A review of the injury prevention workforce in Western Australia

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www.injurymatters.org.au
Injury Matters acknowledges the Australian Aboriginal and Torres Strait Islander peoples as the first inhabitants of the nation and the traditional custodians of the lands where we live, learn and work.

Our Reconciliation Action Plan can be found at www.injurymatters.org.au

Artwork: “Standing Strong” by Nerolie Bynder Blurton
Know Injury

Know Injury is a state-wide program which aims to enhance the capacity of injury prevention practitioners and organisations to deliver quality injury prevention activities.

Know · Learn · Connect
Introduction

>3 Western Australians die each day from injuries

TOP THREE FATAL INJURIES were falls (455 fatalities), self-harm (339 fatalities) and transport (191 fatalities)

THE TOTAL COST OF INJURY EVENTS WAS $9.6 BILLION

Epidemiology Branch. Overview of the burden of disease in Western Australia 2011 #1. (Department of Health WA, 2016).
Purpose

To review the scope of the current injury prevention workforce in WA, the challenges they face and to inform industry needs.
Methods

Phase 1

Survey

- Assess scope and characteristics of injury prevention and/or safety promotion workforce.

Phase 2

Interviews

- Understanding of barriers, enablers, perceptions
Methods

Phase 1

Participants & Procedure
• Based in WA and/or running a program in WA
• Injury Matters database & desktop review of sector
• 715 surveys distributed with snowball data collection
• Ethics approval was obtained from Curtin University Human Research Ethics Committee (RDHS-70-15) and Sir Charles Gairdner Hospital Human Research Ethics Committee (2016-062).
Methods

Phase 1

Survey Tool

• Focus group tested with sector (n=5)
• Objectives:
  o Training and qualification; Current role and organisation;
  o Current injury issues in role; Community injury issues;
  o Future needs
Results

Phase 1: Response

Total\n$n = 230$

- Identified within injury prevention workforce\n  $n = 190$
- Did not identify within injury prevention workforce\n  $n = 40$

Did not identify:
- “Neither my role or organisation is part of the sector” (5.7%)
- “But my organisation does work in the sector” (6.5%)
- “But a specific area of injury is part of my role” (5.2%)
Results

Phase 1: Demographics

- 82% female (n = 155)
- 66.1% were aged 40 years or older (n = 125)
- 82.1% have a tertiary degree (n = 115)
- 31.9% have worked in the sector for 5-10 years (n = 51)
- 55.6% work full time (n = 89)
- 41.9% (n = 67) spend a total of one day per week working in injury prevention or safety promotion
# Results

## Phase 1: Organisation

<table>
<thead>
<tr>
<th>Organisation Type</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-government organisation</td>
<td>40</td>
<td>25.3</td>
</tr>
<tr>
<td>State government</td>
<td>31</td>
<td>19.6</td>
</tr>
<tr>
<td>Hospital/Medical</td>
<td>30</td>
<td>19.0</td>
</tr>
<tr>
<td>Local government</td>
<td>28</td>
<td>17.7</td>
</tr>
<tr>
<td>Tertiary Institution / Research</td>
<td>12</td>
<td>7.6</td>
</tr>
<tr>
<td>Private</td>
<td>9</td>
<td>5.7</td>
</tr>
<tr>
<td>Emergency services</td>
<td>1</td>
<td>0.6</td>
</tr>
</tbody>
</table>

$n = 158$
## Results

### Phase 1: Injury areas

<table>
<thead>
<tr>
<th>Injury Area</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Falls prevention</td>
<td>99</td>
<td>49.7</td>
</tr>
<tr>
<td>Alcohol and other drugs</td>
<td>92</td>
<td>46.2</td>
</tr>
<tr>
<td>General injury</td>
<td>84</td>
<td>42.2</td>
</tr>
<tr>
<td>Community safety</td>
<td>83</td>
<td>41.7</td>
</tr>
<tr>
<td>Occupational health and safety</td>
<td>68</td>
<td>34.2</td>
</tr>
<tr>
<td>On-road vehicles</td>
<td>63</td>
<td>31.7</td>
</tr>
<tr>
<td>Suicide and self-harm</td>
<td>58</td>
<td>29.1</td>
</tr>
<tr>
<td>Trauma services</td>
<td>52</td>
<td>26.1</td>
</tr>
<tr>
<td>Child safety</td>
<td>51</td>
<td>25.6</td>
</tr>
<tr>
<td>Counselling services</td>
<td>45</td>
<td>22.6</td>
</tr>
<tr>
<td>Sport and recreation</td>
<td>43</td>
<td>21.6</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>41</td>
<td>20.6</td>
</tr>
<tr>
<td>Burns and scalds</td>
<td>39</td>
<td>19.6</td>
</tr>
<tr>
<td>Drowning prevention</td>
<td>37</td>
<td>18.6</td>
</tr>
<tr>
<td>Interpersonal violence</td>
<td>35</td>
<td>17.6</td>
</tr>
<tr>
<td>Off-road vehicles (quad bikes and all terrain)</td>
<td>29</td>
<td>14.6</td>
</tr>
<tr>
<td>FASD</td>
<td>24</td>
<td>12.1</td>
</tr>
<tr>
<td>Unintentional poisoning</td>
<td>22</td>
<td>11.1</td>
</tr>
<tr>
<td>Farm safety</td>
<td>17</td>
<td>8.5</td>
</tr>
<tr>
<td>Other</td>
<td>14</td>
<td>7.0</td>
</tr>
</tbody>
</table>

Participants were able to select more than 1 response
### Phase 1: Work type

<table>
<thead>
<tr>
<th>Category</th>
<th>Number (n = 160)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education &amp; training</td>
<td>118</td>
<td>73.8</td>
</tr>
<tr>
<td>Community engagement</td>
<td>92</td>
<td>57.5</td>
</tr>
<tr>
<td>Program planning and implementations</td>
<td>88</td>
<td>55.0</td>
</tr>
<tr>
<td>Data collection and analysis</td>
<td>82</td>
<td>51.3</td>
</tr>
<tr>
<td>Evaluation of programs or interventions</td>
<td>76</td>
<td>47.5</td>
</tr>
<tr>
<td>Communications and/or media</td>
<td>70</td>
<td>43.8</td>
</tr>
<tr>
<td>Health and wellbeing</td>
<td>68</td>
<td>42.5</td>
</tr>
<tr>
<td>Advocacy</td>
<td>63</td>
<td>39.4</td>
</tr>
<tr>
<td>Research</td>
<td>51</td>
<td>31.9</td>
</tr>
<tr>
<td>Secure and manage funds</td>
<td>36</td>
<td>22.5</td>
</tr>
<tr>
<td>Public policy</td>
<td>35</td>
<td>21.9</td>
</tr>
</tbody>
</table>

Participants were able to select more than 1 response
Results

Phase 1: Community issues

**Specific Injury Areas:**
Alcohol and other drugs, road trauma (on and off road, cycling, pedestrian), falls prevention, suicide and intentional self-harm, violence & mental health

**Risk factors**
Low levels of awareness and understanding of injury risk, lack of community support, specific risks (driving fatigue, overmedication, seatbelt use, peer pressure)

**Larger systemic**
Ineffective treatment for health, lack of services, budget cuts and limited resources, need for increased public awareness, long waitlists for services, limited community engagement
Results

Phase 1: Injury role challenges

- **Internal organisational:** Limited resources & staffing
- **Community issues:** Lack of knowledge, engagement and awareness
- **External systemic:** Lack of funding/policy to support work
- **Sector awareness:** Low understanding of injury prevention & collective advocacy
- **Topic awareness:** Low topic awareness
Phase 2

Participants & Procedure

• 12 participants across sectors:
  o Local government
  o State government
  o Non-government associations
  o Corporate
Methods

Phase 2

Interview Schedule
- Participant's role and injury prevention scope
- Barriers and enablers to deliver injury prevention activities
- Perceptions of injury prevention and safety promotion workforce profile
- Future needs
Phase 2: Issues for the community

‘It’s just a huge area and there are so many different risk factors in injury prevention that you can work on. And I think the understanding of injury prevention is not that much around the general public …’

(state government)

‘Sometimes safety is saying what you do after an injury, the emergency room, and not the injury prevention.’

(non-government organisation)
Results

Phase 2: Issues for working role

**Funding:** ‘The funding is an issue, sometimes, because certain things that are necessary may not always get funded.’ (local government)

**Community:** ‘I remember when they had a fatality of a young person and all of a sudden, they want to pay all of the attention to that. It ends up going sort of more toward [re]action than injury prevention.’ (LG)

**Identity:** ‘Anything that would take the word Injury out. So, injury, if you say injury to anybody you think of a broken bone, or a cut knee, or you know going to, having to go to the hospital to get fixed up, you don’t think of suicide.” (LG)

**Identity:** Their role could be in prevention because perhaps they're a clinician, or a policeman, or the Shire, for instance. They don't actually make the link, so you've got to help make those links for them.’ (State Gov’t)
Results

Phase 2: Future

1. Raise sector profile
2. Professional development
3. Region focused evidence, data and programs
4. Strategic direction
Discussion

- Identity and classification
- Professional development
- Advocacy and workforce planning
Dissemination
Strengths & Limitations

- First review in Western Australia
- Built on previous attempts to measure
- Low response rate and limited survey sample
- Snowball sampling
Pushing the Boundaries

Initial audit of the workforce in WA

Influenced program design
Injury Matters is able to continue to make a difference in the Western Australian community through funding obtained from the state government, donations and income generated through our programs and services.