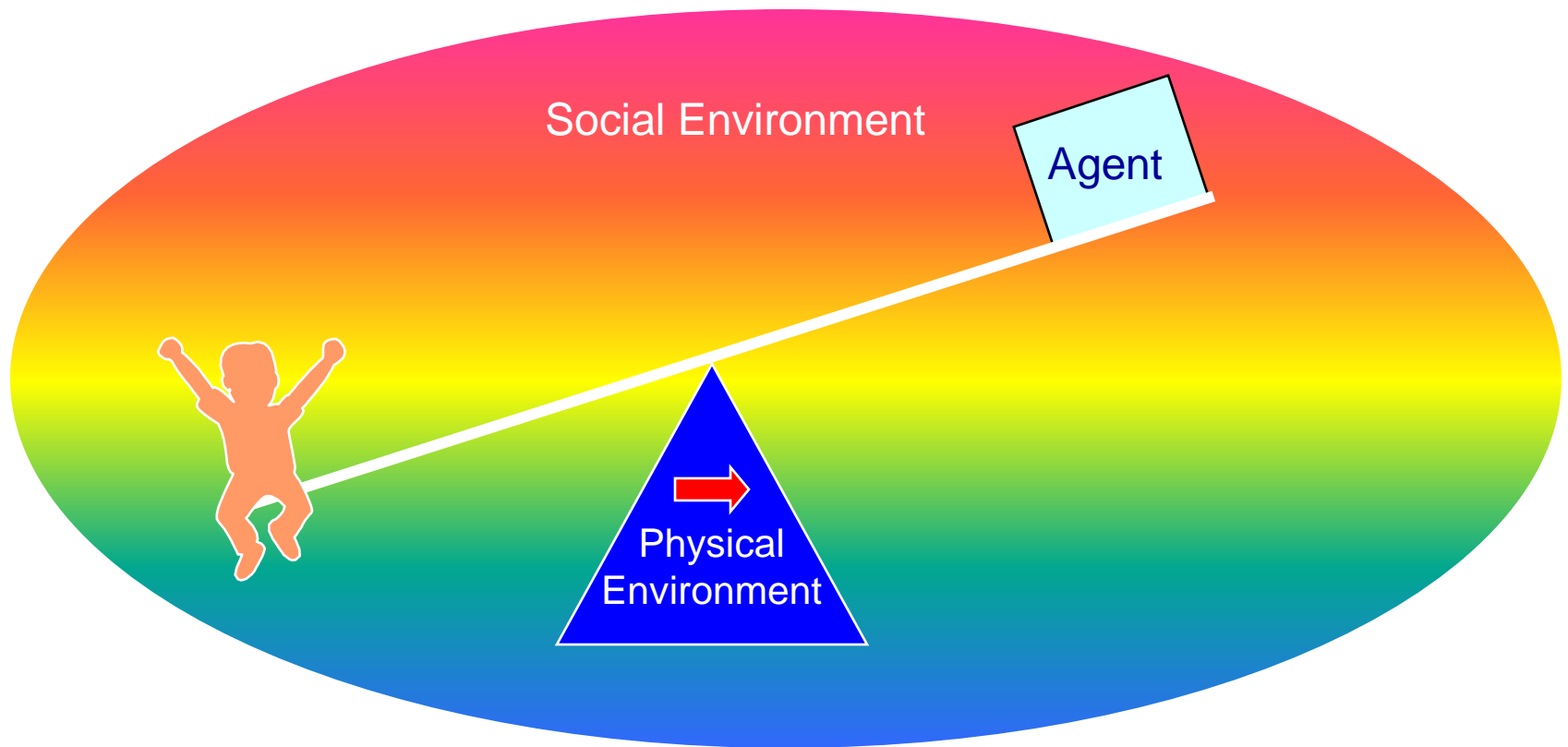
The Maternal Child Health Community Has Long Recognized the Influence of Environmental Conditions on Health



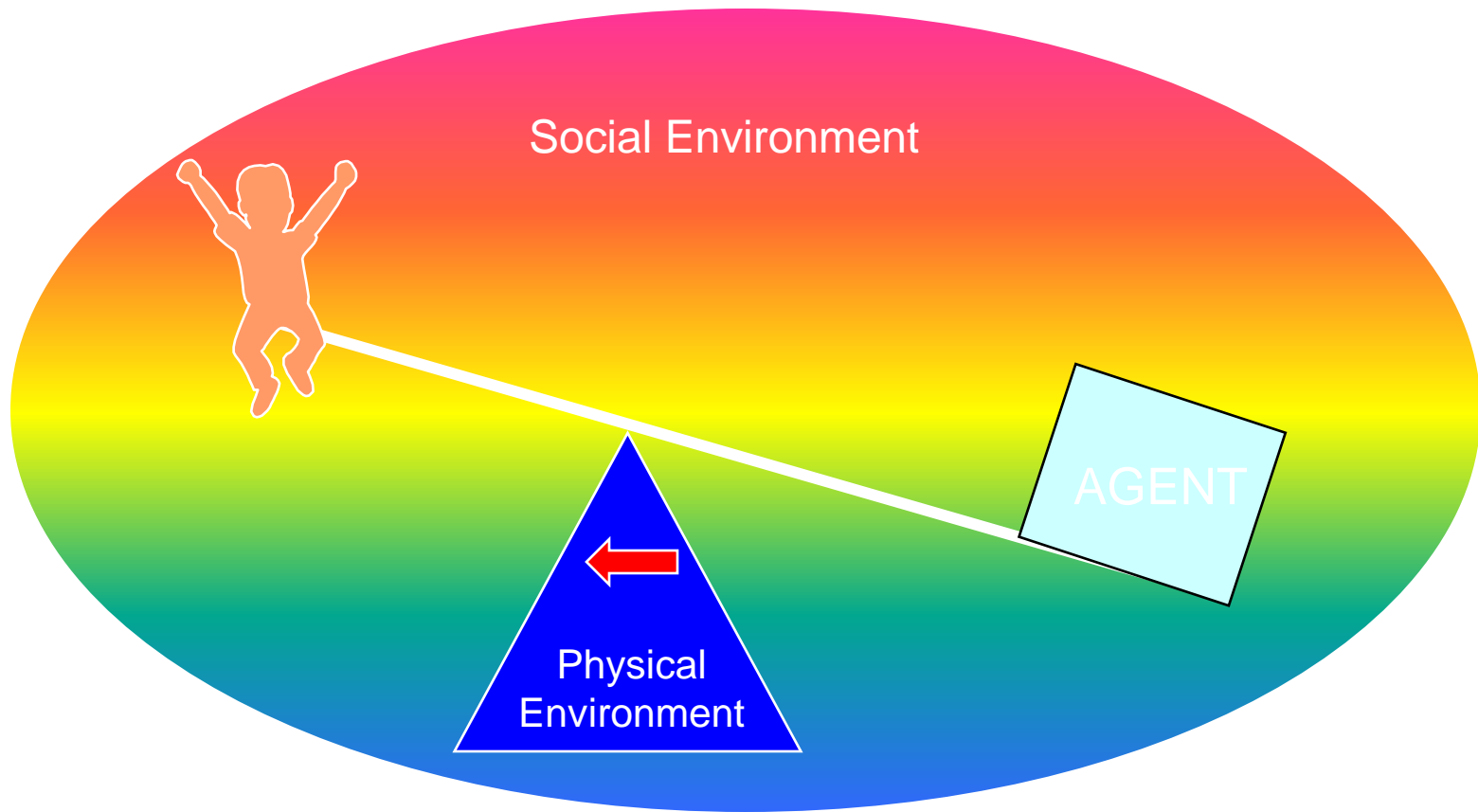
Injury is no different than disease. We must aim for action to achieve “Positive Ecological Balance”



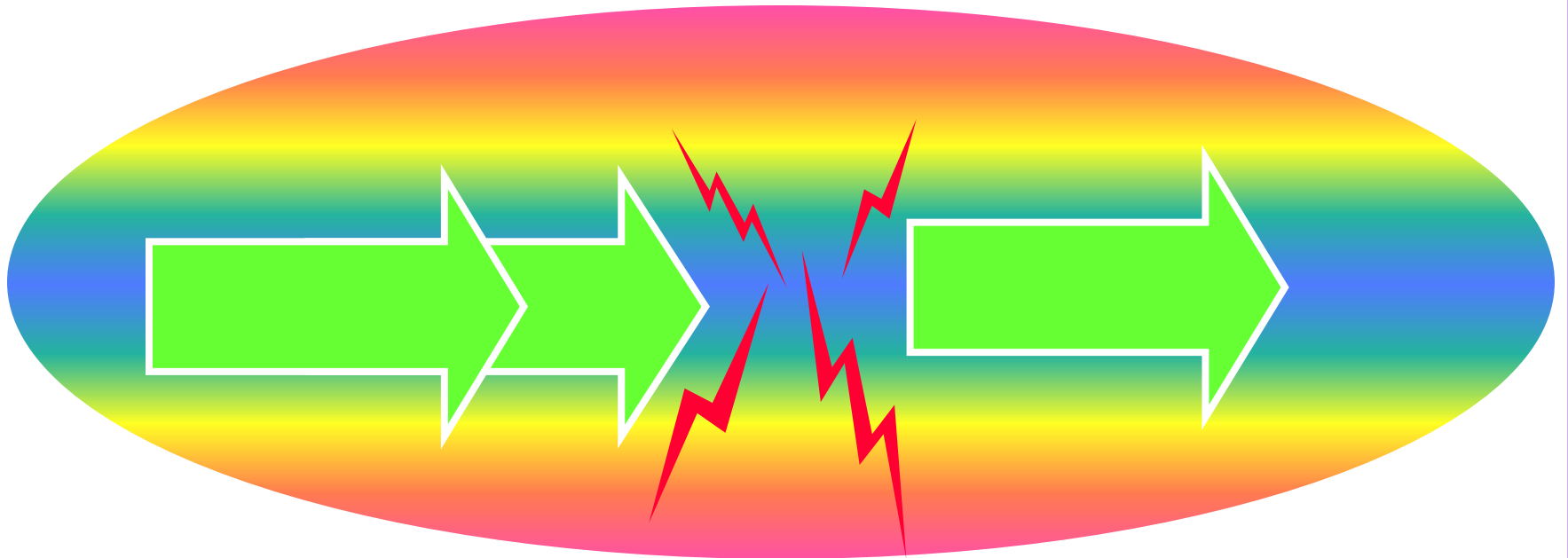
“Negative ecological balance”



"Positive ecological balance"

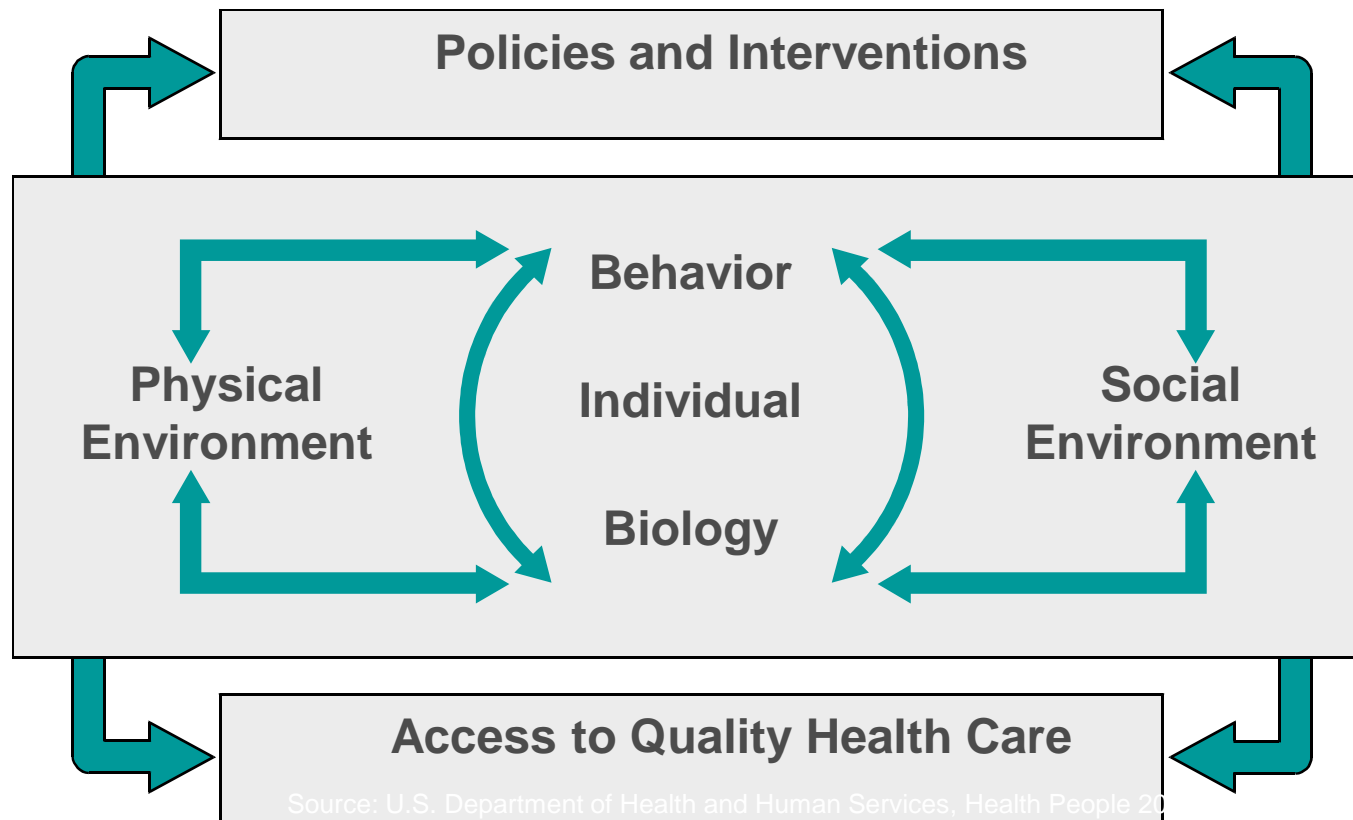


To prevent injury and its consequences we must first identify - and then interrupt - the causal chain



Best-practices intervention planning requires that we understand the causal chain AND the factors that support or inhibit it ... and address prevention using an ecologic approach.

Whatever the Public Health challenge, we must modify multiple determinants of health



All Public Health Achievement Requires:


- Coordinated
- Comprehensive
- Organized Community Effort

Because of the often “political” nature of effective strategies, this is critically important for Injury Prevention

This is the bottom line:

Building bridges to prevent child deaths and injuries is essential. There is no other alternative.

There is Good News

 Effective bridges have been built ...
and they can save lives

We will hear some inspiring success stories at this meeting

But ...

You knew that was coming didn't you

Many fans of bridge building make me nervous -
and mandated bridge-building efforts terrify me



This concern is evidence-based!

The act of bridge building can preoccupy us



Bridges are only a means to an end



The "Bridges to Nowhere"
Cape Town, South Africa

Let's not lose sight of our intended end:

Strategic Partnerships

Why Partner?

Partnerships and coalitions are necessary in developing prevention and health promotion programs or research today because **no one agency has the resources, access, and trust relationships to address the wide range of community determinants** of public health problems.....

The limited resources of any one agency combined with the complexity of emerging health issues are further compounded by the limited mandate of any one agency to deal with the entire scope of that complexity.

Green, Daniel, & Novick

Public Health Reports. 2001 Supplement. Vol. 116: p. 21

Strengths of Partnerships: I

- Conservation of resources
- Achieve more widespread reach
- Can accomplish objectives beyond the scope of any one organization
- Have greater credibility than individual organizations
- Provide a forum for information sharing

Strengths of Partnerships: II

- Provide a range of advice and perspectives to the lead agency
- Foster personal satisfaction and help members to understand their jobs in a broader perspective
- May foster cooperation between grass roots organizations, community members, and/or diverse sectors of a large organization

So many strengths ..

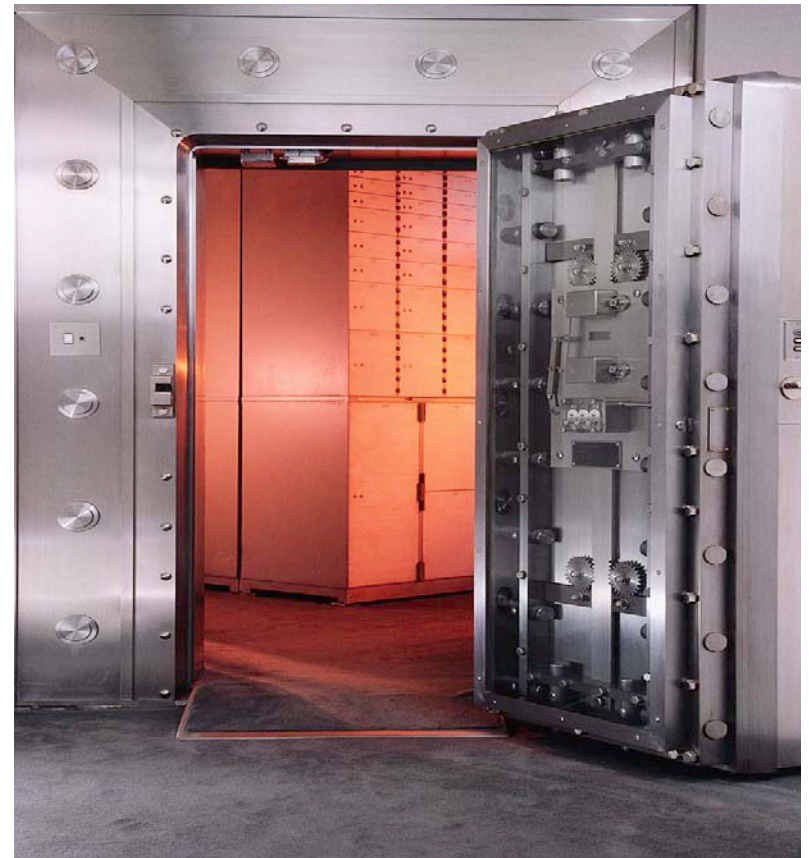
So why is there so much resistance?

OBVIOUS Answer:

Our structures inhibit collaboration and shield us from unwelcome change

Public enemy #1:
categorical funding

But it goes beyond money:
if resources (wisdom,
time, skill, influence,
etc) are not shared,
They can't earn
Interest.



Harsh Reality Check

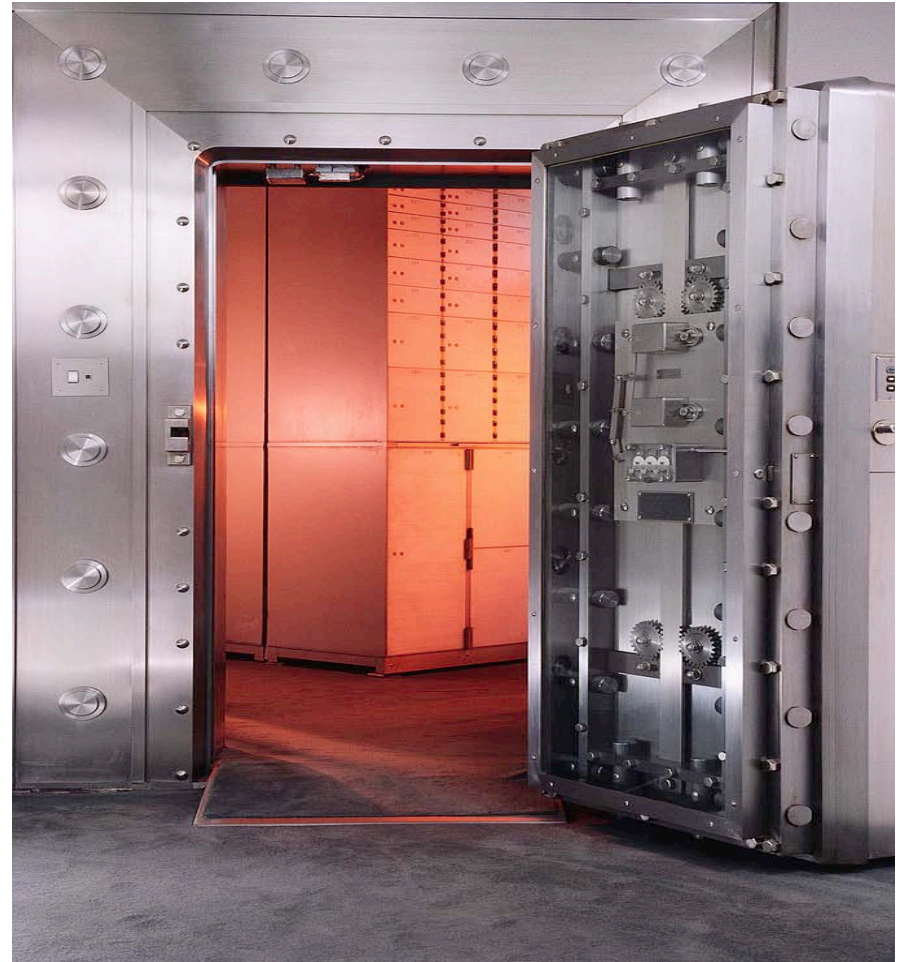


Some people really, really,
really don't like bridge-building and collaboration

Less Obvious Answer: We use “our structures” to protect us

Public enemy #2:

Preserving the Status Quo
- even if it's outdated or
non-functional





The world hates change, yet it is the only thing that has brought progress.

Charles Kettering

1876-1958

Selling change is a major bridge building challenge:

We struggle to sell the need to buy-into collaboration to many key stakeholders - inside and outside our own organizations.

Why?

We're trying to sell ideas and products we value to ourselves!



What can we learn from the experts?

- When customers do NOT buy the product or respond in an unexpected way to the message, marketing experts do not blame the customer for the failure.
- They know it is their responsibility to sell this better

They don't transfer responsibility for marketing success to the buyer



Any time we think the problem is “out there”
that thought is the problem.

Stephen Covey

First Things First, 1994

Take-home message 1



We need to “own the problem”
if we want to be part of the solution

Where should we start?





Key Public Health Problem Solving Concept - 1

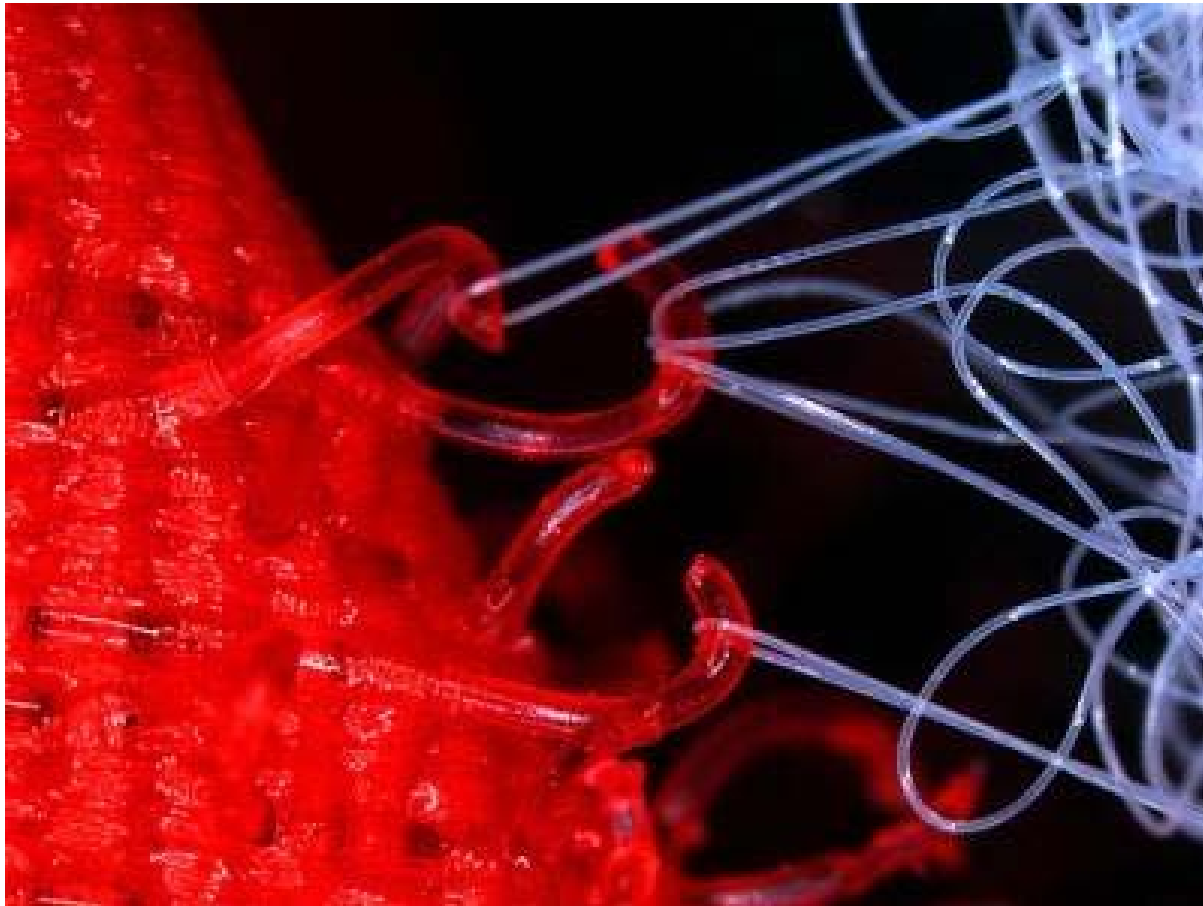
Focus your energy and resources on identifying and changing modifiable variables (risk factors or barriers)



Key Public Health Problem Solving Concept - 2

Commit to asking --
and finding answers for -
the right questions

What is this? Why is it here?



Strategic communication challenge:

- Without a clear understanding of the community, key decision makers and of the factors that will influence them, we cannot begin to develop our strategic communication plan.
- If we hope to influence key decision makers in order to achieve community-level change, we must spend time thinking about the messages we develop and deliver to them.

Why do you think I used this picture?





A journey of a
thousand miles begins
with a single step

Lao-tzu
604 BC-531 BC

A more direct translation would be:

**"The journey of a thousand miles
begins beneath one's feet"**

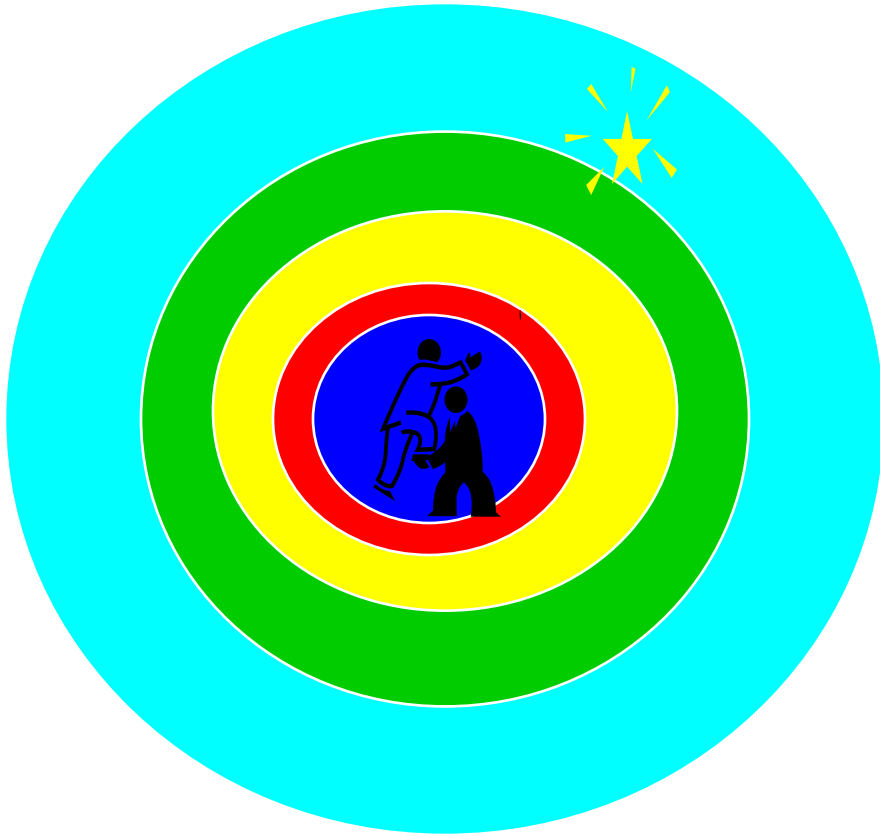
Take-home message 2



Focus on relationships

Relationships Are Resource Mobilizers

Build Circles of Influence



- 1. Build relationships from the inside out**
- 2. Build relationships with real people (not job descriptions)**

Take-home message 3



Learn another language

Whose language are you speaking?

“If you talk to a man in a language he understands, that goes to his head. If you talk to him in his language, that goes to his heart.”

--Nelson Mandela



This is one of the most important
lessons my practice partners in other
fields have taught me

We need to get off our turf and
out of our own way

Take-home message 4



Understand each other's realities

Get to know your partner's turf

You may discover
inspiring ideas and a
new way of looking at
the world



"You can't stay in your corner of the Forest waiting for others to come to you.
You have to go to them sometimes."

Winnie the Pooh (A. A. Milne)

Take-home message 5



Select a compelling and winnable issue

(I call these the silo-shrinkers)

How deep are your silos?



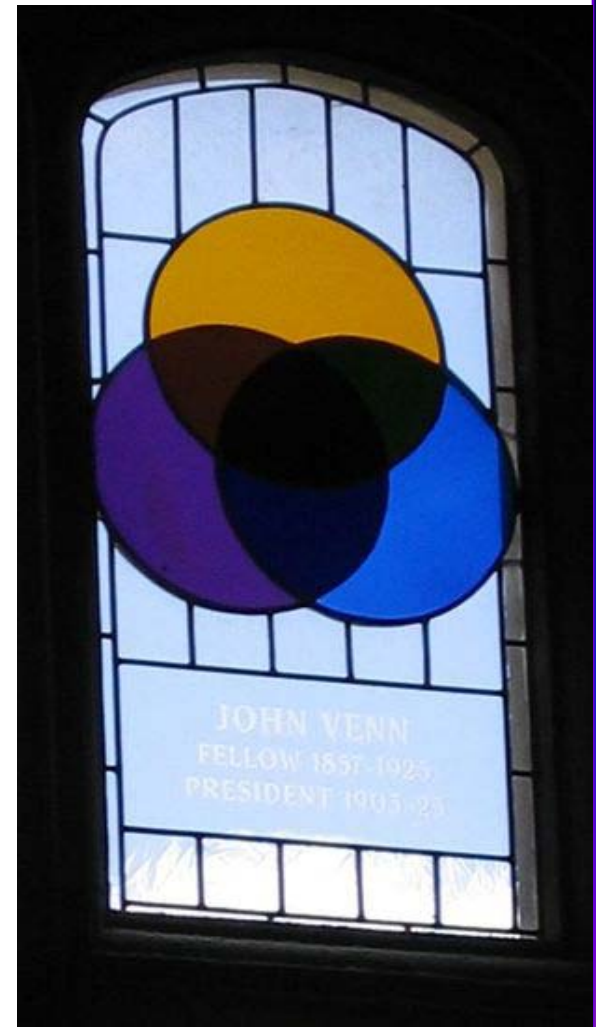
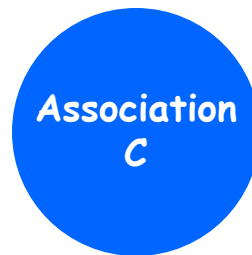
Conflicting Paradigms - USA, 2009

- Unity is Strength
 - Preserving a “global” view of the problems
- Divide and Conquer
 - Narrowing focus or prioritization

**Both approaches have risks and benefits;
we should embrace both**

Reduce the Potential Risks of Convening Large Coalitions

- Consider forming an “Association of Associations” to work on a commonly shared or valued issue

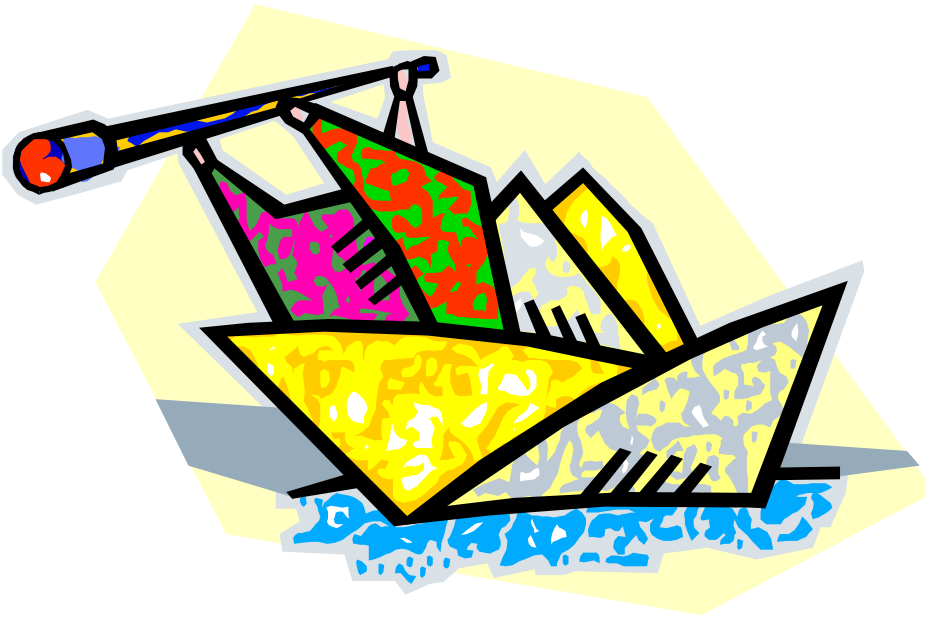


Take-home message 6



Learn how to describe collaborative activities and deliverables

Collaborations without clear goals and measurable objectives are like a paper boat ... doomed to sink



no matter how well constructed they appear to be

Building a partnership is an intervention

Partnership building needs to be approached with the same rigor we promote in best process intervention design.

Partnerships are more likely to work when they:

- are convened for a purpose
- are planned strategically
- have the necessary resources
- are managed carefully and respectfully
- are evaluated
- prioritize ongoing quality communication (feedback)
- are willing and able to change (CQI)

Take-home message 7



Build relationships with non-governmental
and/or non-profit partners

Expand your reach throughout the Spectrum of Prevention

Influencing policy and legislation

Changing organizational practices

Fostering coalitions and networks

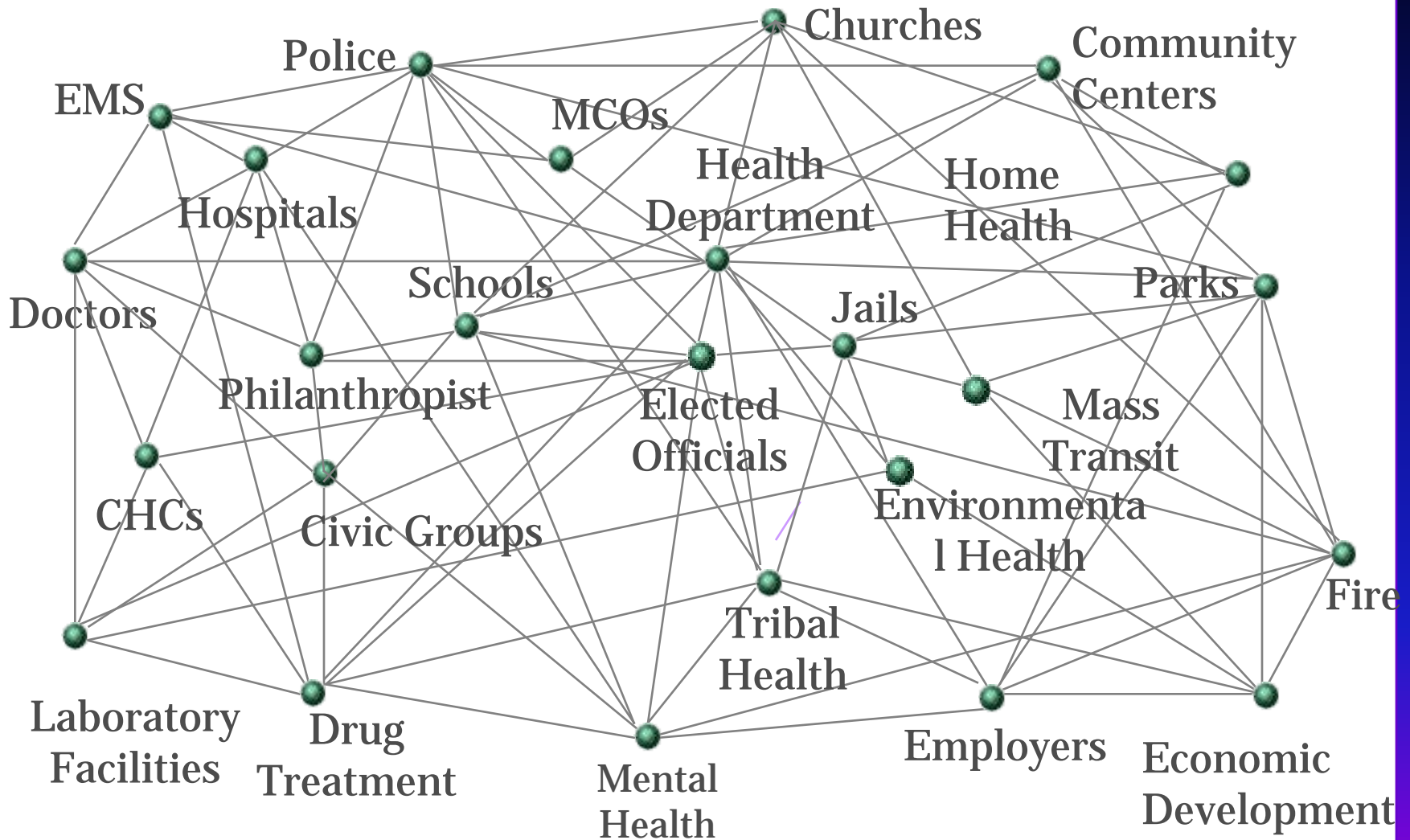
Educating providers

Promoting community education

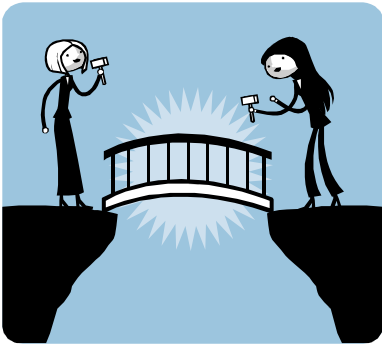
Strengthening individual knowledge and skills

Larry Cohen, 1991; Cohen and Swift, 1999; available at www.preventioninstitute.org

Who's Involved in Public Health?



Your community stakeholders are experts too



They may be able to help you design, refine
and deliver your messages -
but only if you engage them in the process

Every partner should feel valued!

- Each member should feel that they have a clear role to play.
- People must feel that they “belong” and that their contribution is important and respected.
- They must believe that the time investment is worthwhile.



Building for Strength



- A strong foundation
- Structural integrity
- A shared function
- Equality of scale (height and circumference)

Collaboration

Tombstones

- ê Confusion about priorities
- ê Turfism, inflexibility
- ê Lack of commitment or enthusiasm
- ê Unproductive meetings
- ê Lack of follow through
- ê All work, no play

Milestones

- é Mutual respect, trust
- é Strategic plan, consensus
- é Delegation of tasks
- é Resources and results obtained
- é Good follow through
- é Fun, humor, enjoyment

Williams K, 1997

Reaching Out: A Guide to Effective Coalition Building, EMSCNRC

Injury Prevention is Challenging & Collaboration is Challenging



But MCH & CDR Teams & injury prevention specialists are learning to work together, and they are saving lives!

Take-home message 8



Commit to leading change

“This is your world. Shape it or someone else will.”

Gary Lew

We must build *A World Fit For Children**



“The Cost of Doing Nothing [about injury] is Too High”

Ambassador “Pete” Peterson, TASC, Thailand



* United Nations
2002

Can we work together to reframe this issue ?

Childhood Injury Prevention is NOT Just About “Accidents”, Injury, Medical Challenges or Cost-Savings.

It's About Every Child's Health, Well-Being and Right to Live and Develop in a Safe and Healthy (Physical and Social) Environment.

This connection to so many aspects of child health and development is what gives injury prevention urgency and relevance – we must all leverage that.



It's amazing what ordinary people can do if
they set out without preconceived notions
Where there is an open mind there will
always be a frontier.

Charles Kettering

1876-1958