

Safety Council responds with program

A well administered safety council is always cognizant of the need to obtain maximum utilization of funds and staff time. To be certain of this it must be sure it is attacking priority problems; that the affected group or geographic area can be isolated and effective methods to establish communication are or can be employed. Outlined below, is a successful case history of how one such problem was dealt with by the Metro Safety Council.

Forty-two per cent of the 48 pedestrian fatality victims in Metropolitan Toronto (population 2.3 million) in 1975 were senior citizens.

This statistic stood out like a sore thumb in an analysis of traffic accident statistics for that year. It was a completely unacceptable figure since persons age 65 and over constitute only 10 per cent of Metro's population. Clearly the situation called for action, and the Metro Safety Council responded by developing a program to remedy the root causes of the problem.

FUNDS PROVIDED

When the trustees of Toronto's Metro Safety Council were alerted to the problem they immediately guaranteed adequate funding to develop and operate an effective campaign. With this encouragement, the volunteers who serve on the safety council's traffic safety committee went to work. They wisely decided that there was more to the story than the statistics revealed, and that they must talk to seniors to find out what their problems were as pedestrians. Subsequent conversations revealed that the main problems seemed to be inadequate time at signalized intersections; lack of complete understanding of how to use Metro's pedestrian crosswalks; and insufficient knowledge of the motorist's and the automobile's limitations.

Two types of personal contact campaigns with senior citizens were tried. One was inviting seniors to a rally at a central point. The program at the rally consisted of entertainment by local personalities, lunch, a safety presentation and discussion with a prize draw at the conclusion. Two of these were tried, each attracting over 600 people.

Following these experimental rallies, their effectiveness and per capita cost factors were studied. It was clear there were heavy negative aspects such as:

- too much staff time required to organize each rally;
- too many volunteers needed at each rally to make them practical on a frequent basis;
- survey of attendees indicated entertainment and prospect of a day's outing was a prime motive for attending;
- high per capita cost;
- with such a large audience, real personal rapport was not possible between attendees and speakers;

• a large segment of the senior citizen population said they could not attend because the travel distance was too great.

At the same time that experimentation was going on with the rallies, we were trying visits by experienced speakers at senior citizen club meetings. To carry out this aspect of the experiment, we were fortunate in securing the services of two very competent and active retired safety specialists who were happy to be compensated on a modest per diem arrangement. At the outset, two basic presentations of approximately 45 minutes' duration were worked out, one using film



as the visual aid, the other using slides. The film-slide portion of the presentation took about 12 minutes. The remaining 30 minutes was devoted to telling the audience about the specific pedestrian problems in Metro Toronto; the best ways for seniors to use signalized and pedestrian crosswalks; the danger of such hazards as weather and darkness; and the drivers' problems.

After several field trials, the presentation was refined. Each lecturer was encouraged to adjust his format until he felt com-

fortable with it and was satisfied with the impact.

The presentations to individual clubs provide many pluses:

- the per capita cost is very low;
- staff time required to administer and solicit engagements is minimal;
- senior citizen clubs are eager to welcome a feature for a meeting;
- an excellent mailing list of seniors' clubs is maintained by Metro Social Services Bureau;
- there are about 300 senior

citizen clubs in Metro that hold regularly scheduled meetings;

• the clubs generally serve a neighborhood — consequently travel is not a problem.

Having carried out the tests of the two methods and analyzed all factors with the emphasis on impact, we were ready to go full out with club engagements.

REACHING THE TARGET

The most productive method of soliciting engagements has been through mailings advising of the program, at about three-month intervals, to all seniors clubs. We

Blue Cross program may minimize need for use of hospitals

During the thirties, due to the inability of many families to pay for the cost of hospital treatment, thousands of people were forced to wait until treatment became, literally, a matter of life and death.

Blue Cross changed that when it launched its prepaid hospital care program in Ontario. The non-profit, non-government organization came into operation in 1941 to assist people to meet hospital bills, and provide hospitals a source from which to recoup their costs. Today Blue Cross continues to offer health programs to individuals and employee groups for dental, drug and a wide range of extended health care benefits which sup-

plement basic government-sponsored health coverage — including the payment of almost 30 million dollars last year to hospitals for use of semi-private accommodation by Blue Cross subscribers.

Paradoxically, Ontario Blue Cross in recent years has also been conducting a campaign which, if it worked to the ultimate degree, would result in reduced need for hospitals.

Impossible? Maybe so. But what is wrong with a program geared to making everyone so fit that hospitals become almost redundant? The ancient Chinese — not Ontario Blue Cross — were the originators of the preventive medicine idea. Hundreds of years

ago the Chinese only paid their doctors when they were fit. When they became ill they stopped paying their physician. His job was to prevent rather than cure sickness.

Walter Cannon, director of Blue Cross in Ontario recently commented that "one of the more significant changes in the health field in recent years has been the increasing awareness of the need for preventive health care. At Blue Cross, our effort in this regard has centred on the production and distribution of publications dealing with everything from nutrition and fitness to mental health and stress; from raising the modern baby to coping with growing old. The increasing acceptance of this health education program across Canada, has been most gratifying."

The most recent publication issued by Ontario Blue Cross in the public interest is a 100 page illustrated book entitled "Fit for Fun" by Swedish author Karl Gullers.

"Fit for Fun" gives the Swedish approach to keeping in shape. It opens with the question: A Swedish male heart ticks 5.3 years longer than its Canadian counterpart. "Why?" It then outlines a practical, common-sense approach to exercise and eating.

Other publications offered free of charge by Ontario Blue Cross in the interest of modern preventive health are Stress, Food & Fitness, The Alcoholic, Generation In the Middle, Drug Abuse and Childhood. A copy of these books can be obtained by writing Public Relations Department, Ontario Blue Cross, 150 Ferrand Drive, Don Mills, Ontario, M3C 1H6.

are now finding that an increasing percentage of bookings is developing by word-of-mouth.

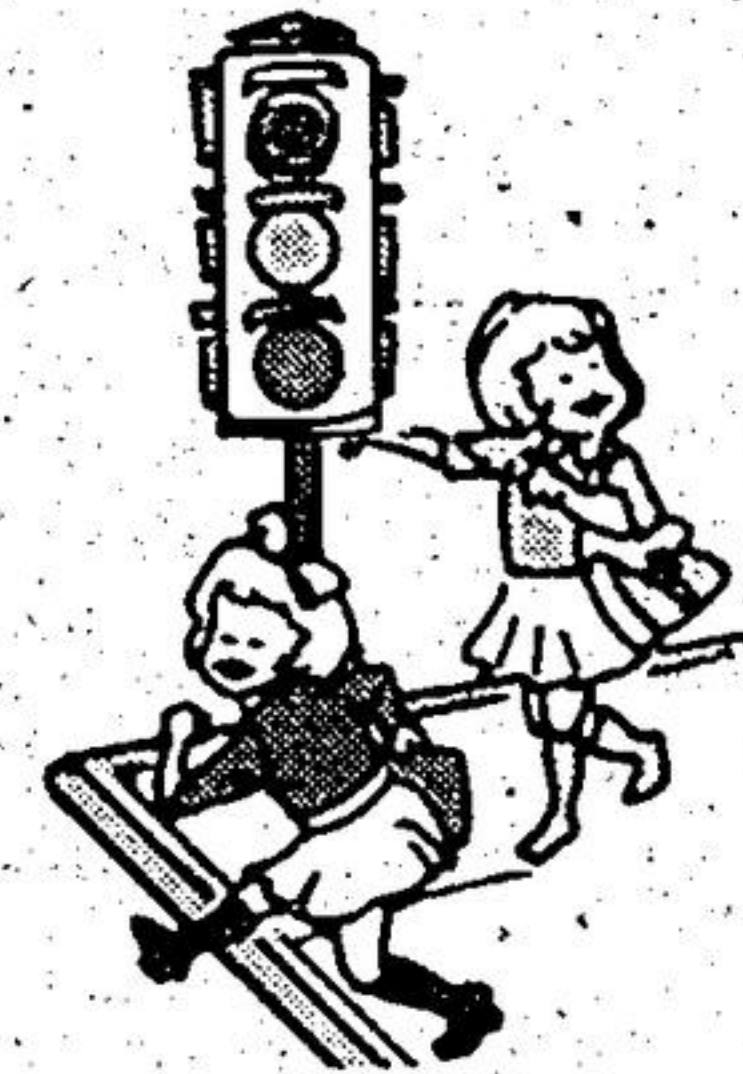
We recognized the fact that any successful campaign must have supporting elements.

• A pedestrian safety pamphlet was produced. It is distributed at all meetings and directed to more than 15,000 senior citizen dwellings that are administered by government housing agencies.

• Two pedestrian safety TV spots were commissioned and distributed to all local TV and cable outlets. (Our research showed that senior citizens depend heavily on TV for entertainment and information.)

• Regular press releases were issued pointing out the problem and reporting improved results as attained. They received excellent use.

• In the months of early darkness, reflective dangle tags were distributed at each meeting.



• 300,000 quiz placemats were distributed by the Metro Restaurant Association pointing out the motorists' responsibilities for pedestrian safety.

During 1976, 125 presentations were made to senior citizen clubs, reaching a total audience of 7,000 seniors. We distributed 25,000 pedestrian safety pamphlets; 5,000 reflective dangle tags; and 5,000 "Lady Take Care" pamphlets. Extensive exposure was given to TV spots. There was excellent public reaction to the project. As a result, the number of pedestrians aged 65 or over killed during 1976 was 10-14 less than were killed in 1975.

This project will be continued and broadened, and efforts will be made to stimulate user interest. The pedestrian aspect is constantly being updated to meet changing conditions. The growth and membership turnover of senior citizen clubs is sufficiently high to make more than one visit per year practical. To stimulate bookings and attendance, the travel and hospitality industry have made draw prizes available for all attendees. One of the prizes drawn at year-end was a one-



week, all-expense paid trip to the Bahamas for two. Similar prizes have been offered for 1978.

A second program is now operating. It attacks another Metro senior citizen problem — deaths and injuries from accidental residential fires. This target too will be hit with printed and media material. The program will be used primarily for second visits to clubs. Metro Safety Council's aim through 1978 is to maintain our current momentum and to try and stabilize the gains made. We will take similar steps in dealing with other danger areas in which a disproportionate percentage of citizens in a particular category are victims.



"Another case of 'Coconut Concussion' — I hope he's covered by the Blue Cross 'Health Plan While Outside Canada!'"