

## Form A 書類 A

### 申請書及び申請書・現地審査チェックリスト

The Form A will soon be available for on-line use.

チェックリストは、2部から構成される。申請コミュニティがコラム1に記入し、審査員がコラム2に記入する

以下のコラム1の情報が申請書となる。ゆえに、すべての項目について詳細について記入すること

コラム1	コラム2
コミュニティ記載欄	審査員記載欄
セクション A コミュニティの概要	
<p>A.1 簡潔にコミュニティ及びその歴史的発展について記載すること</p> <p>栄区は、日本の中ほどに位置し、東京駅からは鉄道を利用して約50分の距離にあります。面積は18.55km、人口は約12万5千人で、現在も区の東部に大規模で良好な自然が残る、緑豊かな街です。区の中央をシンボルリバー・いたち川が東西に流れています。</p> <p>1900年代前半までは平地のほとんどが田畑でしたが、1960～70年代の大規模な宅地開発により、人口が急増し、今日のような住宅街に変貌しました。</p> <p>また、この地域には約2万年前から人が住んでいた形跡があり、鎌倉時代には軍事的に重要な役割を果たしていたと推測され、鎌倉道や遺跡が残されています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p>A.2 安全に関する全体的な方策、抱負・目標、コミュニティの取組について記載すること</p> <p>○栄区区政運営方針      毎年度、栄区役所が策定する区政運営の方針です。2012年度の基本目標は、“みんなの心ひとつに” “みんなの力ひとつに” “すべては栄区のために” です。</p> <p>目標達成に向けた6つの施策「災害に強いまちづくりの推進」「子育て支援の充実強化」「暮らしの中の安全、安心の拡大」「まちの活性化の展開」「豊かな水・緑の保全と環境行動」「地域のまちづくりの推進」で構成されています。</p> <p>セーフコミュニティ活動は、これらの施策をつなぐ重要な柱に位置づけられています。</p> <p>○栄区セーフコミュニティ活動を推進するための行動計画      2012年5月、地域コミュニティの課題とそれを解決するための取組についてまとめた、5か年の行動計画を策定しました。栄区の喫緊の課題である7つのテーマ（こどもの安全、高齢者の安全、交通安全、スポーツ・余暇の安全、自殺予防、災害安全、児童虐待の防止）で構成されています。</p> <p>具体的なコミュニティの取組は、この中に記載されています。主として、地域住民と関係機関、行政の協働の取組をとりあげているのが特徴です。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>A.3 首長（および同等の立場）及び執行委員会はどのように関わっているか？だが、分野横断的なグループをまとめているか。</p> <p>栄区長が会長となり、栄区セーフコミュニティ推進協議会を設置しています。この協議会は地域住民、警察、消防、関係機関及びテーマごとに設置されている8つの分科会の代表で構成され、セーフコミュニティ活動を横断的にとりまとめています。事務局は、栄区役所総務課においています。</p> <p>なお日本には、執行委員会に該当する組織はありません。</p>	<p>記述は十分か？</p> <p>首長は関わっているか？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ 執行委員会は関わっているか？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ どこが分野横断的なグループをまとめているか？</p>

#### A.4 コミュニティにおけるリスクの概観を示す

根拠となるデータから明らかとなったリスクの概観は次のとおりです。

##### ①こども

- ・乳幼児は住宅での事故と転倒・転落の割合が高く、年齢があがるにつれ、道路での事故と交通事故の割合が高くなる。

##### ②高齢者

- ・溺死・溺水の件数が増加している。
- ・住宅での転倒・転落が多い。
- ・高齢化率が市内で最も高い
- ・高齢者虐待把握件数が増加している。

##### ③交通

- ・事故件数は横ばい。
- ・0～14歳では自転車、15～24歳ではオートバイの事故が多い。
- ・こどもと高齢者の死傷者の割合がやや高い。

##### ④スポーツ・余暇

- ・15～24歳の事故発生率が高く、男性が8割を占める。
- ・頭部の負傷が多い。

##### ⑤自殺

- ・15～39歳までの死因の第1位となっている。
- ・女性の割合が高く、性別により自損行為の方法が異なる。

##### ⑥災害

- ・地域防災拠点の場所を知っている区民は6割弱で、防災訓練に参加した区民は5割弱にとどまっている。
- ・要援護者の避難を支援する取組を始めた自治会町内会は5割弱にとどまっている。

##### ⑦児童虐待

- ・子育ての不安を訴える母親等からの相談が増加している。
- ・児童虐待把握件数が増加している。

リスクの外観は十分に記述されているか？

はい

いいえ

「いいえ」の場合、不十分な点は何か：

セクション B コミュニティの構造	
<p><b>B.1. 人口動態構造<sup>9</sup>について説明する</b></p> <ul style="list-style-type: none"> <li>● 人口 <p>人口は約 12 万 5 千人で、3 年連続で減少しており、2050 年には約 9 万人まで減少すると見込まれています。出生数は 1,000 人前後で、ほぼ横ばいです。高齢化率は 24.3% で、全国平均の 23% を上回っています。</p> </li> <li>● 外国人 <p>外国人登録者数は約 1,000 人で、国籍の上位は、中国 43%、韓国・朝鮮 25% となっています。</p> </li> <li>● 人口動態 <p>転入・転出数はともに減少傾向にあります。また、昼夜間人口比率は 73.5 で、昼間は人口が区外に流出しています。</p> </li> <li>● 居住期間 <p>1960～70 年代に転入した世代が定住しており、移動者の居住期間の割合は、20 年以上が 30% と最も高くなっています。</p> </li> <li>● 交通機関 <p>鉄道駅は区内に 1 つのみで、多数の路線があるバスが区民の身近な交通機関となっています。</p> </li> <li>● 産業 <p>区内の産業は、事業所数ではサービス業、卸売・小売の割合がともに 22% で最多となっていますが、区の西部に大規模な工場が複数あるため、従業者数では製造業、卸売・小売、医療・福祉の割合がともに 18% で最多となっています。完全失業率は 5.7% で、全国平均の 6.4% より低くなっていますが、労働力率は 54% で、全国平均の 61% より低くなっています。</p> </li> <li>● 教育 <p>区内には幼稚園 12 園、保育園 10 園、小学校 14 校、中学校 8 校、高等学校 4 校、特別支援学校 1 校があります。</p> </li> <li>● 医療 <p>区内には病院が 2、一般診療所が 69、歯科診療所が 59 あります。病床数は一般病床 510 床、療養病床 18 床、精神病床 106 床です。区のほぼ中心に、救急指定病院があります。</p> </li> </ul>	<p>人口動態構造とリスクについて十分に記述されているか？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p>● 福祉      障害者手帳交付数では、身体障害者約 3,000 人、知的障害者 742 人、精神障害者 723 人となっています。      また、生活保護率は 11.2% ですが、近年は増加傾向にあります。</p> <p>● 犯罪      区内の刑法犯発生件数は減少傾向にあり、人口千人対でも 5.6 と、全国 11.6 より低くなっています。</p>	
<p><b>B.2. 現在の安全向上・障害予防（の取り組み）および今後の計画について説明する</b></p> <p>栄区では、「セーフコミュニティ活動を推進するための行動計画 2013～2018 年度」を策定し、その中で 7 つの重点課題（こどもの安全、高齢者の安全、交通安全、スポーツ・余暇の安全、自殺予防、災害安全、児童虐待の防止）を設定しています。</p> <p>この中で、現在の取組（現況）と 2013 年度の目標値、中期目標（2018 年度）、長期目標（おおむね 20 年後）を定めています。取組ごとに、目標に対する達成状況について評価し、次年度の取組に反映させます。また、行動計画は 5 年ごとに見直しを行います。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.3 コミュニティの地方政治家による継続的な傷害予防への支援について記載する。また、プログラムのどのような部分がより大きな単位の地方政治によって担当・支援されているか</b></p> <p>栄区から選出された県議会議員、市議会議員が出席する栄区議員団会議において、定期的にセーフコミュニティ活動の進捗状況の報告を行い、ご意見をいただいています。</p> <p>また、栄区内に事務所を持つ国や県、横浜市の行政機関（労働基準監督署、警察学校、県治水事務所、税務署など）の長による定例会があり、継続的に安全、安心に関する情報交換を行うとともに、セーフコミュニティ活動にもご協力いただいています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p><b>B.4</b> すでに策定された安全向上・障害予防の取組を推進するための方策（戦略）について説明する</p> <p>2012年に策定した「栄区セーフコミュニティ活動を推進するための行動計画」では、安全向上・障害予防の取組を実現するための戦略として、地域コミュニティの活力と行政の総合力を掲げています。</p> <p>栄区では、従来から、高い加入率（84.9%）を誇る自治会町内会を中心に、福祉、防災、交通安全など様々な取組が活発に行われてきました。一方、区役所は保健所、福祉事務所、公園・道路・河川の整備・管理権限を持ち、消防署長が区役所兼務になっているなど、安全、安心に関する業務を総合的に行える体制になっています。</p> <p>こうした強みを活かし、さらにセーフコミュニティの仕組みを導入することで、地域コミュニティの課題を解決するとともに、安全、安心のまちづくりをさらに進めます。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.5</b> だれ（どこ）が安全向上・傷害予防プログラムの責任者か、そして地域の政治及び行政組織においてどこに位置しているか。</p> <p>栄区長 尾仲 富士夫</p> <p>※ 栄区は横浜市を構成する18の行政区の一つで、議会はなく、区長は市職員の中から横浜市長が任命します。（「日本の地方自治の仕組み」参照）</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.6</b> 安全向上・傷害予防プログラムをリードしているユニット（部署等）はどこか</p> <p>栄区役所 総務部 総務課</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.7</b> セーフコミュニティは、継続的なプログラムかプロジェクトか？</p> <p>栄区のセーフコミュニティ活動は、栄区役所が事務的な機能を担い、地域住民、警察署、消防署、関係機関と連携して取組を進める継続的なプログラムです。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p><b>B.8 全コミュニティをカバーしている地方政治家によって具体的な目標は設定されているか？それは、だれか？</b></p> <p>横浜市長の基で策定された「横浜市中期4か年計画 2010～2013」において、全市をカバーした目標が設定されています。その中で、栄区のセーフコミュニティ活動は「安心して暮らせるまち」の中に記載されています。「栄区セーフコミュニティ活動を推進するための行動計画」は、テーマごとの取組や目標値について、この計画と整合性を持って作成されています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.9 その目標を導入したのはだれか？</b></p> <p>横浜市長 林 文子</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B.10 どのようにその SC 目標は評価され、だれにその結果が報告されるか？</b></p> <p>「横浜市中期4か年計画」は市民に公表され、市民意見を反映させて策定されています。また、各施策や各取組で掲げた指標の達成状況についても市民に公表されています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>B11. 安全向上のために経済的な動機は活用されているか？使われている場合は、どのように？</b></p> <p>高齢化が急速に進む栄区では、要介護認定率の抑制は大きな課題です。高齢者の転倒予防・介護予防プログラムの実践者を拡大することにより、要介護認定率の上昇を抑制し、介護保険料の伸びを抑えることが期待されています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p><b>12.地域レベルでの安全向上に関する規定はあるか？ある場合は説明を。</b></p> <p>栄区独自に、「栄区セーフコミュニティ活動を推進するための行動計画」を策定しています。</p> <p>行動計画は、“規定”ではありませんが、防災訓練への参加や自殺予防への協力など、安全向上のために、区民がとるべき行動を明文化しています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

セクションC 【指標1】	
<p>1.1 安全向上・傷害予防プログラムの管理・調整・企画を担う分野横断的なグループについて述べよ。</p> <p>栄区におけるセーフコミュニティ活動を横断的に行うため、次のとおり、推進体制をつくっています。</p> <p>① 栄区セーフコミュニティ推進協議会 目的：セーフコミュニティの取組を総合的に推進 構成：区長、連合町内会長、警察署長、消防署長、関係団体の長、分科会座長 計24名</p> <p>② 分科会 目的：7つのテーマごとの取組の検討 構成：テーマに関連する団体の代表</p> <p>③ 傷害サーベイランス分科会 目的：データ分析、モニタリング、各取組の評価 構成：学識経験者5名</p> <p>④ セーフコミュニティ推進会議 目的：区役所内の連絡調整・情報共有 構成：区役所の課長級以上の全職員</p> <p>⑤ 栄区セーフコミュニティ活動に関する連絡会議 目的：市役所内の連絡調整・情報共有 構成：市役所の関係部局の課長</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>1.2 当該地域の政府および保健分野はどのように安全向上・傷害予防において協働しているか述べよ。</p> <p>区役所は、推進協議会の事務局を担っています。また、区役所に属する福祉保健センター（保健所、福祉事務所の機能を統合したもの）が、保健分野に関する分科会の事務局を担っています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>



<p>1.3 赤十字、退職者組織、スポーツ組織、保護者学校組織などのNGOが安全向上・傷害予防に関わっているか</p> <p>推進協議会・分科会には、シニアクラブ、スポーツ団体、PTA連絡協議会など、様々な団体の代表が委員として参加しています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>1.4 一般市民にハイリスクの環境や状況について知らせる仕組みがあるか？</p> <p>区役所の広報紙（毎月発行）は全戸配布され、区内におけるリスクについて知らせています。また、タウン誌やケーブルテレビとも連携し、全区民に向けた情報提供を行っています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>1.5 どのように取組(work)が持続可能な方法で組織化(体系化)されているかを述べよ</p> <p>セーフコミュニティ推進体制として、推進協議会及び分科会の事務局を区役所に置き、検討会の開催や経費を負担することで、取組の継続性を担保しています。</p> <p>また、各取組は「栄区セーフコミュニティ活動を推進するための行動計画」に明文化され、各事務局がその進ちょく管理を行っています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

セクション D 【指標 2】																																		
<p>2.1 下記の領域における安全向上・傷害予防に関する継続的な取り組みについて記載すること。また、特定の NGO はじめ各分野がどのようにかかわっているかを述べよ。</p> <p>1.交通安全 2.家庭の安全および余暇時間の安全 3.子どもの安全 4.高齢者の安全 5.労働安全 6.暴力予防 7.自殺予防 8.防災および災害対策 9.公共（場）の安全 10.病院の安全 11.スポーツの安全 12.水の安全 13.学校の安全（セーフスクール）</p> <p>これらのうち、コミュニティではなく、他の組織や機関によって担われているものはあるか？それについて、コミュニティはどのようにかかわっているか？</p> <p>栄区における主な取組は次のとおりです。</p> <p>1 交通安全</p> <table border="1"> <thead> <tr> <th>取組</th> <th>地域</th> <th>行政</th> </tr> </thead> <tbody> <tr> <td>交通安全マップの作成・配布</td> <td>○</td> <td>○</td> </tr> <tr> <td>交通安全キャンペーンの実施</td> <td>○</td> <td>○</td> </tr> <tr> <td>交通安全教室の開催</td> <td>○</td> <td>○</td> </tr> <tr> <td>チャイルドシート講習会の開催</td> <td>○</td> <td>○</td> </tr> <tr> <td>道路環境の整備</td> <td></td> <td>○</td> </tr> </tbody> </table> <p>2.家庭の安全および余暇時間の安全</p> <table border="1"> <thead> <tr> <th>取組</th> <th>地域</th> <th>行政</th> </tr> </thead> <tbody> <tr> <td>こどもの事故予防リーフレット配布</td> <td></td> <td>○</td> </tr> <tr> <td>危険予知トレーニングの実施</td> <td>○</td> <td></td> </tr> <tr> <td>防犯パトロールの実施</td> <td>○</td> <td>○</td> </tr> <tr> <td>公園遊具等の管理・点検</td> <td></td> <td>○</td> </tr> </tbody> </table>	取組	地域	行政	交通安全マップの作成・配布	○	○	交通安全キャンペーンの実施	○	○	交通安全教室の開催	○	○	チャイルドシート講習会の開催	○	○	道路環境の整備		○	取組	地域	行政	こどもの事故予防リーフレット配布		○	危険予知トレーニングの実施	○		防犯パトロールの実施	○	○	公園遊具等の管理・点検		○	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
取組	地域	行政																																
交通安全マップの作成・配布	○	○																																
交通安全キャンペーンの実施	○	○																																
交通安全教室の開催	○	○																																
チャイルドシート講習会の開催	○	○																																
道路環境の整備		○																																
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防犯パトロールの実施	○	○																																
公園遊具等の管理・点検		○																																

3.子どもの安全		
取組	地域	行政
地域住民による登下校時の見守り	○	○
こども 110 番の家の普及	○	○
校庭、園庭、公園の芝生化	○	○
公園遊具等の管理・点検		○
訪問運動指導の実施	○	○
危険予知トレーニングの実施	○	
4.高齢者の安全		
取組	地域	行政
転倒予防教室の開催	○	○
認知症サポーターの養成	○	○
地域の見守りネットワーク	○	○
5.労働安全		
取組	地域	行政
労働監視		○
6.暴力予防		
取組	地域	行政
こんにちは赤ちゃん訪問	○	○
地域子育て支援拠点の運営		○
児童虐待防止連絡会の開催	○	○
相談窓口の設置・運営		○
7.自殺予防		
取組	地域	行政
啓発活動（リーフレット作成・配布）	○	○
ゲートキーパー育成	○	○

8.防災および災害対策		
取組	地域	行政
防災訓練の実施	○	○
防災教室・救命講習の開催		○
ハザードマップ作成・配布		○
消防団、自衛消防隊の組織	○	○
防災ライセンスリーダー育成	○	○
情報発信（Eメール、ツイッターなど）		○
9.公共（場）の安全		
取組	地域	行政
公園・道路の整備・管理	○	○
10.病院の安全		
取組	地域	行政
医療監視		○
11.スポーツの安全		
取組	地域	行政
事故・けが予防講習会	○	
12.水の安全		
取組	地域	行政
河川の整備・管理		○
水害対策訓練	○	○
着衣水泳教室	○	○
13.学校の安全（セーフスクール）		
取組	地域	行政
地域住民による登下校時の見守り【再掲】	○	○
校庭の芝生化【再掲】	○	○
体力向上プログラム		○
防災教室【再掲】		○
交通安全教室【再掲】	○	○
サイバー教室	○	○

<p>2.2 両性、全年齢層、全環境・状況に関する取り組みを記載すること。「転倒予防」などすべての取組について記載し、どのようにその取り組みが行われているかを述べよ</p> <p>栄区では、ほぼ全ての性別、年齢、環境をカバーした予防対策が行われています。（詳細は報告書P〇～〇）</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
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セクションE 【指標3】	
<p>3.1 全てのハイリスクにあるグループを把握し、安全を向上するためにどのような対策を講じたのかを述べよ。ハイリスクにあるグループとは、下記のようなグループがよく挙げられる。</p> <ol style="list-style-type: none"> <li>1.先住民</li> <li>2.低所得層</li> <li>3.コミュニティ（職場を含む）における少数（マイノリティ）集団</li> <li>4.犯罪被害や自傷を含む意図的要因による外傷のリスクにある人</li> <li>5.虐待をうける女性・男性・子ども</li> <li>6.精神的疾患、発達障害および他の障害を有する人</li> <li>7.安全でないスポーツ、余暇活動に参加している人</li> <li>8.ホームレス</li> <li>9.自然災害において外傷のハイリスクにある人</li> <li>10.特定の道路や交差点、水害被害想定地などハイリスクの環境の近くで生活したり働いたりしている人</li> <li>11.宗教、民族および性的なし好等によりハイリスクにある人</li> </ol> <p>栄区においては、下記のグループをハイリスクにある者としています。</p> <ol style="list-style-type: none"> <li>①虐待を受ける人（児童）</li> <li>②虐待を受ける人（高齢者）</li> <li>③自傷を含む意図的要因による外傷のリスクにある人</li> <li>④自然災害において外傷のハイリスクにある人</li> </ol> <p>また、主な対策は次のとおりです。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p>①虐待を受ける人（児童）</p> <ul style="list-style-type: none"> <li>○ よこはま子ども虐待ホットライン 養育者や子ども自身又はその周囲からの、虐待に関する通報・相談を受ける。</li> <li>○ 児童虐待防止連絡会 児童虐待の早期発見・対応のための見守り強化と関係機関の情報共有のための連絡会を開催する。</li> </ul> <p>②虐待を受ける人（高齢者）</p> <ul style="list-style-type: none"> <li>○ 地域の見守りネットワーク 虐待を含む、支援の必要な高齢者を早期発見し、支援を行う。</li> <li>○ 徘徊高齢者 SOS ネットワーク 認知症高齢者とその家族の支援を行う。</li> <li>○ 要援護高齢者を支援する実務者連絡会 虐待を含む、要援護高齢者を支援するため、介護保険事業者や医療機関等の実務者が連絡会を開催する。</li> </ul> <p>③自傷を含む意図的要因による外傷のリスクにある人</p> <ul style="list-style-type: none"> <li>○ 相談窓口の設置・運営・広報 こころの健康相談窓口の設置・運営と様々な相談機関の周知を行う。</li> <li>○ 生活支援センターの設置・運営 精神障害者の生活支援、相談及び地域交流活動により、精神障害者の自立、社会復帰を促進する。</li> <li>○ メンタルヘルス対策従事者によるネットワーク学習会 行政、企業、学校等のメンタルヘルス対策関係者や専門職による、事例検討や情報交換等の学習会を実施する。</li> </ul> <p>④自然災害において外傷のハイリスクにある人</p> <ul style="list-style-type: none"> <li>○ 災害時要援護者支援 地域における要援護者を把握し、発災時に要援護者が安全に避難できる体制を構築する。</li> </ul>	
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<p>3.2 ハイリスク環境の事例を挙げよ</p> <ol style="list-style-type: none"> <li>1.どのようにハイリスク環境を設定しているか述べよ</li> <li>2.優先的集団や環境について述べよ</li> <li>3.それらに対し、コミュニティでは特定のプログラムがあるか</li> <li>4.取組のタイムテーブルについて述べよ</li> <li>5.それらのグループは、それらの活動の予防的側面にかかわっているか</li> </ol> <p>現時点では、特定のハイリスク環境を設定していません。しかし、たとえば自殺者の多い場所として駅周辺をハイリスク環境とし、具体的な取組を行う必要があるかどうかなど、各分科会で検討しているところです。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
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セクション F【指標 4】	
<p>4.1 それぞれの年齢層、環境に対して行われた根拠に基づいた方策（戦略）/プログラムについて述べよ</p> <p>P〇をご覧ください。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>4.2 根拠に基づいた方策（戦略）を企画・実践するにあたって支援センター、認証センター及び他の学術的あるいは知識を有する組織との連絡体制を持っているか。それはどの組織か？どのような範囲においてか？ 注）当フォーラムの最後に根拠に基づいた介入に関する WHO のリンクを掲載している。</p> <p>2011 年 6 月、アジア認証センターから審査員を招聘し、栄区の取組を見ていただきました。そのときの講評に基づき、栄区の取組を進めています。</p> <p>その後は、日本の支援センターである一般社団法人日本セーフコミュニティ推進機構にサポートいただき、推進協議会や分科会にオブザーバーとしてご参加いただいたり、区内の様々な活動を見学していただいたりしています。</p> <p>また、傷害サーベイランス分科会は、5名の学識経験者で構成され、区民の事故・けが等に関する実態調査の実施や各取組の評価方法など、根拠に基づく方策の実践に向けた専門的なアドバイスをいただいています。座長は、医学博士の反町吉秀先生です。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

セクション G 【指標 5】	
<p>1 傷害予防の方策を決定するにあたって用いるデータは何か?例えば、外傷記録は病院、保健センター、歯科医院、学校、高齢者介護組織、そして警察等で記録されている。家庭調査も外傷やリスクのある環境・状況のデータ収集に活用できる。どのような方法が用いられているか?</p> <p>外傷データについては、次のデータを収集・分析しています。</p> <p>① 人口動態統計 国の法律に基づき、出生、死亡、婚姻、離婚及び死産の全数を対象とする調査です。全国との比較や、栄区における取組の長期の指標として活用します。</p> <p>② 救急搬送記録 横浜市消防局の統計です。 栄区では医療情報を収集することは難しいため、傷害データとして、救急搬送記録を使用します。特に、人口動態統計では記録されない運動競技、労働災害事故の状況を把握します。</p> <p>③ 区民の事故・けが等に関する実態調査 ヒヤリハットを含む傷害の状況や、傷害に関連する要因について把握することを目的に、2011～12年度、横浜市立大学医学部の協力により、栄区で独自に実施しました。  主な傷害や傷害の要因は、年齢により大きく異なるため、母子、児童・生徒、壮年期、高齢者と、対象ごとに調査項目や調査方法を変えているのが特徴です。</p> <p>④ 区民意識調査、区民アンケート 区民の日常生活における意識・行動の変化やニーズの把握を目的に実施しています。事故や傷害に焦点をあてた調査ではありませんが、防災に関する知識や行動の変化、近所とのつきあい、ボランティア活動への参加など、区民の意識の変化を追う指標として活用します。</p> <p>⑤ 警察統計 区内で発生した交通事故や犯罪統計などを収集・分析しています。</p>	<p>記述は十分か?</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か:</p>

<p>5.2 安全向上・傷害予防を推進するため、どのようにデータが提示されているか述べよ</p> <p>①人口動態統計は、国及び横浜市がデータを公表しています。②救急搬送記録は、生データを提供いただき、区役所総務課で集計しています。①及び②については、総務課が資料としてまとめ、傷害サーベイランス分科会及び各分科会に提供しています。</p> <p>③区民の事故・けが等に関する実態調査は、今後は総務課が主体となって実施します。（実施方法等は今後検討）</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>5.3 どのように傷害の原因、リスク、ハイリスクの環境に関して記録し、その知識を活用するかを述べよ。どのように継続的な進捗を記録するか？</p> <p>推進協議会及び傷害サーベイランス分科会の資料は、原則としてすべてホームページ上で公開しています。また、栄区役所で保管しています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

セクションH【指標6】	
<p>6.1 プログラムからの傾向や結果を追跡するため、どのように傷害データを分析するか。何がうまく機能していて、よい結果をもたらしているか？何を継続しようとして計画しているか？何を変更しなくてはならないか？</p> <p>5.1 に記載したデータを継続的に収集・分析し、経年的な変化を把握するとともに、課題ごとに分析を行います。</p> <p>2011～12 年度、横浜市立大学医学部にご協力いただき、区民の事故・けが等に関する実態調査を行いました。横浜市立大学医学部は、傷害サーベイランス分科会の委員でもあり、今後もデータ分析にご協力いただきます。</p> <p>その他の委員として、公共健康学、保健学、建築・都市計画、社会福祉学の専門家にご参加いただいております、必要に応じて、栄区独自の調査を実施します。</p>	<p>用いられた方法は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>6.2 プログラム評価の結果はどのように活用されているか述べよ</p> <p>個々の取組は、指標4に基づき、分科会ごとに自己評価を行い、その結果を次の取組に反映させます。</p> <p>また、傷害サーベイランス分科会は、取組全体の評価を行い、各分科会の自己評価に対して、専門的な視点から助言を行います。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>6.3 プログラムの結果による傷害パターン、傷害リスクに対する姿勢・行動・知識における変化を述べよ</p> <p>栄区がセーフコミュニティ活動の開始を宣言してから2年であり、プログラムがもたらす変化として、たとえば事故や自殺、虐待の減少といった結果はまだ表れていません。</p> <p>一方、これまで個々に活動していた団体が、セーフコミュニティ活動をきっかけに、分科会として研修会（P○参照）を実施するなど、横の連携が進んでいます。</p> <p>また“栄区はセーフコミュニティを目指しているのだから”という理由で、区民や行政職員が、今まで以上に熱心に取り組む姿勢が見られるようになってきました。その具体例として、スクールゾーンの臨時点検や（P○参照）、自殺予防の研修（P○参照）などがあげられます。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

セクション I 【指標 7】	
<p>7.1 どのように国内・国外の SC ネットワークに参加し、連携しているかを述べよ</p> <p>栄区は、国内外で行われた会議等に積極的に参加してきました。</p> <p>特に国内においては、認証を取得している自治体との情報交換や、同時期にセーフコミュニティ活動に取り組んだ自治体との学習会にも参加しています。</p> <p>また、国内のセーフコミュニティに取り組む他の自治体と「セーフコミュニティ自治体ネットワーク」を設置し、各種の情報交換を行っています。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>7.2 認証式典は、何等かの国際会議、その他国際的なセミナーやフォーラム、国内の交流と併せて行う予定か</p> <p>認証式典（調印式）は、2013 年 3 月に開催される栄区防災講演会と併せて行いたいと考えています。</p> <p>2013 年度中には、国際シンポジウムの開催を検討しています。</p>	
<p>7.3 どの認証コミュニティを招待する予定か</p> <p>すべての認証コミュニティを招待する予定です。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
<p>7.4 どの海外・国内の会議に参加してきたか</p> <p>海外</p> <p>2010. 3 第 19 回セーフコミュニティ国際会議（韓国／スウォン市）</p> <p>2011. 4 台湾セーフコミュニティ国際シンポジウム（台湾／台北市）</p> <p>2011. 9 第 20 回セーフコミュニティ国際会議（スウェーデン／ファールン）</p> <p>国内</p> <p>2010. 11 市民安心・安全フェスタ 2010in あつぎ（厚木市）</p> <p>2011. 11 全国セーフコミュニティ推進自治体ネットワーク会議設立総会（厚木市）</p> <p>2012. 5 長野県箕輪町セーフコミュニティ認証式典（箕輪町）</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>

<p>7.5 どの地域の SC ネットワークに加わる予定か(加わりたいか)？(アジア、ヨーロッパ、環太平洋、アフリカ、ラテンアメリカの地域ネットワークがある)</p> <p>アジア地域セーフコミュニティネットワークに参加する予定です。</p>	<p>記述は十分か？</p> <p><input type="checkbox"/> はい</p> <p><input type="checkbox"/> いいえ</p> <p>「いいえ」の場合、不十分な点は何か：</p>
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### 根拠に基づいた取組みに関する WHO のリンク

新指標 4（根拠に基づいた取組）に関連し、下記の WHO 出版物を参考にされたい [h Violence](#)

Prevention Evidence Base and Resources Violence prevention: the evidence

[http://www.who.int/violence\\_injury\\_prevention/violence/4th\\_milestones\\_meeting/publications/en/index.html](http://www.who.int/violence_injury_prevention/violence/4th_milestones_meeting/publications/en/index.html)

Child injury prevention: World report on child injury prevention

[http://whqlibdoc.who.int/publications/2008/9789241563574\\_eng.pdf](http://whqlibdoc.who.int/publications/2008/9789241563574_eng.pdf)

Road traffic injury prevention: World report on road traffic injury prevention

[http://www.who.int/violence\\_injury\\_prevention/publications/road\\_traffic/world\\_report/en/index.html](http://www.who.int/violence_injury_prevention/publications/road_traffic/world_report/en/index.html)

Seat-belts and child restraints: a road safety manual for decision-makers and practitioners

<http://www.who.int/roadsafety/projects/manuals/seatbelt/en/index.html>

Helmets: a road safety manual for decision-makers and practitioners

[http://www.who.int/roadsafety/projects/manuals/helmet\\_manual/en/index.html](http://www.who.int/roadsafety/projects/manuals/helmet_manual/en/index.html)

Drinking and driving – an international good practice manual

<http://www.who.int/roadsafety/projects/manuals/alcohol/en/index.html>

Speed management : A road safety manual for decision-makers and practitioners

[http://www.who.int/roadsafety/projects/manuals/speed\\_manual/en/index.html](http://www.who.int/roadsafety/projects/manuals/speed_manual/en/index.html)

## Form A

Application and checklist for the results of applications and site-visit(s)

Column 1	Column 2
Questions to be answered by the community	Questions to be answered by the certifiers
[Section A] Community Overview	
<p>A.1 Briefly describe the community and its historical development</p> <p>Sakae Ward is one of 18 administrative wards in Yokohama City. Located approximately in the middle of Japan, it is about 50 minutes by train from Tokyo Station. Sakae Ward has an area of 18.55km<sup>2</sup> and approximately 125,000 inhabitants. Overflowing with green, the ward has abundant nature in its eastern section. Our symbol river, the Itachi River, flows east to west through the ward.</p> <p>During the early 1900s, most of the plains were rice paddies. Population suddenly increased during the 1960s to 70s as large-scale housing areas were developed, resulting into today's residential area.</p> <p>Traces of human residence dating back about 20,000 years have been found in this area. It is thought that the area played an important military role during the Kamakura Era. The Kamakura Road and ruins are still found in the ward.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>A.2 Describe the strategy, ambitions, objectives and work in the community in regard to safety. It must be a higher level of safety than average for a community in the country or region.</p> <p>Yokohama City has several administratively-managed basic policies including the "Basic Concept" (20-year long-term vision), 4-year implementation plan "Interim 4-year Plan" and the annually enacted "Management Policy".</p> <p>Each wards formulates its Ward Municipal Administrative Management Policy" based on these concept and policies every fiscal year</p> <p>○Sakae Ward Municipal Administrative Management Policy</p> <p>Our basic target for FY2012 is "Uniting everyone's hearts", "Unifying everyone's power" and "All for Sakae Ward".</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>Six programs have been set to achieve this target: “Promotion of city planning to withstand disasters”, “Strengthening child care support”, “Increasing safety and security in daily lives”, “Development of city vitality”, “Preservation of rich water and greenery, and environmental activities”, and “Promotion of community city planning”.</p> <p>Our Safe Community activities are positioned as essential pillars that connect these programs.</p> <p>○Project plans for promoting Sakae Ward Safe Community Activities (Hereinafter, SC Activity Plan)</p> <p>In May 2012, we established the 5-year activity plan that summarizes the challenges of a regional community, and our activities to resolve those challenges. The plan is comprised of seven themes which are Sakae Ward’s urgent challenges: Safety for children, Promotion of health through sports, Prevention of traffic accidents, Child raising support and prevention of child abuse, Safety of senior citizens, Preparation for disasters, and Suicide prevention.</p> <p>Our actual community programs are listed in this document. The main programs feature an agency that interacts with community residence, and activities involving administrative cooperation.</p>	
<p>A.3 How are the mayor (or similar function of the community) and the executive committee involved? Who is chairing the cross-sector group?</p> <p>The Sakae Ward Safe Community Steering Committee, chaired by the Sakae Ward Director General, has been established. This committee’s members include the representatives of the community residents, police, fire station, related agencies and eight Taskforce Committees set for each theme. Our Safe Community activities are linked across sectors. The secretariat is located at the Sakae Ward Office General Affairs Section.</p>	<p>Are the descriptions sufficient? Is the mayor involved?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> no</p> <p>Is the executive committee involved?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> no</p> <p>Who is chairing the cross-sectional group? <input type="checkbox"/> .....</p>
<p>A.4 Describe the injury risk-panorama in the community.</p> <p>The following risks were identified by analyzing the community through data.</p>	<p>Is the risk-panorama sufficiently described?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>



A. Children

- Up to age 4, the place of accident occurrence is within the home. As the child's age increases, the rate of occurrence on the road increases.
- Up to age 4, the highest type of accident is tripping or falling. The rate of traffic accidents increases with an increase in child age.

[Challenge identified from data]

- Detailed prevention measures have not been set to correspond to age-based risks.

B. Senior citizens

- The rate of emergency transport cases is highest for senior citizens. The ratio of place of accident occurrence is highest for homes, and the highest type of accident is tripping or falling.
- The number of known new cases of senior citizen abuse is increasing.
- Accidental drowning is the highest cause of deaths among senior citizens in the past five years.

[Challenges identified from data]

- ① Current activities to prevent falling are not sufficient enough.
- ② There are no means to prevent senior citizen abuse.
- ③ Accidental drowning is on the increase, but there are no effective measures in place.

C. Transportation

- Approximately 30% of emergency transport cases are for traffic accidents, second to falling. The rate of traffic accidents is highest for ages 64 and under.
- When looking at the details of traffic accidents by age, accidents involving bicycles is highest for age group 0 to 14, and accidents involving motorcycles is highest for age group 15 to 64.
- The rate of deaths in age groups 15 and under and 65 and older is somewhat higher than the Yokohama City average.

[Challenges identified from data]

- ① Reduce the number of motorcycle accidents in age group 15 to 64.
- ② Reduce the number of bicycle accidents in age group 0 to 14.
- ③ Reduce the number of fatalities among children and senior citizens.

D. Sports and Leisure

- Looking at the rate of emergency transport cases by age, the rate for the age group 15 to 24 is higher compared to the population composition rate.

[Challenge identified from data]

- There is insufficient data to review preventive measures.

E. Suicide

- The leading cause of death in age group 15 to 39 is suicide. The death rate is slightly lower than the national rate, and is similar to the data for all of Yokohama City.
- In terms of number of emergency transport cases, the rate of women is high. The method of self-inflicted action differs according to gender. (Women tend to have higher rates of drugs; men have higher rate of hanging and suffocation.)

[Challenge identified from data]

- An organization and system to practically approach suicide prevention must be prepared and continuous activities must be carried out.

F. Disaster

- Just less than 60% of ward residents knew the location of their community disaster prevention base. Just less than 50% of ward residents participated in disaster prevention drills.
- Less than 50% of neighborhood associations have started programs to support evacuation of care-needing persons.

[Challenges identified from data]

- ① Only some of the ward residents participate in disaster prevention drills at their local disaster prevention base.
- ② Not all neighborhood associations have programs to support

<p>evacuation care-needing persons.</p> <p>G. Child abuse</p> <ul style="list-style-type: none"> <li>The number of known new cases of child abuse is increasing. The numbers of consultations from mothers who are facing uncertainties in parenting are increasing.</li> </ul> <p>[Challenge identified from data]</p> <ul style="list-style-type: none"> <li>There are no means in place to prevent child abuse.</li> </ul>	
<p>[Section B] Structure of the community</p>	
<p>B.1 Describe the demographic structure of the community</p> <p>Population Sakae Ward's population is approx. 125,000 people. This number has declined three years in succession. It is predicted to drop to approx. 90,000 people by 2050.</p> <p>The number of births has been steady at approx. 1,000. The population aging rate is 24.3%, which is higher than the national average of 23%.</p> <p>Foreign residents There are approx. 1,000 registered foreign residents. In terms of nationality, Chinese make up 43% and South Korean/North Korean make up 25%.</p> <p>Demographics The number of transfers in and out is both declining. The daytime population rate is 73.5% showing that during the daytime, the population is moving out of the ward.</p> <p>Duration of residence Households that transferred in during the 1960s to 70s have settled here. In terms of rate of duration of residence by migrants, 30% of more have resided in the ward for 20 years or more.</p> <p>Transportation agencies There is only one train station in the ward. A multi-line bus is the convenient transportation means for ward residents.</p>	<p>Is the demographic structure and the different risks sufficient described?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p><b>Industry</b>          In terms of industry in the ward, the ratio of service industry, wholesales/retails are all 22%. There are several large-scale factories in the western section of the ward, so in terms of number of employees, manufacturing, wholesales/retails, healthcare/welfare are all 18%. The unemployment rate is 5.7%, which is lower than the national average of 6.4%. However, the labor force participation rate is 54% that is lower than the national average of 61%.</p> <p><b>Education</b>          In Sakae Ward, there are 12 kindergartens, 10 daycare centers for children, 14 elementary schools, 8 junior high schools, 4 senior high schools, and 1 special support school.</p> <p><b>Healthcare</b>          In Sakae Ward, there are 2 hospitals, 72 general clinics, and 49 dental offices. In terms of beds, there are 455 general ward beds, 18 long-term care beds, and 106 psychiatric ward beds. There is a designated emergency hospital in the approximate center of the ward.</p> <p><b>Welfare</b>          The following disability certificates have been issued: about 3,000 for physically challenged persons, 724 intellectually challenged persons, and 723 mentally challenged persons. 11.2% of the residents are on public assistance, which is lower than the national and Yokohama City average, but this number has been on the increase as it has nationally and in Yokohama .</p> <p><b>Crime</b>          The number of criminal incidents in the ward is on the decline. The rate is 5.6 per 1,000 people, which is lower than the national average of 11.6 per 1,000.</p>	
<p><b>B.2 Describe the SC/IP at present and the plans for the future.</b></p> <p>Until now, Yokohama City and Sakae Ward Office has handled community safety, including safety for children, senior citizens and disabled persons, with existing municipal administration plans.</p> <p>The ward office, police station and fire station, etc., have each systematically approached traffic safety, disasters and crime, etc.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No., If no!! What is missing:</p>

<p>At Sakae Ward, we have enacted our own original SC activity plan in addition to this.</p> <p>We will follow this SC activity plan and work together with the community residents, police station, fire station, and ward office, etc., to comprehensively promote programs to improve safety and prevent injury.</p>	
<p>B.3 Describe the support for sustained injury prevention of the local politicians in the community and which parts of the program have been undertaken and/or supported by the regional government?</p> <p>Sakae Ward is one of the administrative wards that comprise Yokohama City. Sakae Ward's Safe Community activities are reported to the Yokohama City mayor, who is chosen through elections.</p> <p>The progress of our Safe Community activities is periodically reported at the ward committees attended by city council persons from Sakae Ward. Various opinions are received at this venue.</p> <p>A periodic meeting is held at the ward office. This meeting is attended by national, prefectural and Yokohama city administrative agencies that have offices in the ward (i.e., Labor Standards Inspection Office, Police School, Prefecture Flood Control Office, Tax Office). Here, information on safety and security is exchanged, data is presented and the Safe Community Activities are publicized.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.4 Describe the strategic program concerning the safety promotion and injury prevention work, which has been formulated!</p> <p>In the SC Activity Plan enacted in FY2012, we listed vitalization of the local community and the general force of the administration as a strategy to realize safety improving and accident preventing activities.</p> <p>In Sakae Ward, the neighborhood associations that have traditionally had a high membership (84.9%) have led various activities for welfare, disaster prevention and traffic safety. The Ward Office has the Public Health Office and Welfare Office, as</p>	<p>Are the descriptions sufficient? <input type="checkbox"/></p> <p>yes <input type="checkbox"/> No.., If no!! What is missing:</p>

<p>well as the authority to maintain and manage roads, rivers and parks. The Fire Station Director also works at the Ward Office to create a system to generally perform duties related to safety and security.</p> <p>In FY2010, Sakae Ward enacted the “Community Development Action Plan” which is the basic concept for town planning, and the “Community Welfare and Health Plan” to promote welfare and health. Promotion of Safe Community activities has been clearly indicated in these plans.</p> <p>In addition to the community resident’s organizational force, administration’s system, and the administrative plan that continues and develops this force and system, we are taking means to establish the Safe Community system. Through this we will resolve challenges in the local community, and will further promote safe and secure town planning.</p>	
<p>B.5 Who is responsible for the management of the SP/IP program and where are they based in the local political and administrative organization?</p> <p>Toshio Onaka, Sakae Ward Director General</p> <p>※Sakae Ward is one of 18 administrative wards in Yokohama n City. It has no council. The ward director general is selected from the city employees and appointed by the Yokohama City Major.</p> <p>(Refer to “Organization of Japan’s Local Government”.)</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.6 Which is the lead unit for the SP/IP program?</p> <p>General Affairs Section, General Affairs Department, Sakae Ward Office.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.7 Is the Safe Communities initiative a sustained program or a project?</p> <p>Sakae Ward’s Safe Community activities are continuous programs carried out in interaction with community residents, the Police Station, Fire Station and related agencies, with Sakae Ward Office handling the clerical functions.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>B.8 Are the objectives decided by the local politicians covering the whole community? Which are they?</p> <p>The city-wide objectives are set in the Yokohama City “Interim 4-year Plan”, etc. In Sakae Ward, we have set more actual objectives in our SC Activity Plan. In other words, we have set our current programs (current state), target values for FY2013, mid-term objectives (FY2018), and long-term objectives (approx. 20 years later).</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.9 Who have adopted these objectives?</p> <p>Toshio Onaka, Sakae Ward Director General</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.10 How are the Safe Community objectives evaluated and to whom are the results reported?</p> <p>The Sakae Ward Office performs a self-evaluation of these numerical goals, and reports to the Steering Committee and Taskforce Committees. An evaluation from a third-party perspective is given at the Injury Surveillance committee. These results are published to the ward residents through our web site, etc.</p> <p>We have also been reviewed by the Japan Institution for Safe Communities (JISC). After receiving designation, the results will be listed in our annual report.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>B.11 Are economic incentives in order to increase safety used? If yes, how are they used?</p> <p>In Sakae Ward, economic incentives are used.</p> <p>For example, in Sakae Ward where the population is aging quickly, the suppression of the long-term nursing care utilization rate is a serious challenge. By increasing the number of elderly people participating in the senior citizen fall prevention and care prevention programs, we expect that we can suppress an increase in the long-term nursing care utilization rate, and can suppress an increase in long-term care insurance rates.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>B.12 Are there local regulations for improved safety? If so, describe them</p> <p>Sakae Ward has enacted its own SC Activity Plan. The Activity Plan is not “regulations”, but they clarify the actions that ward residents should take to improve safety, such as participating in disaster prevention drills and cooperating with suicide prevention.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>[Section C] Indicator 1</p>	
<p>1.1 Describe the cross-sector group responsible for managing, coordinating, and planning of the SP/IP program.</p> <p>The following promotion system has been established in Sakae Ward to carry out cross-sector Safe Community activities.</p> <p>① Sakae Ward Safe Community Steering Committee Purpose: General promotion of Safe Community programs Members: Ward Director General, Joint neighborhood association chairs, Police Station Director, Fire Station Director, chairs of various related groups, chairs of Taskforce Committees (total 24 members)</p> <p>② Taskforce Committees Purpose: Review programs for seven themes Members: Representatives from groups involved with themes;</p> <p>③ Injury Surveillance Committee Purpose: Data analysis, monitoring, evaluation of each program Members: Five persons with relevant experience and knowledge;</p> <p>④ Safe Community Promotion Council Purpose: Function as liaison in Ward Office, sharing of information Members: Officers with managerial or higher positions at the ward office;</p> <p>⑤ Liaison Committee related to Sakae Ward Safe Community Activities Purpose: Function as liaison in the City Office, sharing of information Members: Officers with managerial or higher positions at each department of the city office</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>



<p>1.2 Describe how the local government and the health sector are collaborating in the SC/IP work.</p> <p>The Ward Office functions as the Steering Committee's secretariat. The Ward Office's Welfare and Health Center (integrating the Public Health Office and Welfare Office functions), functions as the secretariat for the Senior Citizen Safety Program Taskforce Committee suicide Prevention Program Taskforce committee, and Violence and Abuse Prevention Program Taskforce committee.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>1.3 How are NGOs: Red Cross, retirement organizations, sports organizations, parent and school organizations involved in the SC/IP work?</p> <p>Representatives from Senior Clubs, sports groups and the PTA Liaison Committee, etc., participate as members of the Steering Committee and Taskforce Committees.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>1.4 Are there any systems for ordinary citizens to inform about risk environments and risk situations they have found in the community?</p> <p>The Ward Office gazette (published monthly) is distributed to each household to alert residents of risks in the ward. We also collaborate with town magazines and cable TV stations to provide all ward residents with information.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>1.5 Describe how the work is organized in a sustainable manner.</p> <p>As part of the Safe Community promotion organization, Steering Committees and Taskforce Committees for each theme are set with community residents, related agencies and public administration participating. The chair of each taskforce committee is a member of the Steering Committee allowing information to be shared.</p> <p>The Steering Committee and Taskforce Committees secretariats are set at the Ward Office. Program continuity is ensured by holding Taskforce Committees and sharing expenses. Each program is</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>stipulated in the SC Activity Plan, and each secretariat manages the progress.</p>																																																
<b>[Section D] Indicator 2</b>																																																
<p>2.1 Describe the sustainable work in regard to SC/IP in following areas and how the different sectors including specific NGOs are involved in the work.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Safe traffic</td> <td style="width: 50%;">2. Safe homes and leisure times</td> </tr> <tr> <td>3. Safe children</td> <td>4. Safe elderly</td> </tr> <tr> <td>5. Safe work</td> <td>6. Violence prevention</td> </tr> <tr> <td>7. Suicide prevention</td> <td>8. Disaster preparedness and response</td> </tr> <tr> <td>9. Safe public places</td> <td>10. Safe hospitals</td> </tr> <tr> <td>11. Safe sports</td> <td>12. Safe water</td> </tr> <tr> <td>13. Safe schools</td> <td></td> </tr> </table> <p>Are some of these areas overseen by from other organizations and/or agencies than from the community? How is the community involved?</p> <p>The main programs carried out in Sakae Ward are as follows:</p> <p><b>1. Safe traffic</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 60%;">Program</th> <th style="width: 20%;">Community</th> <th style="width: 20%;">Public administration</th> </tr> </thead> <tbody> <tr> <td>①Preparation and distribution of traffic safety map (showing places with high traffic accident occurrence in ward)</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>②Traffic safety campaign (traffic rule observance and manner improvement education)</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>③ Traffic safety classes (for children and senior citizens)</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>④Child seat seminars (for parents/guardians)</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>⑤Maintenance of road environment</td> <td></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </tbody> </table> <p><b>2. Safe homes and leisure times</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Program</th> <th style="width: 20%;">Community</th> <th style="width: 20%;">Public administration</th> </tr> </thead> <tbody> <tr> <td>①Distribution of leaflets to education on preventing child accidents</td> <td></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>②Danger prediction training classes (for children and parents/guardians)</td> <td style="text-align: center;"><input type="radio"/></td> <td></td> </tr> <tr> <td>③Crime prevention patrol</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>④Maintenance and inspection of park equipment, etc.</td> <td></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </tbody> </table>	1. Safe traffic	2. Safe homes and leisure times	3. Safe children	4. Safe elderly	5. Safe work	6. Violence prevention	7. Suicide prevention	8. Disaster preparedness and response	9. Safe public places	10. Safe hospitals	11. Safe sports	12. Safe water	13. Safe schools		Program	Community	Public administration	①Preparation and distribution of traffic safety map (showing places with high traffic accident occurrence in ward)	<input type="radio"/>	<input type="radio"/>	②Traffic safety campaign (traffic rule observance and manner improvement education)	<input type="radio"/>	<input type="radio"/>	③ Traffic safety classes (for children and senior citizens)	<input type="radio"/>	<input type="radio"/>	④Child seat seminars (for parents/guardians)	<input type="radio"/>	<input type="radio"/>	⑤Maintenance of road environment		<input type="radio"/>	Program	Community	Public administration	①Distribution of leaflets to education on preventing child accidents		<input type="radio"/>	②Danger prediction training classes (for children and parents/guardians)	<input type="radio"/>		③Crime prevention patrol	<input type="radio"/>	<input type="radio"/>	④Maintenance and inspection of park equipment, etc.		<input type="radio"/>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
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### 3. Safe children

Program	Community	Public administration
① Watching children commuting to and from school by community residents	○	○
② Provision of Child Dial 110 Houses (places where children can find refuge in event of emergency)	○	○
③ Greenery of school yards and parks	○	○
Maintenance and inspection of park equipment [listed again]		○
④ Home visit instruction (for infants)	○	○
Danger prediction training classes [listed again]	○	

### 4. Safe elderly

Program	Community	Public administration
① Care-prevention (fall prevention) classes	○	○
② Training of dementia supporters	○	○
③ Establishment of watching network using meal delivery service, etc.	○	○

### 5. Safe work

Program	Community	Public administration
① Labor monitoring (On-site inspections of workplaces in accordance with laws)		○

### 6. Violence prevention (child abuse prevention)

Program	Community	Public administration
① Hello Baby Visits (target: homes with four-month or younger infants)	○	○
② Management of community parenting support bases (places for parents of infants/toddlers)		○
③ Child abuse prevention committee	○	○
④ Establishment and management of expert consultation centers		○

### 7. Suicide prevention

Program	Community	Public administration
① Educational activities (preparation/distribution of leaflets)	○	○
② Training of Gatekeepers (persons who discover and guard, and can act as link to specialized agencies)	○	○

## 8. Disaster preparedness and response

Program	Community	Public administration
① Disaster prevention drills	<input type="radio"/>	<input type="radio"/>
② Disaster prevention classes (for elementary school children), life-saving courses (for jr. high/sr. high students)		<input type="radio"/>
③ Preparation and distribution of hazard maps (listing hazard spots in event of earthquakes, flooding, landslides, etc.)		<input type="radio"/>
④ Formation of voluntary fire corps and self-defense fire brigades	<input type="radio"/>	<input type="radio"/>
⑤ Training of disaster prevention license leaders (community residence trained in handling disaster prevention equipment)	<input type="radio"/>	<input type="radio"/>
⑥ Increase of information using mobile devices (e-mail, twitter, etc.), and increase in number of registered users		<input type="radio"/>
⑦ Promotion of installation of residential fire alarms	<input type="radio"/>	<input type="radio"/>

## 9. Safe public places

Program	Community	Public administration
① Maintenance and management of roads, rivers and parks	<input type="radio"/>	<input type="radio"/>

## 10. Safe hospitals

Program	Community	Public administration
① Monitoring of medical institutions (provide guidance for management of hospitals and clinics according to laws)		<input type="radio"/>

## 11. Safe sports

Program	Community	Public administration
① Seminars for preventing accidents and injuries during sports	<input type="radio"/>	

## 12. Safe water

Program	Community	Public administration
Maintenance and management of rivers [listed again]		<input type="radio"/>
① Measures and training for water disasters	<input type="radio"/>	<input type="radio"/>
② Emergency clothed-swimming classes (preparation for sudden increase in water levels in rivers, targeted for elementary school children)	<input type="radio"/>	<input type="radio"/>

13. Safe schools					
Program	Community	Public administration			
Watching children commuting to and from school by community residents [listed again]	○	○			
Greening of schoolyards [listed again]	○	○			
①Physical strength improvement program (carried out at elementary and jr. high schools)		○			
Disaster prevention classes (for elementary school children), life-saving courses (for jr. high/sr. high students) [listed again]		○			
Traffic safety classes [listed again]	○	○			
②Cyber classes (Police and volunteers visit schools to teach children to prevent damage from cybercrimes)	○	○			

  

<p>2.2 Describe the work with genders, all ages and all environments and situations. Describe all activities like falls prevention and how the work is done</p> <p>The programs listed in section 2.1 are summarized below according to age, environment and situation. All programs are bi-gender. As can be seen, prevention programs in Sakae Ward cover all genders, ages and environments. (The numbers listed in the following table correspond to the program numbers in section 2.1.)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="2" rowspan="2"></th> <th colspan="4" style="text-align: center;">Age group</th> </tr> <tr> <th style="text-align: center;">Child Age 0 to 14</th> <th style="text-align: center;">Youth Age 15 to 24</th> <th style="text-align: center;">Adult Age 25 to 64</th> <th style="text-align: center;">Senior citizen Age 65 and older</th> </tr> </thead> <tbody> <tr> <td rowspan="7" style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Accident</td> <td style="text-align: center;">Home</td> <td style="text-align: center;">2①②</td> <td style="text-align: center;">8⑦</td> <td style="text-align: center;">8⑦</td> <td style="text-align: center;">4①②③</td> </tr> <tr> <td style="text-align: center;">School</td> <td style="text-align: center;">1③</td> <td style="text-align: center;">/</td> <td style="text-align: center;">/</td> <td style="text-align: center;">/</td> </tr> <tr> <td style="text-align: center;">Workplace</td> <td style="text-align: center;">/</td> <td style="text-align: center;">/</td> <td style="text-align: center;">5①</td> <td style="text-align: center;">/</td> </tr> <tr> <td style="text-align: center;">Sports/ leisure</td> <td style="text-align: center;">2② 3④</td> <td style="text-align: center;">11①</td> <td style="text-align: center;">11①</td> <td style="text-align: center;">11①</td> </tr> <tr> <td style="text-align: center;">Traffic</td> <td style="text-align: center;">1 ①②③④</td> <td style="text-align: center;">1①②⑤</td> <td style="text-align: center;">1①②⑤</td> <td style="text-align: center;">1①②③⑤</td> </tr> <tr> <td style="text-align: center;">Other public places</td> <td style="text-align: center;">2③④ 3①②③</td> <td style="text-align: center;">2③、9①</td> <td style="text-align: center;">2③、9①</td> <td style="text-align: center;">2③、9①</td> </tr> <tr> <td style="text-align: center;">Hospital</td> <td style="text-align: center;">10①</td> <td style="text-align: center;">10①</td> <td style="text-align: center;">10①</td> <td style="text-align: center;">10①</td> </tr> <tr> <td rowspan="2" style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center; font-weight: bold;">Intentional factors</td> <td style="text-align: center;">Suicide</td> <td style="text-align: center;">7①</td> <td style="text-align: center;">7①②</td> <td style="text-align: center;">7①②</td> <td style="text-align: center;">7①②</td> </tr> <tr> <td style="text-align: center;">Violence/abuse</td> <td style="text-align: center;">6①②③④</td> <td style="text-align: center;">6①②③④</td> <td style="text-align: center;">6①②③④</td> <td style="text-align: center;">6④</td> </tr> </tbody> </table>			Age group				Child Age 0 to 14	Youth Age 15 to 24	Adult Age 25 to 64	Senior citizen Age 65 and older	Accident	Home	2①②	8⑦	8⑦	4①②③	School	1③	/	/	/	Workplace	/	/	5①	/	Sports/ leisure	2② 3④	11①	11①	11①	Traffic	1 ①②③④	1①②⑤	1①②⑤	1①②③⑤	Other public places	2③④ 3①②③	2③、9①	2③、9①	2③、9①	Hospital	10①	10①	10①	10①	Intentional factors	Suicide	7①	7①②	7①②	7①②	Violence/abuse	6①②③④	6①②③④	6①②③④	6④	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
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[Section E] Indicator 3	
<p>3.1 Identify all high risk groups and describe what is being done to increase their safety. Groups at risk are often:</p> <ol style="list-style-type: none"> <li>1. Indigenous people</li> <li>2. Low-income groups</li> <li>3. Minority groups within the community, including workplaces</li> <li>4. Those at risk for intentional injuries, including victims of crime and self-harm</li> <li>5. Abused women, men and children</li> <li>6. People with mental illness, developmental delays or other disabilities</li> <li>7. People participating in unsafe sports and recreation settings</li> <li>8. Homeless</li> <li>9. People at risk for injuries from natural disasters</li> <li>10. People living or working near high- risk environments (for example, a particular road or intersection, a water hazard etc.</li> <li>11. People at risk due to religion, ethnicity or sexual preferences</li> </ol> <p>In Sakae Ward, the community has been diagnosed, and the following groups have been identified as having high risk people.</p> <ol style="list-style-type: none"> <li>① Abused people (children)</li> <li>② Abused people (senior citizens)</li> <li>③ Those at risk for intentional injuries including self-harm</li> <li>④ Those at risk for injuries from natural disasters</li> </ol> <p>The following measures have been taken.</p> <p>① Abused people (children)</p> <ul style="list-style-type: none"> <li>● Yokohama Child Abuse Hotline Information and consultations regarding abuse are received from parents/educators, child themselves, or people in the area.</li> <li>● Child Abuse Prevention Liaison Committee A liaison committee meets to strengthen Watching activities to identify and handle child abuse at an early stage, and to share information with related agencies.</li> </ul> <p>② Abused people (senior citizens)</p> <ul style="list-style-type: none"> <li>● Community Watching Network Senior citizens needing supporting, including from abuse, are identified at an early stage and supported.</li> <li>● Wandering Senior Citizen SOS Network Senior citizens with dementia and their families are supported.</li> <li>● Care-needing senior citizen supporter liaison committee</li> </ul>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>Workers from long-term care insurance businesses and medical institutions, etc., hold a liaison committee to support care-needing senior citizens, including those subject to abuse.</p> <p>③Those at risk for intentional injuries including self-harm</p> <ul style="list-style-type: none"> <li>● Installation, management and promotion of consultation center The Kokoro (heart &amp; mind) Health Consultation Center has been established and managed, and various consulting agencies are promoted.</li> <li>● Installation and management of Life Support Center Through the life support, consultation and community exchange activities for mentally challenged persons, we aim for self-reliance and return to society.</li> <li>● Network seminars by workers involved with mental health measures Seminars covering case studies and information exchange, etc., are held by workers involved with mental health issues in the government, businesses and schools, etc.</li> </ul> <p>④Those at risk for injuries from natural disasters</p> <ul style="list-style-type: none"> <li>● Support of people requiring assistance in event of disaster A system set up to find persons requiring assistance in the community, and to enable safe evacuation of these persons in the event of a disaster.</li> </ul>	
<p>3.2 Give examples of high risk environments</p> <ol style="list-style-type: none"> <li>1. Describe how risk environments in the community are identified</li> <li>2. Describe prioritized groups and/or environments</li> <li>3. Are there specific programs for their safety in the community</li> <li>4. Describe the timetable of the work</li> <li>5. Are these groups involved in the prevention aspect of these programs?</li> </ol> <p>In Sakae Ward, we have set isolation, in other words “state in which involvement with family or neighborhoods is extremely weak” as a high risk environment.</p> <p>In the OECD FY2005 report, Japan has been pointed out as the country with the least interaction with people other than family members. In the FY2007 White Paper on National Life, more parent generations are living apart from their married children’s generation, and the rate of people who are on friendly terms with neighbors is on the decline. It is apparent that connections with neighbors are becoming weaker.</p> <p>Amid these social changes, problems such as child abuse and senior citizen abuse are apparent. In the current regional community, there is little help from family or people in the area. However, the concept that parenting and care-giving must be</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

handled by a family member is still strong. Parenting and care-giving in a situation where support cannot be anticipated from the surroundings, leads to stress and ultimately to abuse. In recent years, solitary deaths in which a person is not discovered for a long time after death, is becoming a social problem.

The same social background applies in Sakae Ward, and the number of known new child abuse and senior citizen abuse cases is increasing. To resolve this, the community residents and public administration are working together in programs to provide parenting and senior citizen care-giving support. The programs are listed below. These programs are reviewed each fiscal year.

**Prevention of child abuse [listed again]**

Program	Community	Public administration
Hello Baby Visits	○	○
Management of community parenting support bases		○
Child abuse prevention committee	○	○
Establishment and management of expert consultation centers		○

**Prevention of senior citizen abuse [listed again]**

Program	Community	Public administration
Training of dementia supporters	○	○
Establishment of Watching network	○	○

**[Section F] Indicator 4**

4.1 Describe the evidence-based strategies/programs that have been implemented for different age- groups and environments.

[Data used as evidence] Refer to section 5.1.

[Outline of risks] As explained in section A.4

[Evidence-based programs]

(Challenges identified from data and some programs are a re-listing of section 2.1)

**A. Child Safety**

○Challenge identified from data

- Detailed prevention measures have not been set to correspond to age-based risks.

→New data was collected and challenges were identified.

Are the descriptions sufficient?

yes

No., If no!! What is missing:



- ① Many infants cannot use their hands properly when falling, and fall straight down on their face.
- ② Children themselves cannot detect risks according to the situation, and cannot take preventive actions.
- ③ Children with insufficient skills to make a judgment, such as against strangers, must be guarded by adults in the area.

○ Programs

- ① On-site exercise instruction (target: toddlers)
- ② Risk prediction training (target: children, instructors)
- ③ -1. Watching children commuting to and from school by community residents
- ③ -2. Provision of Child Dial 110 Houses (places where children can find refuge in event of emergency)

B. Senior Citizen Safety

○ Challenges identified from data

- ① Activities to prevent falling are insufficient.
- ② There are no means to prevent senior citizen abuse.
- ③ Accidental drowning is on the increase, but there are no effective measures in place.

○ Programs

- ① Starting of Genki (Well-being) Stations (Place where community residents can voluntarily participate in fall prevention activities, etc.)
- ② Training of dementia supporters
- ③ Establishment of watching network using meal delivery service, etc.

C. Traffic Safety

○ Challenges identified from data

- ① Reduce the number of motorcycle accidents in age group 15 to 64.
- ② Reduce the number of bicycle accidents in age group 0 to 14.
- ③ Reduce the number of fatalities among children and senior citizens.

<p>○Programs</p> <p>①Preparation and distribution of traffic safety map (showing places with high traffic accident occurrence in ward)</p> <p>②-1. Hamakko Traffic Safety Classes (target: elementary school children (Hamakko means children in Yokohama))</p> <p>②-2. Promotion of bicycle helmet use (target: children)</p> <p>③-1. School zone measures</p> <p>③-2. Preparation and distribution of traffic safety map (showing places with high traffic accident occurrence in ward)</p> <p>D. Sports and Leisure Safety</p> <p>○Challenge identified from data</p> <ul style="list-style-type: none"><li>• There is insufficient data to review preventive measures.</li></ul> <p>○Programs</p> <ul style="list-style-type: none"><li>• Collect data regarding accidents and injuries in age group 15 to 24, and identify challenges</li><li>• Seminars for preventing accidents and injuries during sports</li></ul> <p>E. Suicide prevention</p> <p>○Challenge identified from data</p> <ul style="list-style-type: none"><li>• An organization and system to practically approach suicide prevention must be prepared and continuous activities must be carried out.</li></ul> <p>○Programs</p> <ul style="list-style-type: none"><li>• Grasp state of persons and areas with high-risk of suicide</li><li>• Educational activities (preparation/distribution of leaflets)</li><li>• Training of Gatekeepers (persons who discover and guard, and can act as link to specialized agencies)</li><li>• Starting of network seminars by workers involved with mental health measures</li></ul> <p>F. Disaster Safety</p> <p>○Challenge identified from data</p> <p>① Only some of the ward residents participate in disaster prevention drills at their local disaster prevention base.</p> <p>②Not all neighborhood associations have programs to support evacuation care-needing persons.</p>	
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<p>○Programs</p> <p>①-1. Review community disaster prevention base drills</p> <p>①-2. Establish and manage disaster volunteer center, and hold drills</p> <p>①-3. Hold drills in collaboration with bases in a specific areas, neighborhood disaster prevention organization, and special evacuation areas</p> <p>①-4. Promote participation in neighborhood disaster prevention base drills</p> <p>② Hold drills for evacuation of persons requiring assistance in event of disasters</p> <p>G. Prevention of Child Abuse</p> <p>○Challenge identified from data</p> <ul style="list-style-type: none"> <li>• There are no means in place to prevent child abuse.</li> </ul> <p>○Programs</p> <ul style="list-style-type: none"> <li>• Hello Baby Visits (target: homes with four-month or younger infants)</li> <li>• Training of parenting support supporters</li> </ul>	
<p>4.2 Has any contacts been established with ASCSCs , WHO CCCSP, other scientific institutions, or knowledgeable organizations about the development and/or implementation of evidence-based strategies? Which ones? What has been the extent of their counsel?</p> <p>Notice! WHO links to evidence- based interventions are found at the end of form B!</p> <p>In June 2011, inspectors from the Certifying center (Korea) were invited to review Sakae Ward’s programs. We have promoted Sakae Ward’s programs based on the evaluation we received. Subsequently, we received support from the Japan Institution for Safe Communities (JISC). JISC participated in our Steering Committees and Taskforce Committees as an observer, and visited our various programs in the ward.</p> <p>Our Injury Surveillance committee consists of five persons with relevant experience and knowledge. We have received expertise advice for implementing evidence-based measures, such as</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No., If no!! What is missing:</p>

<p>implementation of factual investigations on ward resident accidents and injuries, and evaluation of various programs.</p> <p>In FY2011 to 12, a factual investigation on ward resident accidents and injuries was held in cooperation with the School of Medicine of Yokohama City University, which is participating as a member. The results of this investigation were applied to each taskforce committee's programs and in the preparation of an injury surveillance organization.</p>	
<p>[Section G] Indicator 5</p>	
<p>5.1 What local data is used to determine the injury prevention strategies? For example, registering injuries can be done at hospitals, health centers, dentists, schools, care of the elderly organizations and the local police. Household surveys can also be used for collection of data about injuries and risk environments and risk situations. Which methods are used in the community?</p> <p>The following data was collected and analyzed as injury data.</p> <p>1) Existing data</p> <p>①Demographic statistics</p> <p>This survey targets all numbers of births, deaths, marriages, divorces, deaths and stillbirths in accordance with national laws. This data is used to compare with national values, and for long-term indicators of programs in Sakae Ward.</p> <p>②Emergency transport records</p> <p>This data is statistics provided from the Yokohama City Fire Station.</p> <p>As it is difficult to collect medical information in Sakae Ward, emergency transport records are used for injury data. In particular, this data is used to understand the situation of sports competition and work-related accidents, which is not recorded in the demographic statistics.</p> <p>③Ward resident awareness survey, ward resident questionnaire</p> <p>These surveys are carried out to understand the changes in awareness and actions in the ward resident's daily lives, and to identify needs. These surveys do not focus on accidents or</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No., If no!! What is missing:</p>

<p>injuries, but are used as indicators to follow changes in ward resident awareness, such as changes in knowledge and actions regarding disaster prevention, interaction with neighbors, and participation in volunteer activities.</p> <p>④Police statistics Statistics on traffic accidents and crime occurring in the ward are collected and analyzed.</p> <p>2) New data ⑤ Factual survey regarding ward resident of accidents and injuries, etc. In FY2011 to 12, a factual survey was carried out by Sakae Ward, with the cooperation of the School of Medicine of Yokohama City University. The purpose of the survey was to understand the situation of injuries including close calls, and to understand factors related to injuries. The main injuries and factors of injuries differ greatly according to age group. Thus, the survey items and methods were varied according to the target, such as mother and child, grade school children and students, late middle ages and senior citizens.</p>	
<p>5.2 Describe how data are presented in order to promote safety and prevent injuries in the community.</p> <p>Each data is presented in the following manner;</p> <p>①Demographic statistics Data is presented by the statistics departments on the national level and Yokohama City in an easy-to-analyze format.</p> <p>②Emergency transport records Data is presented by the Yokohama Fire station in an easy to process and analyze format.</p> <p>③Ward resident awareness survey, ward resident questionnaire The department in charge at Sakae Ward presents the analysis results.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No., If no!! What is missing:</p>

<p>④Police statistics (traffic accidents and crimes) The Sakae Police Station presents the results of analyzing data from the ward.</p> <p>⑤ Factual survey regarding ward resident of accidents and injuries, etc.  The data analysis results are presented by the School of Medicine of Yokohama City University.</p>	
<p>5.3 Describe how the community documents and uses knowledge about causes of injuries, groups at risk and risky environments. How does the community document progress over time?</p> <p>The Injury Surveillance committee collects all data, and presents it to each taskforce committee in a format matching the challenge. The taskforce committee uses the presented data to measure the effect of programs and for future programs. This data is organized, and then recorded and submitted as an annual report.</p>	<p>Are the descriptions sufficient?  <input type="checkbox"/> yes  <input type="checkbox"/> No., If no!! What is missing:</p>
<p>[Section H] Indicator 6</p>	
<p>6.1 How does your community analyze results from the injury data to track trends and results from the programs? What is working well and has given you good results. What are the plans to continue? What needs to be changed?</p> <p>The Injury Surveillance committee continuously collects and analyzes the data listed in section 5.1. The results are used to understand the chronological changes, and are analyzed for each challenge. In FY2011 to 12, a factual survey regarding ward resident accidents and injuries was carried out with the cooperation of the School of Medicine of Yokohama City University. The School of Medicine of Yokohama City University is a member of the Injury Surveillance committee, and will continue to help with data analysis. Other members include specialists in the study of public health, health sciences, architecture and urban planning, and social</p>	<p>Are the methods used sufficient? Yes No., If no!, What is missing?</p>

<p>welfare studies. Surveys unique to Sakae Ward are carried out as necessary.</p> <p>Expertise data analysis can be requested to the Yokohama City Institute of Health. The Institute of Health is a member of the “Liaison Committee on Sakae Ward Safe Community Activities”.</p>	
<p>6.2 Describe how the results from the program evaluations are used</p> <p>In accordance with indicator 4, each taskforce committee makes a self-evaluation of its programs, and applies the results to improve the program.</p> <p>The Injury Surveillance committee makes an evaluation of the entire program and gives advice on each taskforce committee’s self-evaluation from an expert viewpoint.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>6.3 Describe the changes in pattern of injuries, attitudes, behavior and knowledge of the risks for injuries as a result of the programs.</p> <p>It has been two years since Sakae Ward declared the start of the Safe Community activities. We have not seen the changes brought by the program, such as a decline in accidents, suicides or abuse.</p> <p>On the other hand, cross-sector collaboration is increasing as groups that were acting independently have taken the Safe Community activities as a change to start seminars as Taskforce Committees.</p> <p>In addition, we have seen our ward residents and administration employees passionately participate in activities because “Sakae Ward is aiming to become a Safe Community”. Some examples include special inspections of school zones, and seminars to train suicide prevention gatekeepers.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>[Section I] Indicator 7</p>	
<p>7.1 Describe how the community has joined in and collaborates in national and international safe community networks.</p> <p>Sakae Ward has actively participated in conferences held in Japan and overseas. (See section 7.4)</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>

<p>In Japan, we have exchanged information with municipalities that have been certified, and at the same time have participated in seminars with municipalities that are undertaking Safe Community activities.</p> <p>&lt;Achievements of participation in FY2012&gt;</p> <ul style="list-style-type: none"> <li>• On-site review of Toshima Ward, Tokyo and Komoro City, Nagano Prefecture</li> <li>• Minowa-machi, Nagano Prefecture Safe Community Designation Ceremony</li> <li>• First Safe Community Study Session (Matsubara City, Osaka)</li> <li>• Citizen Safety and Security Forum in Komoro (Komoro City, Nagano Prefecture)</li> </ul> <p>We have established a “Safe Community Municipality Network” with other municipalities in Japan that are undertaking with Safe Community activities, and have exchanged various information.</p>	
<p>7.2 Will the designation ceremony coincide with any international conference, seminar or other forms of international or national exchange?</p> <p>We are planning to hold the Designation Ceremony (singing ceremony) together with the Sakae Ward Disaster Prevention Lecture held in March 2013.</p> <p>We are planning to hold an international symposium during FY2013.</p>	
<p>7.3 Which already designated Safe Communities will be invited for the designation ceremony?</p> <p>We plan to invite all designated communities.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>
<p>7.4 Which international conferences and national Safe Community conferences has the municipality participated in?</p> <p>Overseas</p> <ul style="list-style-type: none"> <li>• Oct. 2010 19th International Conference on Safe Communities (Suwon, South Korea)</li> </ul>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>



<ul style="list-style-type: none"> <li>• Apr. 2011 International Symposium on Safe Communities in Taiwan (Taipei, Taiwan)</li> <li>• Sept. 2011 20th International Conference on Safe Communities (Falun, Sweden)</li> </ul> <p>Japan</p> <ul style="list-style-type: none"> <li>• Nov. 2010 Community Security and Safety Festa 2010 in Atsugi (Atsugi City)</li> <li>• Nov. 2011 General meeting to establish All Japan Safe Communities Promotion Municipality Network Conference (Atsugi)</li> <li>• May 2012 Safe Community Designation Ceremony in Minowa-machi, Nagano Prefecture (Minowa-machi)</li> <li>•</li> </ul>	
<p>7.5 In which Regional Network for Safe Communities is the community a member or planning to seek membership? (Asian, European, Pan-Pacific, African or Latin-American Regional Network for Safe Communities)</p> <p>We plan to participate in the Asia Safe Community Network.</p>	<p>Are the descriptions sufficient?</p> <p><input type="checkbox"/> yes</p> <p><input type="checkbox"/> No.., If no!! What is missing:</p>