

safety **PRO** NATIONAL SAFETY COUNCIL TM

SPECIAL EDITION



Our World View Has *Changed!*



World Health Organization
Designates Omaha

A Safe Community!



President's Letter

Recently, through the efforts of a collaboration of organizations, the World Health Organization (WHO) named the Omaha Metroplex and lead collaborator, the National Safety Council, Greater Omaha Chapter, a WHO "Safe Community".

This prestigious designation launches eastern Nebraska and western Iowa – not just Omaha – into the ranks of such diverse locales as Rotterdam, Netherlands; Melbourne, Australia; Suwon, Korea; Calgary, Canada; and Bergen, Norway as well as the handful of American cities who have previously received the designation: Dallas, TX, Anchorage, AK, and Springfield MO.

many other cities, and you can't buy that kind of advertising. We retain the fabled Midwestern work ethic. Most importantly, we desire to continuously move forward in achieving our goals of an open, safe society for all its members.

It is interesting that many national magazines and commentators have long known what the WHO is now recognizing in a new way: This part of the country ROCKS! From *Forbes* to *Ladies Home Journal* to *Parenting* magazines, the Omaha metropolitan area consistently lands high on all the lists; best place to live, best place to raise a family, best place to own a small business. And now, best place to pursue a life free from injury.

Read on to discover what the WHO is, how this designation has affected the communities that have received it before, how it is likely to affect our home, and where we go from here. Congratulations – you've earned it!

Our World View HAS Changed!

Our world view has changed, and with it, how the world views our home. We've been partnering for years with fire fighters, law enforcement, the justice system, schools, health care, public officials, government, businesses and related organizations to better the safe living conditions of all our citizens through education and minimization of known dangers to life.

We haven't met all of the challenges yet; many serious issues remain to be tackled.

The designation however, is testament to the work of the collaboration and shows us and the world that we're farther along the path than perhaps even we had realized or credited ourselves.

Overall, our schools are among the best in the nation. Our home retains a community spirit that is the envy of

Kay Farrell,
President / CEO
National Safety Council,
Greater Omaha Chapter



Greater Omaha Chapter

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Swedish Dignitaries Visit Omaha... *and Bring Winter With Them*

A long planned site visit by the World Health Organization (WHO) almost didn't happen as Omaha's first and only blizzard of the winter of '07 shut down the town March 1 and 2.

Our schedule was jam packed to showcase our board, our partners, and community programs that are provided by others for the Greater Omaha area. In spite of the snow and dangerous driving conditions, some made it through to testify on behalf of the Council and our community. Our goal was to provide every reason for our reviewers Dr. Diana Ekman and Dr. Robert Ekman from the Karolinski Institutet in Stockholm, Sweden to approve our application to become a Safe Community.

We had previously provided all the information requested in our detailed application for designation; now was time to see it in action, meet the people, and know confidently that in fact, the application was right on target for the Greater Omaha area.

Meetings with our board, staff, partners and volunteers were scheduled throughout the two day visit. Planned tours of the Bio-Preparedness Center at the University of Nebraska Medical Center and the new state of the art West Platte Water Treatment Plant of the Metropolitan Utilities District had to be scuttled due to the weather, but MUD engineers provided the tour of the water treatment plant by video and discussion. Still, due to the comprehensive detail and requirements of the site visit, we met into the evening hours on day one and barely completed all activities by the end of day two.

The first indicator for a Safe Community was to give proof of an infrastructure based on partnership and collaborations, governed by a cross-sectional group responsible for safety promotion. Meeting the Council's board, with its diverse representation from governmental entities, corporate businesses, political policy makers, public safety, law enforcement, justice,

health care, education, safety experts, insurance and related organizations was the first order of business.

Meeting our partners in safety projects, such as Kohl's Cares for Kids and Children's Hospital and the leadership team of FIRST, Fall Intervention, Reaching Seniors Together that includes United Way of the Midlands, University of Nebraska at Omaha, Eastern Nebraska Office on Aging, Visiting Nurse Association, 5 county health directors, task group chairs and others and learning how those volunteers come together and collaborate was important. Our site reviewers wanted to see evidence of ongoing cooperation within the committees, minutes, sustainability of the work and the projects.

Next, the Ekmans looked for long-term sustainable programs that cover both genders and all ages, environments and situations. We provided evidence that we had implemented short and long term programs within the community. They looked at calendars, media coverage of past events, evaluations of past programs and research based programming and evaluation, sustainability, budgets, past and projected.

The site visit then continued with a review of programs that target high-risk groups and environments and programs that promote safety for vulnerable groups. We were able to discuss our vulnerable groups and their injury problems. Each program designed to reach children, teens and our elderly was thoroughly reviewed.

Finally, the WHO site visit team looked at the quantifiable goals, long term plans, evaluation methods, documentation of progress, the use of data to help with the process of planning and evaluation and the outcome evaluations, statistical evidence

and positive changes in injury rates.

Duly impressed and satisfied that the application was sustained by the visit, the WHO site team recommended that the Greater Omaha Area be designated a Safe Community.

"I believe that the 'Omaha model' provides a wonderful template for the rest of the country to follow."

Dr. Diana Ekman



Dr. Adi Pour and Dr. Diana Ekman

Welcoming Dr. Diana Ekman and Dr. Robert Ekman to the site visit were (left to right) Kay Farrell (National Safety Council, Greater Omaha Chapter), Pete Neddo (MUD), Dr. Diana Ekman, Donna Stein-Harris (National Safety Council), Joe Re (Carlson Systems), Dr. Adi Pour (Douglas County Health Director), Dr. Robert Ekman, Tracy Deseck (Catholic Mutual Insurance Company), Ed Burchfield (Valmont Industries).

Who is WHO?



Dr. Robert Ekman

Dr. Diana Ekman



When people are told of Omaha's designation as a WHO "Safe Community" their typical reaction is "Really"? WHO, the World Health Organization – is widely known for their health efforts, particularly in under-developed areas of the globe. Less known but just as critical to the WHO mission is their long standing dedication to safety on a global basis.

"All human beings have an equal right to health and safety." This principle of social policy is the fundamental premise of the World Health Organization's (WHO's) Health for All Strategy and for the WHO Global Program on Accident Prevention and Injury Control. "Safety for all can be achieved by reducing injury hazards and by reducing the differences in accidents and injury rates among socioeconomic groups," from the Manifesto for Safe Communities, Adopted in Stockholm, September 20, 1989 at the First World Conference on Accident and Injury Prevention.

as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

The World Health Assembly is the supreme decision-making body for WHO. It generally meets in Geneva in May each year, and is attended by delegations from all 193 Member States. Its main function is to determine the policies of the organization. The Health Assembly appoints the Director-General, supervises the financial policies of the organization, and reviews and approves the proposed program budget.

It has an executive board composed of 34 members technically qualified in the field of health. The main functions of the board are to give effect to the decisions and policies of the Health assembly, to advise it and generally to facilitate its work.

The Secretariat of WHO is staffed by some 3,500 health and other experts and support

staff on fixed-term appointments, working at headquarters, in the six regional offices, and in countries.

Omaha fits into this mix as a "Safe Community" because we have proven to WHO that we sincerely and effectively carry the flag of safety and health. WHO is depending on us to continue to improve

safe living for all of our people and Omaha is clearly up to the challenge.

The World Health Organization is the United Nations specialized agency for health. It was established on April 7, 1948.

WHO's objective, as set out in its Constitution, is the attainment by all peoples of the highest possible level of health. Health is defined in WHO's Constitution

Health is defined in WHO's Constitution as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

"All human beings have an equal right to health and safety."
WHO

What is a *WHO Safe Community?*

Being designated by WHO as a “Safe Community” often raises more questions than answers. For example, exactly what is a “safe community”? Often, comments such as “we aren’t safe, people are dying every day” might be the first to pop into mind. But being designated a “Safe Community” doesn’t mean that everyone here is perfectly safe, or that the work of the community is done. Rather, it is recognition of the community’s efforts to work towards an overall climate that encourages, respects, and rewards safety, at work, at play, at home, and at all points in between.

“Safety is a state in which hazards and conditions leading to physical injury, psychological or material harm are controlled in order to preserve the health and well-being of individuals and the community. It is an essential resource for everyday life, needed by individuals and communities to realize their aspirations.” (WHO, 1998)

A “Safe Community” is an initiative of a group of people with common interests and concerns relating to safety who aspire to safety in a structured approach, according to WHO. For eastern Nebraska and western Iowa it means that we are working together, collaborating to make our community a safe place to live. Different and creative methods of education and environmental change joined with appropriate

legislation and enforcement are important as a community works to change existing behavior patterns for safety.

Unfortunately the results of safety everyday are non-events. The child who fell off his bike on his head was wearing a helmet and therefore suffered no concussion or brain damage. Five people walked safely away from a car crash because they were wearing their safety belts. The children who fall from the jungle gym suffer no injuries because the proper base has been applied beneath the apparatus. A woman over 75 safely moves around in her bathroom because she had grab bars installed. In the park the skateboarder took a terrible tumble but was safe because of protective equipment. After the ice storm, no one fell because sand or ice melt had been spread. Examples go on and on. Thousands of people avoid unintentional injury every day because of learned safe behaviors. And that is our goal.

We know our work is successful. The unintentional injury rate in the United States has reduced from 70 per 100,000 in the early 1900s to about 35 per 100,000 today. In 1970 slightly less than 15,000 died from work injuries compared to fewer than 5,000 in 2005. Successes such as these have only occurred because of the collaborative efforts and initiatives of corporate businesses, non-profit organizations and government.

Working together, the Greater Omaha Community will continue this collaboration for a “Safe Community.” As a member of this global initiative, we will participate in conferences,

and share our findings, our research and our expertise. Being a member of a world wide global initiative opens our horizons far beyond this community. Our 5 county area will benefit as we learn from those with similar missions in the United States and all across the world. Ultimately, we have all become part of a global peace program.

Diana Stark Ekman, PhD, of the Karolinska Institutet, Stockholm, Sweden, who with Robert Ekman, PhD, led the site visit said, “One of the great things about the Greater Omaha Safe Community is the ability to blend research, expertise and outreach efforts in a seamless fashion, based on a united desire to make the area a safer and healthier place to live.”

Ultimately, we have all become part of a global peace program.



Dr. Ekman learns about the Omaha Metropolitan Medical Response System (OMMRS), the Local Emergency Planning Commission (LEPC), and the United Way of the Midlands 211 Hotline. Left to right: Phyllis Dutton, director of OMMRS; Dr. Robert Ekman; Maria Reiter, LEPC secretary/treasurer; Jennifer Messick, LEPC chairman; and Jamie Moore, vice president, volunteer/community services, United Way of the Midlands.

Top: Dr. Peter Whitted (Midwest Eye Care), discusses community safety efforts with Kay Farrell. Above: Tom Everson, president of Keep Kids Alive, Drive 25, shares his national initiative with Dr. Robert Ekman. This program was founded after a tragic neighborhood traffic fatality occurred. The program promotes low speed limits in neighborhoods to keep kids safe.

S A F E T Y B O O T C A M P

What It Takes To Meet the Challenges

It would be easy to dismiss the application process to become a WHO designated “Safe Community” as easy. It would also be wrong. Described in an April 21st Omaha World Herald Article as “a 20-page application”, the process is described as ‘onerous’ at best and more aptly ‘laborious’.

The process of meeting the WHO challenge started more than six months ago, first, classifying the Council’s 79 programs into the categories required by WHO, evaluating them in terms of injury reduction, reach and sustainability. Once the application was completed and reviewed by WHO, we began preparations for the site visit.

While the Council took the lead in applying for the designation, we did it on behalf of all those in our community working for safety. And those organizations played a very important role in the site visit.

A reception was held from 1:00 p.m. to 4:00 p.m. on March 2, 2007, to showcase many projects in the five county area. Many organizations set up exhibit



booths to best showcase their mission, materials, etc. Diana Ekman, PhD and Robert Ekman, PhD met individually with all of those organizations, learned about their projects and shared information from the world community appropriate to each project.

The visit to the wellfield construction site of the new world-class Platte West Treatment Plant had to be scuttled due to weather, but MUD officials brought the program to the Council for the Ekman.

Left to right: Donna Stein-Harris (NSC), Dr. Robert Ekman, Dr. Diana Ekman, Pete Neddo (MUD), Kevin Tobin (MUD), Michael Koenig (MUD), Kay Farrell (NSC, GOC) and Mark Wolff (MUD)

Dr. Robert Ekman and Joe Re (Carlson Holdings, Inc.)



Learn about Safe Communities at
http://www.phs.ki.se/csp/who_safe_communities_indicators_en.htm

Learn about Omaha’s Safe Community at
<http://www.phs.ki.se/csp/safecom/omaha.htm>

Stepping Forward to an Even Safer Community

It has been said that some work is never done. This has been attributed to women, crime fighters, and now safety. Despite the Omaha metro area's designation as a WHO "Safe Community", we are painfully aware that our work is not yet over, at least our work to reduce or eliminate the fatalities associated with unintentional injuries.

Consider this - In the time it takes you to read and absorb this magazine (about an hour) our nation will experience 13 unintentional injury deaths and 2,750 disabling injuries.

Someone dies from an unintentional injury every 5 minutes and someone is injured every second. Take a look at these 2005 rates.

United States*		Severity	One Every •	Number per ...			2005 Total
				Hour	Day	Week	
All	Deaths	5 minutes	13	310	2,170	113,000	
	Injuries	1 second	2,750	66,000	463,500	24,100,000	
Motor Vehicle	Deaths	11 minutes	5	125	880	45,900	
	Injuries	13 seconds	270	6,600	46,200	2,400,000	
Work	Deaths	106 minutes	1	14	100	4,961	
	Injuries	9 seconds	420	10,100	71,200	3,700,000	
Workers Off the job	Deaths	11 minutes	6	135	950	49,900	
	Injuries	4 seconds	940	22,500	157,700	8,200,000	
Home	Deaths	14 minutes	4	101	710	37,000	
	Injuries	4 seconds	1,020	24,400	171,200	8,900,000	
Public nonmotor-vehicle	Deaths	19 minutes	3	76	530	27,500	
	Injuries	3 seconds	1,050	25,200	176,900	9,200,000	

*Source: National Safety Council Estimates

According to these estimates and considering a US population of about 300 million and our local population of about 750,000, more than 230,000 of these injuries annually occur in the Greater Omaha area.

Being a "safe community" doesn't mean that we are (or ever will be) perfectly safe. We will always have challenges. Rather, receiving the designation means that our community organizations are working together to achieve maximum efficiencies in meeting their respective missions, and together are having an even greater positive effect on the community as a whole.

In the Safe Community initiative, the community plays the leading role. The term implies that the community aspires to safety in a structured approach, not that the community is already perfectly safe. Creative methods of education and environmental change joined with appropriate legislation and enforcement are important parts leading to the safety of a community.

Programs to prevent and control injuries and accidents must identify and characterize the injury problem and evaluate the effectiveness of injury control interventions. Epidemiology is an important tool.

Falkoping, Sweden was one of the first (1975) communities to approach injury control in a comprehensive way for all ages, environments and situations. This was not accomplished by creating a new structure; it was the result of collaborative efforts of existing organizations, associations and welfare functions.

In 1991 Falkoping was designated one of the first WHO "Safe Communities."



Kelvin Thurman (NSC, GOC) shows safety products and training flyers to Dr. Diana Ekman.

"Being a 'safe community' doesn't mean that we are (or ever will be) perfectly safe. We will always have challenges. Rather, receiving the designation means that our community organizations are working together to achieve maximum efficiencies in meeting our respective missions, and together are having an even greater positive effect on the community as a whole."

Congratulations Greater Omaha!



Greater Omaha Chapter

The Greater Omaha Area, which includes Douglas, Sarpy, Cass and Washington counties in Nebraska and Pottawattamie County in Iowa, has received the World Health Organization's Safe Community Designation. Greater Omaha is only the fourth American community to receive this prestigious recognition. Only 112 international communities including 3 U.S. communities, have received this designation previously.



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Every day you provide nearly 100 million gallons of reliable safe water to the Greater Omaha area!