



**Evaluation of the process of developing a
Child and Youth Safety Action Plan for Hungary
Expert opinion from the European Child Safety Alliance**

**Conducted on behalf of the National Institute for Child Health
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Introduction

Injury is a leading cause of death for children and adolescents in Hungary, suggesting that more can be done to ensure Hungarian children and adolescents' inherent right to safety is upheld.

Across Europe the issue of injury is often neglected and investment is rarely equal to the magnitude of the problem. Yet Europe is a region with some of the highest and lowest rates of child injury in the world, with those countries with the lowest rates signaling that strategic investment can lead to significant reductions in both mortality and morbidity. Such strategic investment is greatly facilitated at the national level by the development and implementation of a multi-sectoral evidence-based strategic action plan. The Child Safety Action Plan (CSAP) Project is a large scale initiative, led by the European Child Safety Alliance, whose aim is to develop government endorsed national action plans in countries in Europe that enhance child and adolescent safety by increasing awareness of the injury issue and uptake of proven prevention strategies by government, industry, professionals and organisations in areas that relate to child and adolescent safety, and families themselves. Hungary has been participating in the CSAP initiative since 2004 and the National Institute of Child Health participating has been a partner from the beginning and the official project partner since 2008. In latter part of that year, the National Institute of Child Health approached the European Child Safety Alliance and requested that the Alliance conduct an evaluation of the National Action Plan on Child and Youth Safety development process in Hungary.

The purpose of the evaluation would be to do a critical analysis of the development process in the form of an expert professional opinion based on an analysis of 1) interviews with key stakeholders in the Hungarian National Action Plan on Child and Youth Safety development process using a list of pre-established questions, 2) the English translation of the final Child Safety Action Plan produced and 3) the expert's experience as Programme Manager of the Child Safety Action Plan initiative. The analysis should include the exploration of the potential implications of the development process on the implementation of the Hungarian National Action Plan on Child and Youth Safety.

The Hungarian process followed closely the proposed framework within the CSAP project (see below). The first three steps, government engagement, national stakeholder engagement and situational analysis took place over the period 2005 – 2008, with the remaining steps planned for 2009 (see Annex 1)

Figure 1. CSAP Development Process



Methods

Critical appraisal of the National Action Plan on Child and Youth Safety development process

1. A set of key questions for key informant interviews was developed by the evaluator (M. MacKay) and reviewed by the CSAP Coordinator in Hungary (Dr. G. Pall, National Institute of Child Health). The questions were revised and then presented for approval to the Hungarian CSAP Stakeholders Meeting on February 23, 2009 by the CSAP Coordinator. The questions were accepted and are included in Annex 2 of this report.
2. A list of key stakeholders for the interviews was developed by the Hungarian CSAP coordinator and discussed with the evaluator. A date for the visit to Hungary was selected and the CSAP Coordinator arranged interviews with the key stakeholders for those two days. The final list of interviewees is included in Annex 2 of this report.
3. Interviews were conducted in person on May 13 and 14, 2009. Interviews were either conducted in Hungarian through interpreters or in English with assistance from an interpreter as needed. Interviewees received a copy of the questions prior to the interviews and the evaluator took notes during the interviews upon to facilitate recall for write-up of the critical appraisal.
4. Interviews were analysed and strengths, weaknesses, opportunities and threats were identified and documented and recommendations developed.

Critical appraisal of the National Action Plan on Child and Youth Safety developed

1. A set of questions for critical appraisal of the final National Action Plan on Child and Youth Safety developed addressing strengths and weaknesses was developed by the evaluator and reviewed by the CSAP Coordinator and are included in Annex 2 of this report.
2. Upon completion of the National Action Plan on Child and Youth Safety document an English summary was created and appraised by the evaluator using the pre-developed questions. Any additional questions or required clarifications were directed to the CSAP Coordinator.
3. Points from the appraisal were integrated into the findings of the process review and overall conclusions and recommendations were made.

Results - Critical appraisal of the National Action Plan on Child and Youth Safety development process

Interview responses

The sections below provide examples of answers from the interviews paraphrased by the evaluator.

Perceived indicators of success for the National Action Plan on Child and Youth Safety development process

- Necessary issues have been identified in the National Action Plan on Child and Youth Safety (e.g., road safety, education, data, capacity)
- Consensus by partners on final plan
- That there is a united voice for the child injury issue
- Multi-sectoral and multi-disciplinary involvement
- All partners are doing their best to find a role within National Action Plan on Child and Youth Safety
- That the process has been a positive experience for partners
- Increased motivation by participants to take action to reduce child injuries; increased activity in the area of child injury as a result of participation in the process
- Increase awareness and formal knowledge of the issue by the participants in the process
- National Action Plan on Child and Youth Safety is completed within proposed timetable
- That National Action Plan on Child and Youth Safety will contribute to decreasing child injury
- That National Action Plan on Child and Youth Safety coordinates multi-sectoral actions; leads to harmonisation of data and actions
- That as many stakeholders as possible were included in process
- That the correct knowledgeable people at a level where commitments to action can be made were identified to address each of the critical areas
- That the capacity, data and resource needs to implement the plan have been clearly identified within the National Action Plan on Child and Youth Safety
- The clear transparent actions for the first three years of the plan are outlined and budget is available
- That critical appraisal of National Action Plan on Child and Youth Safety by the European Child Safety Alliance indicates that the process was successful

Perceived challenges facing the planners during the planning process

- Lack of a clear picture of the issue going into the planning process
- Ensuring adequate budget and people resources to do a good job
- Coordinating the process within an environment of many international and national initiatives related to child health and education

- Implementing planning process when questions exist around future (e.g., resources to implement final National Action Plan on Child and Youth Safety)
- Traditional “vanity” regarding what is already in place required diplomacy in bringing group to recognise that more needs to be done; process needed to allow time for each organisations point of view to be shared and to provide a way for them to unite and think together and ultimately build consensus on needed actions
- Accepting leadership of National Institute of Child Health for the process
- Ensuring inter-disciplinary and inter-sectoral participation and inviting all relevant partners and the “right” people to make the necessary commitments are involved
- Fact that National Institute of Child Health has little influence on the other key stakeholders
- Coordinating a very large piece of work and completing process in a very tight timeframe
- Avoiding threats to process (e.g., strong conflicts) and taking into account the different, sometimes contradicting opinions
- Reaching an agreement and elaborating that consensus into concrete actions
- Dealing with a parallel process to develop a national all ages all injuries plan through WHO focal point for Hungary
- Breadth of the child injury area (e.g., road safety, home safety, etc.)
- Breadth of the age group being examined (0-24 years) requiring different measures and interventions
- Finding a way to build flexibility in process to allow for adjustments as process proceeded (e.g., membership of working groups)

Perceived strengths or facilitators of the development process

- First meeting of broad group of stakeholders on February 23, 2009 was viewed by many as an extremely important milestone; participants came with different viewpoints but left in agreement of importance of child safety and much enthusiasm for the initiative; the personal capital was more important than resources for this stage
- Meeting preparation by the National Institute of Child Health including the situational analysis and the sharing of examples of CSAP work from other countries. The situational analysis was praised for providing a comprehensive view of a complex area.
- Pre-existing connections between the various groups
- Being part of a European process (e.g., CSAP project); increases visibility and focus on the issue of child safety and decision makers and government are more likely to take a process seriously when it is part of a bigger European process; also provides example framework, processes and tools (e.g., Good Practice Guide) and allows learning from other countries experiences. A strong “backwind” to increase attention and acceptance.
- Belonging to the European Child Safety Alliance; observing running of meetings and working with a diverse group
- Being part of the Adrisk Project – the stakeholder questionnaire used as part of that process was useful to CSAP development as well
- Having child safety and injury prevention specifically mentioned as part of the “Children are our common treasure” National Infant and Child Health Program and resulting commitment from Government for the National Action Plan on Child and Youth Safety development process

- Alignment with other policy areas (e.g., having child injury included as part of the Child Environment and Health Action Plan for Europe (CEHAPE) Regional Priority Goal II, the national road safety strategy, national alcohol policy, national educational policy)
- Enthusiasm and commitment of partners
- Strong process built on expert knowledge of the various areas and with enough flexibility to allow working groups to be extremely realistic in actions proposed. In particular, the selection of leaders for the various working groups and the flexibility they were given in putting together their working groups was identified as strengths in the process
- The high level of professional and organisational knowledge; in particular having someone with the time and resources to organise and coordinate the process was identified as a strength, with particular mention of the strengths and skills of the CSAP Coordinator (Dr. G. Pall).
- Good cooperation and communication amongst involved partners
- Having the right experts involved key as they are the ones government consults in making decisions so if they are united and saying the same thing it is a stronger message
- Using the broad framework of child health helped bring together the broad multi-sectoral group

Perceived barriers/hurdles or weaknesses of the development process

- Complexity of the issue with respect to sectors, age group, etc. – although the situational analysis did an exceptional job of laying it all out, the issue is still very broad and multi-sectoral, thus without strong leadership and coordination there is a risk that it will not proceed further
- The compressed timeframe for development of the plan; time for a few more meetings for the working groups was perceived as being beneficial. This was mentioned in particular for some organisations where there is more rigid structure and more time is required for internal consensus building
- Limited funding for planning process; lack of funds to pay for expert time spent on the process meant that it was “voluntary” participation and this likely limited participation of some; it was also noted how generous organisations were with expert time.
- Finding the right working group coordinator was a definite hurdle but was achieved
- Challenge of selecting and prioritising actions
- Challenge of how to operationalised some proposed actions when there is no control over those who will deliver (e.g., educational actions are dependent on directors of schools or municipalities)
- Need to increase awareness of the child injury issue and importance of actions to prevent injuries amongst those that work with children and the public at large to facilitate implementation
- Uncertainty regarding funding for implementation, particularly given the economic downturn and upcoming elections
- Uncertainty of political support; enthusiasm may not be enough without clear high level political support

Perceived key decision points or pivotal events that influenced the development process

- Signing of the CEHAPE agreement
- National Institute of Child Health’s decision to take lead and Dr. G. Pall’s decision to take on leadership of that role

- Receiving a clear mandate from the Ministry of Health
- Meeting on February 23, 2009 bringing together the multiple sectors and disciplines – several participants commented on the new knowledge regarding the issue and the activities of the various organisations to address child injury and new contacts that resulted from this meeting as being unanticipated. There was also a feeling coming out of that meeting that there was enthusiasm for cooperation between sectors.
- The presentation of the situational analysis – particularly the data and comparison to other countries who have had more success with the injury issue
- Coming to consensus on the vision (in particular the agreement to go with both a qualitative statement and quantitative targets) and identification and consensus on the critical issues and areas where action was needed
- Clear timeline with a deadline for completion of the plan; that this was met was a surprise for several participants who felt it was not realistic
- Working group meetings – getting into details and discussing possible synergies within a realistic context
- The fact that there will be a final document that can guide work of the various organisations, even if funding for the overall plan is not immediately forthcoming. By clearly laying out what needs to be done organisations can identify their roles and responsibilities and begin to act in line with the national plan.

Perceived unanticipated gains as a result of the development process

- New partners found
- News ways of working together identified; new opportunities for synergy (e.g. stronger relationship and understanding between police and education and areas of road safety and home safety)
- Seeming unspoken collaboration of group in influencing any
- Cooperation between sectors in planning process – this initiative was a good example of strong collaboration and cooperation between sectors
- Ministry of Social Affairs did not attend initial meeting, but obviously heard enough positive things to agree to participate in a working group
- Pride in taking part in addressing this important issue
- New knowledge regarding the issue
- Enthusiasm of partners – engaged and active and looking beyond planning to implementation; a desire to continue to work together

Perceived unanticipated losses as a result of the development process

- Although no losses were specifically identified, there were a few points raised.
 - o There was a question as to whether more funding to support the experts in their participation would have enhanced the outcome of the process.
 - o There was a question as to whether more time for planning would have enhanced the outcome of the process.
 - o There was a question as to whether there was a lost opportunity to bring in those with the necessary level of decision making to ensure endorsement and financial backing for the

project. However, it was also noted that too high a level of participant would not have allowed the rich context specific discussions, which took place in the working groups as a result of the participation of the experts grounded in their environment in terms of what was relevant and realistic.

Perceptions regarding most valuable aspects of the development process

- Bringing together the many stakeholders of the child injury issue; involvement of experts increases likelihood of implementation
- Working together to develop a national plan
- Extremely well prepared process and background material, in particular the situational analysis; the comprehensiveness of the examination of the issue and possible solutions
- Forced to think deeply about the child injury problem and possible solutions; had to think both about unique needs but also globally in coming up with solutions resulting in a much richer and reality based list of actions to be taken
- Focus on evidence-based solutions
- Forced to explore what they had to offer to the issue
- Consensus on what is important for child injury prevention in Hungary
- A plan exists and it is one that should provide positive results in a reasonable amount of time; regardless of budget and leadership questions unanswered the possibilities for action have been identified and partners can now begin to act
- Having a clear plan with backing of united experts might make child safety a 'safe' political issue in moving forward
- Child safety received increased attention and came into the "limelight"
- The planning process provides an example for other areas on how to effectively collaborate and cooperate between sectors and organisations.

Perceptions regarding lessons learned through participation in the process that will be taken forward

- Too early to say; planning process was good
- Need to stay in contact with stakeholders
- Coordination of action on the issue is important
- Good preparation is essential, particularly if the timeline is short
- It is important to formulate clear priorities in a plain understandable form that all stakeholders can understand
- People can be motivated
- Multidisciplinary work can multiply the efficiency of the planning process by bringing together different knowledge, ideas and opportunities
- The importance of having a good understanding of partners (e.g., mandate and approaches of police and health) allows for identification of ways to move forward together to address the issue
- Leadership is key to an effective planning process

- There are two levels where action is essential 1) the level at which key political and funding decisions have to take place and 2) the level where technical knowledge is necessary to achieve a realistic and achievable plan. The process focussed more on the second and there is therefore more work to be done on the first. In retrospect perhaps more could have happened concurrently.
- Stakeholders all work on the issue, but without a clear process a national plan would not happen
- It is possible to explore the ideal without thinking about the resource implications and then to take and explore that ideal and find a solution that is possible with a smaller investment but what is key in achieving this is having capacity
- Cooperation between stakeholders is key, thus having the right participants is key
- To achieve the injury levels of the most successful countries in Europe
- Our safety culture needs to change and is probably 20-25 years behind the countries with the lowest child injury rates. The good news is that speed up that process by building on their successes and lessons learned – we have evidence based solutions and need to open a dialogue between researchers and decision makers and show how some of the policy or legislation solutions although not always popular, are the way to save children's lives.

Perceptions regarding how child injury in Hungary is further ahead now than before the National Action Plan on Child and Youth Safety development process

- Different partners identified and willing to participate
- A coordinating network exists
- A plan exists with clear targets, which should allow for more effective action
- Plan done in conjunction with national experts, has been objectively started and cannot be minimised (e.g., by the media)
- The child injury situation remains the same but there is a clearer picture that can be shared with decision makers and government, the key expert partners in the country agree on the actions that need to be taken and have consensus on a plan on how to start
- A framework has been created to give more emphasis to child safety with the advantage of having decision makers and government involved in its development, thereby increasing likelihood that they will respond to the issue
- If progress is measured by professional participation, then there is a strong ground swell or surge of support which needs to be built upon
- The planning process will help align the existing initiatives and actions in the critical areas, will increase likelihood that good practices will be used
- The planning process has helped clearly identify the additional levels of action required (e.g., local level, municipal level, school level) to really impact the child injury issue
- Difficult to say, will depend on how seriously the final plan is taken. The group of stakeholders developing the plan does not have enough influence on the implementation phase. More work is needed with the influential groups (e.g., media) to ensure that there is public and political support for implementation of the final plan
- Have put a real face on the issue – not just statistical data but children's lives

Perceptions regarding what might enhance the process if starting all over again

- If the timeframe had been longer it would have been good to have made more of an effort to engage higher level political support for the implementation phase
- Would not change anything; the final plan will be positive if realised and one important step now is to communicate it to the public so all are aware of it which in turn should increase political support
- Try and get a bigger budget for work of experts in planning process
- More time for working groups to work together
- Invite others higher up in other ministries
- Involve the Ministry of Finance earlier in the process

Final comments

- Dr. G. Pall did most of the work and the process owes much to her and the National Institute of Child Health
- Communication of the final plan is key to maintaining momentum and increasing support for implementation
- The main challenge in moving forward will be focussing on continuity and perseverance of purpose – political bodies want to see action; we need to stay focussed so that the actions taken lead us towards our identified targets

Synthesis of interview results – strengths, weaknesses, opportunities and threats

The perceptions of those interviewed were very much influenced by when in the process they became involved. For example, some were not aware of the process until they attended the meeting on February 23, 2009 and others who have been involved with CEHAPE see the process going back five years.

As might be expected, responses to the interview questions were also very much influenced by the sector the interviewee represented (e.g., road safety, environmental health), yet what was interesting was that despite this there was great consistency in responses.

Identified strengths of the process

- Strong leadership from the lead agency
- Lead agency (National Institute of Child Health) has a broad enough mandate that their leadership was readily accepted by partners
- Key sectors were identified and their importance to planning publically validated (e.g., education, road safety, environmental health) making them strong partners in the process
- Effective coordination and organisation skills of CSAP Coordinator
- Excellent preparation for initial meeting – meeting package (e.g., situational analysis providing comprehensive picture of child injury and possible solutions) and information presented at meeting provided stakeholders with necessary information to create a common understanding and resulted in enthusiastic commitment to working on the plan and beyond that, to looking at enhancing their own role in the implementation phase
- Flexibility built into the process to allow for both a qualitative vision statement and quantitative targets; thereby meeting the needs of all stakeholders while creating a measurable framework for action
- Flexibility built into process and autonomy given to working group leaders to select best experts to meet working group objectives
- Level of engagement in organisations meant that the expertise needed to develop a grounded realistic plan was available
- An evidence-based good practice approach was used
- Tight timelines laid out for development process were met; while some felt they were too short, achievement of them was seen as a strength and reflected well on the process, the lead organisation and the CSAP Coordinator
- Partners are already examining how their existing business plans can be altered (and/or future ones developed) to begin to address actions outlined in the national plan
- The process has increased capacity for child injury prevention within Hungary by increasing the levels of awareness and knowledge of child injury in Hungary amongst key stakeholders, highlighting new opportunities for collaboration and cooperation and aligning towards common goals to address specified targets within a national child safety action plan

Identified weaknesses of the process

- Although an evidence-based good practice approach was used to identify future actions within the planning process, it is likely that existing practice will not be affected unless individual organisations choose to re-examine their policies and practices in light of the good practice information.

- High level political support for implementation has yet to be established and it is unclear how informed those higher levels are of the process, the resulting plan and the expectations on them with respect to implementation.
- The process for ensuring government endorsement is unclear, although this is in part due to uncertainties with which party will be in power following upcoming elections.
- At the time of the key informant interviews the relationship between the National Action Plan on Child and Youth Safety and the National Injury Prevention Strategy for all injuries all age groups was not clear and there was no formal arrangement to have the work of the CSAP group integrated into a larger national strategy and this was seen as a potential weakness moving forward. However, subsequent to the key informant interviews during the drafting of this evaluation report the National Injury Prevention Strategy became available and not only are children identified as a critical age group and National Child and Youth Safety Action Plan specifically quoted, but there is mentioned of the need for strong cooperation between the two initiatives so it is very likely that this is no longer an issue of concern.

Identified opportunities and threats moving forward

- Stakeholders are enthusiastic and have expressed a desire to continue to work together and to integrate components of the plan into their own business plans. This is an extremely positive outcome but presents both opportunities and threats:
 - o The National Action Plan on Child and Youth Safety development process has resulted in some very positive outcomes with respect to stakeholder involvement and a challenge now will be managing expectations. Several partners have expressed doubt that the plan will move forward and that implementation will occur in the current political and economic environment. To not lose the momentum gained through the planning process careful thought will need to be given to a communications strategy and how to build forward from the planning process toward implementation.
 - o Maintaining the support and positive communications of those involved will be important while government endorsement of the plan is sought. Effective distribution of the plan along with a clear advocacy strategy will increase the likelihood that government support will be forthcoming, but this will likely require a follow-up meeting(s) with the stakeholder group to explore where points of influence might lie, who knows who, what the best approaches might be, etc.
 - o The planning committee provides the basic framework for a national multi-sectoral child injury prevention committee/council to oversee coordination, implementation and monitoring of the National Action Plan on Child and Youth Safety, but issues such as composition (e.g., are all necessary ministries and national level stakeholders involved), level of representation (e.g., are those at the table those that can make the necessary decisions), structure (e.g., should the committee be at higher political level with permanent or ad hoc working groups of experts informing action) and resources (e.g., is their budget to support the activities of the committee) will require further consideration to make it a truly effective mechanism.
 - o Much of the work partners are proposing to take on “even if there is no budget for implementation of the National Action Plan on Child and Youth Safety” is educational in nature. While this is not a threat in and of itself, evidence shows that to be effective child injury prevention needs to be a combination of education along with product and environmental modification and adoption, enforcement and monitoring of policy and legislation that supports child safety. Thus educational efforts should not be done in isolation of the other approaches, and careful consideration should be given to what actions should take priority with or without additional budget for implementation so that there is a balance between the various approaches. Further, for those areas where there is no strong evidence base to support the educational approach (particularly if done in isolation of the other approaches), then it becomes important to encourage partners to conduct rigorous enough evaluations of their activities in order to be able to demonstrate

progress towards the targets outlined in the National Action Plan on Child and Youth Safety.

- The process to develop a National Injury Prevention Strategy for all ages and all injuries also presents both an opportunity and a threat to the National Action Plan on Child and Youth Safety process
 - o If there is stronger political support for the all ages all injuries approach than the child specific plan then it may make sense to integrate some or all of the targets, goals, objectives and actions into the larger plan. However without a clear formal arrangement between the two processes there is a risk that the hard work put into the National Action Plan on Child and Youth Safety development process may be overlooked or duplicated.
 - o On the other hand, the National Action Plan on Child and Youth Safety may provide an opportunity to demonstrate, using child injury as the example, how a national injury prevention plan can reduce injuries and save costs of treatment. The establishment of child safety as one of the issues for the Hungarian EU Presidency in 2011 provides an excellent opportunity that could benefit both the National Action Plan on Child and Youth Safety and the broader all ages all injury strategy.

- The level of engagement of the various ministries in the planning process was at the expert level rather than a higher political level and this was noted by several of the interviewees during the key informant interviews. The uncertainties of the current economic and political climates in Hungary make it difficult to know the best approach moving forward, however what is clear is that there is a need for government endorsement of the plan both in the form of political support and action (e.g., adopting the plan as national policy, committing to legislative change) and budget allocation (e.g., providing a line item budget for implementation of the strategy)
 - o A careful analysis will have to be done to decide the best time to move forward. It would be advantageous to find a high level political champion for the National Action Plan on Child and Youth Safety to assist in analysing the political and economic climates and advising action. This does not necessarily have to be a politician, but should be someone with knowledge and influence who believes in the safety of children as one of their fundamental rights.
 - o The existing partners should be involved in this process as appropriate, as should the broader groups of stakeholders they represent. There is a lot of influence there to be harnessed from an advocacy perspective, particularly amongst those experts that play a consultant role with government and professional groups involved with health, education and safety.

Review of the National Action Plan on Child and Youth Safety

The final version of the National Action Plan on Child and Youth Safety: Programme for Preventing Unintentional Injuries of 0-24 year olds, 2010-2019 was reviewed and analysed using five pre-developed questions. A sixth question, examining whether the programme is understandable by those not involved in the development process could not be answered at this time.

Does the programme identify of clear priorities?

The programme identifies five critical issues and from those an overall objective for each critical issue in addition to several specific objectives. Taken together these clearly outline what the priorities of the action plan are and this is further illustrated within the actions planned for the period 2010-2012, where actions clearly flow from objectives.

Does the programme take into account the current reality?

The preamble to the actual strategy provides an overview of available mortality and morbidity data, including a look at risk groups, inequities the broader policy environment in which the plan is being developed and reflects some of the other information shared at the planning meeting in February relating to evidence-based practice and successes in other countries in Europe. Although not clearly reflected in the document, the working groups that developed objectives, indicators and actions for each of the five critical issues based their work on the situational analysis and their own knowledge of the area, thus the plan reflects the current strengths, weaknesses, opportunities and threats.

Is the programme strategic?

The programme as outlined is strategic in several ways.

- It is divided up into five critical areas to which participating stakeholders could relate, within which actions will likely take place and to some extent also reflecting where governmental lead or involvement might come from.
- It identifies a 10-year target for injury reduction of 30% reduction in number of unintentional injury mortality rate in 0-24 year olds. The target provides a clear goal and an opportunity to assess progress throughout the programme's duration. If the target is achieved, Hungary will have reduced their unintentional injury mortality rate to a level currently experienced by the best performing countries in Europe.
- It includes proposed indicators for monitoring progress toward achieving the objectives outlined in each of the five critical areas (more on this in specific question below)
- The programme includes a specific action plan for the first three years 2010-2012 which provides an additional level of detail in terms of activities planned, anticipated results and which partner will coordinate the action and who the other collaborating partners will be.
- The actions for the first three years 2010-2012 include a mixture of actions addressing all categories of evidence-based methods to promote injury prevention (e.g., a mixture of the three E's – Education/behaviour change, Engineering of the environment/products and Enforcement of policy and legal regulations). However, the majority of the proposed actions specified within the final programme are aimed at increasing knowledge and skills and changing behaviour (i.e., are educational in nature) and a specific effort will have to be made to ensure that the necessary environmental and policy/regulation changes to support those efforts are made concurrently (e.g., policy gaps as identified in the Hungary Child Safety Report Cards 2007 and 2009). This was particularly clear for home safety where there are no specific actions planned beyond a review of existing policies/regulations.
- The programme tries to provide an initial recommended financial plan by providing an estimate of the overall required amount and acknowledging existing funds available to address the issue and by critical issue.

Are there specific measurable indicators of progress?

As noted above, for each of the five critical issue areas addressed by the overall and specific objectives, there is a list of proposed indicators for monitoring progress. There is no indication within the plan whether the data collection systems to provided the needed data for these indicators already exist or will have to be developed. Some of the information is likely already available from routinely collected data sources, however for others, new data collection methods will likely be required to ensure the necessary data are available and this will impact feasibility of the indicators. However, the inclusion of a specific critical issue and associated objectives that deal with coordination, evaluation and monitoring including a specific action to collect the data that is not already routinely available should increase the likelihood that the data required for the indicators for the other four areas are realised.

Is there an implementation plan?

As noted above, more detailed actions are outlined for the period 2010-2012 including a description of the specific action, anticipated results and who will lead and participate in the implementation. Although still at a reasonably high level, the action plan therefore provides a clear picture of anticipated activities during the period and an indication of initial commitments although exact roles and responsibilities beyond lead organisation are not included at this level.

Conclusions and recommendations

The Hungarian CSAP development process was well planned and executed from the perspective of delivering a national plan to take forward for implementation. The resulting plan is clear, strategic and includes specific indicators to facilitate monitoring of progress and a rough estimate of the resources needed to realise the plan. It not only specifies activities for the first three years of the programme, but also clearly identifies coordinating organisations and identifies collaborating partners for those actions. Partners who participated were positive, enthusiastic and although concerns regarding resources are there, are committed to moving forward with implementation.

Challenges moving forward will relate to maintaining momentum and engagement of partners, ensuring political and financial support for the process, ensuring a balance between educational, engineering and enforcement related activities and working to ensure that actions taken are evidence-based or if innovative are evaluated to build on the body of evidence for child safety. Based on these perceived challenges, we make the following recommendations:

- That specific work is done at the political level to gain government endorsement of the National Action Plan on Child and Youth Safety to ensure adequate resourcing of proposed actions so that real progress is made toward the goal of 30% reduction in injury mortality for the 0-24 age group.
- That specific work is done to ensure that the linkage and cooperation that has been initiated between the National Action Plan on Child and Youth Safety and the National Injury Prevention Strategy continues.
- That in addition to any working groups that are established to achieve the objective relating to coordination, evaluation and monitoring, that a national multi-sectoral child and youth injury prevention committee/council be established to oversee coordination, implementation and monitoring of the overall National Action Plan on Child and Youth Safety, with high enough level of representation to influence progress forward from the political and financial view points.
- That a communication strategy be part of the task of the child and youth injury prevention committee/council to ensure all stakeholders, including decision makers and the public are aware of the efforts and progress towards the 30% reduction in injury mortality for the 0-24 age group.
- That careful attention is paid to ensure that the programme as it progresses is not too focussed on educational approaches without concurrent attention to ensuring the physical and policy environment are supportive to desired behaviour change.
- That children and youth continued to be involved as the programme is implemented and evaluated.

Annexes

Annex 1 – Hungarian CSAP Development Process in 2009

	February			March			April			May			June		
Agree on the concept	■														
Update of data analysis, international comparison	■	■	■												
Working group meeting with stakeholders (20-25 persons) brain storming on vision statement, and critical issues			Feb. 23												
Agree on vision statement, and critical issues (board consultation by e-mail)				■	■										
Selection of good practices (experts)				■	■	■	■								
Editing the national CSAP document							■	■	■	■					
Consultation on the national CSAP document- stakeholders										■	■				
Consultation on the national CSAP document- broad										■	■				
Finalisation													■		
Design, printing														■	■
English translation														■	■
List of recipients														■	■
Publication														■	■
Process monitoring	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■

Annex 2 – Evaluation

List of interviewees

Gégény Istvan, National Committee for Injury Prevention (Traffic Safety)

Csaba Kiss, President, National Committee for Injury Prevention (Traffic Safety)

Prof. Dr. habil. Péter Holló, Research Institute of Transport Sciences

Andrea Odor, National Chief Health Visitor, Office of the Chief Medical Officer of Health

Dr. Gyula Dura, Director, National Institute of Environmental Health, CEHAPE focal point

Dr. Anna Páldy, Deputy Director, National Institute of Environmental Health

István Simonyi, Ministry of Education and Culture

Dr. Bálint Dobi, Ministry of the Environment and Water

Dr. Zsuzsanna Pocsai, Ministry of the Environment and Water

Dr. Zsófia Mészner, Director, National Institute of Child Health

Dr. Gabriella Páll, CSAP Coordinator, National Institute of Child Health

Elvira Barkóczi, National Directorate General for Disaster Management

Zsuzsanna Jádi, National Directorate General for Disaster Management

List of interview questions

1. What do you think are the indicator(s) of success for the Hungarian CSAP development process?
2. What do you think were the challenges the planners faced in going into this process? Did the planning process address these challenges and if yes how? Do you think the challenges successfully addressed? If not what should have been done differently?
3. What do you think have been the strengths or facilitators of the Hungarian CSAP development process and why?

Additional prompts to follow open-ended question (used as appropriate and as required)

- Was having Child and Adolescent Health identified as a priority issue important?
- Was aligning with other national processes important? For example, CEHAPE, the Visegrad Group
- Was the leadership and management of the process from the Institute of Child Health a strength?
- Were there key partnerships that helped move things forward?
- Was it a benefit to be part of the bigger European initiative and how?
- Did you have the right people involved to make the decisions necessary to achieve your goal?
- Has communication between partners enhanced the process? How?

4. What have been the barriers/hurdles or weaknesses of the Hungarian CSAP development process and why?

Additional prompts to open-ended question (used as appropriate and as required)

- Has aligning with other national processes held you back at all?
- Has the fact that so many different sectors are involved and the differing organisational priorities been a challenge?
- Has having had to do this on top of already busy lives been a challenge to the process?
- Have changing government priorities and personnel affected progress?
- Has being part of a European initiative created any challenges?
- Has failure to engage certain people or organisations hurt the process?
- Has consistent communication between partners challenged progress?
- Have you had adequate time, money, people and resources to support the process?

5. What do you think have been the key decision points or pivotal events that influenced the direction and outcome of the Hungarian CSAP development process? Were these anticipated or were they a surprise?
6. Do you think there have been any unanticipated gains as a result of the Hungarian CSAP development process? (e.g., new partners identified, alliances, synergy, increased capacity)
7. Do you think there have been any unanticipated losses as a result of the Hungarian CSAP development process? (e.g., increased turf struggles, longer timeframe to get to finished plan)
8. What have been the most valuable aspects of this Hungarian CSAP development process and why?
9. What lessons have you learned that you will take with you as you move forward with CSAP?
10. How do you think child injury in Hungary is further ahead now than it was before the CSAP process? What has been gained through the investment in the process?
11. If the process could start all over again what would you change and why?

List of critical questions for CSAP draft

1. Does the plan identify clear priorities?
2. Does the plan take into account the current reality of the child injury field and broader environment in Hungary: strengths, weaknesses, opportunities and threats?
3. Is the resulting plan strategic?
4. Are there specific measurable indicators of progress identified within the plan?
5. Is there an implementation plan as part of the plan development and have next steps and roles and responsibilities been clearly identified?
6. Is the plan understandable by those who were not involved in the process?