



Caring and Supportive Environments

Abstracts

These abstracts were originally presented at the WHO European Healthy Cities Annual Business and Technical Conferences 2010-2014.

They are organised alphabetically by city and presentation year.

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Abstracts on other WHO European Healthy Cities Themes may be accessed [here](#).

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CITY / NATIONAL NETWORK: AYDIN
ABSTRACT NUMBER: 091
TITLE: SOCIAL MUNICIPALITY
CONFERENCE: 2013 IZMIR
CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - HEALTH PLAN/STRATEGY
TAGS: SUPPORTIVE ENVIRONMENTS, SUSTAINABLE AND HEALTHY ENVIRONMENT

Abstract

The project objectives are supportive environments, health services and social services. The long-term goals are to gain self-awareness of importance, a sustainable local environment, risk groups and support for disadvantaged groups and creating a national network. Private purposes are establishing a regional network of social support (AYBA), social support centres and creating a local database. The partners of the project are public institutions and agencies, nongovernmental organizations and citizens.

We have worked with a team of 40 people in 22 neighbourhoods. We helped obtain coal, wood, food and hot meals for needy people. We provided care for bedridden people. Ambulance and hearse services were provided. Personal care services were provided to older people and to bedridden and disabled people. Household supplies and clothes were distributed. Two memory-strengthening centres were established for older people. Dental care services were given in schools. AYBA's catering services distributed meals to indigent people every day in 2012. The homes of older people without relatives or friends were cleaned. Three children's cultural centres were opened.

AYBA was founded based on the concept of the social municipality. Every sector of society serves. AYBA has therefore become a model project in Turkey. In 2012, the women's guesthouse hosting the target realization rate of women and children respectively is 291% and 430%. The target realization rate of strengthening the central memory is 175%. Also, the target realization rate of activity preventing family breakdown is 291%. Additionally, the target realization rate of food aid, older people, disabled and needy people, cleaning help and personal care services exceeds 100%.

CITY / NATIONAL NETWORK: BARCELONA

ABSTRACT NUMBER:082

TITLE: HEALTH IN THE NEIGHBOURHOODS

CONFERENCE: 2012 ST PETERSBURG

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE

CITIZENSHIP - COMMUNITY PARTICIPATION

TAGS: COMMUNITY ASSETS, NEIGHBOURHOODS, VULNERABLE AREAS, HEALTH INEQUALITIES, DETERMINANTS OF HEALTH

Abstract

The Parliament of Catalonia (Spain) passed the Neighbourhoods Law in 2004. It encompasses comprehensive regenerations of vulnerable neighbourhoods to improve urban conditions. Following this initiative, in 2007 the regional Health Department launched Health in the Neighbourhoods, which introduces explicit components to reduce social inequalities in health.

Barcelona City Council along with the Public Health Agency of Barcelona have a long-term commitment to reduce inequalities in health; in this context the Neighbourhoods Law and Health in the Neighbourhoods have been perceived as tools to reduce inequalities in synergy with other administrations. Even though both regional and city governments have changed in the last election, and the crisis has reduced budgets, political support remains strong.

Since 2008, Barcelona has had 12 neighbourhoods benefit from the Neighbourhoods Law (of 73). In partnership with the municipal districts and the consortium responsible for health care in the city (a regional responsibility), the Public Health Agency of Barcelona coordinates Health in the Neighbourhoods. This programme applies intersectorality, community engagement, sustainable and evidence-informed interventions and systematic evaluation through five steps: (1) political alliances and setting of a community agents group, (2) community needs and assets assessment by means of quantitative and qualitative studies, (3) community priority-setting, implementation of evidence-informed and sustainable interventions, (4) process evaluations, user's satisfaction and self-perceived health and (5) maintenance. The strategy for each neighbourhood is based on a public health agent and supplemental economic resources for the first three years. Then, a working group remains active by its own, with a link with the Public Health Agency.

All participating neighbourhoods have reached a political agreement, a community working group and a needs and assets community assessment. The prioritized assets and needs are similar everywhere, and the compiled responses have formed a growing catalogue of interventions to reduce inequalities in neighbourhoods: physical activity schemes (walking and extracurricular sports activities), adult and elder social networking, youth drug prevention, health literacy and sexual health promotion. The outcomes are positive in terms of self-perceived health improvements and the satisfaction of users and community agents.

Research on the impact on population-based health indicators is being developed through the Barcelona Health Survey. This project has contributed to: (1) sharing knowledge, confidence, methods and aims among municipal sectors and territories as well as among departments in the Public Health Agency of Barcelona, (2) developing health impact assessment with urban planners and (3) moving inequalities in health and health in all policies forward in the political agenda.

Although the population impact of Health in the Neighbourhoods is necessarily low, as it acts mainly on intermediate health determinants, this project already has achieved some results and empowered municipal abilities.

CITY / NATIONAL NETWORK: ÇANKAYA

ABSTRACT NUMBER:051

TITLE: ÇANKAYA WOODEN TOY WORKSHOP PROJECT

CONFERENCE: 2013 IZMIR

**CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE
CITIZENSHIP - COMMUNITY PARTICIPATION. TAGS: PARTICIPATION,
COMMUNITY, EQUALITY, SOCIAL INCLUSION**

Abstract

The overall goal of the project is to ensure the integration of people with disabilities with society based on the principle of equality and health for all. The Çankaya Wooden Toy Workshop, which was designed within the framework of the project Çankaya without Disabilities, aims to provide professional and social rehabilitation, facilitate the participation of people with disabilities in daily life and increase their living standards.

The stakeholders of the project are the Municipality of Çankaya, Ministry of National Education, Turkish Employment Institution and Praunheimer Werkstätten.

The trainees are provided 1008 hours of theoretical and technical training programme about the production of wooden toys. Training is carried out along with an intensive rehabilitation programme that also includes the families of the people with disabilities. The first term of the project started on 21 September 2011 and ended on 21 March 2012. The second term was between June 2012 and November 2012. The third term started in January 2013. In each term, 20 people with either physical or mental disabilities are accepted into the programme.

Social activities such as music, yoga, painting and drama are carried out with the support of volunteer instructors. After the training on oral and dental health, the trainees are provided an oral and dental check-up free of charge. The trainees are provided free transport and lunch during the training.

The Turkish Employment Institution pays per diem and covers the employment and accident insurance of the trainees. The Municipality of Çankaya pays all the other expenses and ensures the sustainability of the project.

The trainees who complete the training successfully are given a certificate as a wooden toy manufacturer. Serial production, distribution and sale of wooden toys was to be started in April 2013. Ten of the graduates were employed in the Municipality and 10 more will be employed with the development of serial production. However, the ultimate goal of the project is not to provide employment in the Municipality but to prepare them for daily life by supporting their professional and social rehabilitation. The feedback shows that the project has promoted the health of the trainees and their families.

CITY / NATIONAL NETWORK: CARLISLE

ABSTRACT NUMBER: 192

TITLE: CARLISLE: CARLISLE DOORSTEP WALKS

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING

Carlisle has an increasing and ageing population. In addition, the number of adults taking part in physical activity for at least 30 minutes on at least 12 days of the last 4 weeks (equivalent to 30 minutes on three or more days a week) in Carlisle (24.5%) is below the county (Cumbria) average (25.2%).

Adults who are physically active have a 20–30% reduced risk of premature death. Physical activity affects cardiovascular risk, reduces the risk of some types of cancer such as colorectal cancer, reduces the incidence of falls and osteoporosis among older people and reduces depression, stress and anxiety.

The aim was to increase physical activity levels and to improve mental and social aspects across the Carlisle District.

The walks take place every other week at various locations around the Carlisle District and are about one hour in length. We take the walks to different locations and to rural communities to assist with access. We train volunteers to create a sustainable and supportive model.

Partners and health professionals refer into the scheme – examples include: nurses, general practitioners, physiotherapists, nurses, rehabilitation, exercise-on-referral schemes and leisure centres.

Between August 2013 and June 2014: 21 walking days (42 walks – two per day); 131 walkers; total attendance 872 (average 21 per walk); maximum on one walk 56; walk case studies demonstrate the effectiveness of the scheme; 12 active trained volunteers; and recognized as best practice.

Evaluation highlighted that walkers attend for social support (some have recently become bereaved), to find out about the area in which they live or to which they have moved, for health benefits and to meet new people as examples. Exit route pathways (including longer and harder walks) have had to be created, due to improvements in health and fitness levels.

The health walk programme is recognized as a best practice and is a positive tool to increase physical activity levels and social and mental benefits and to support active ageing in the community.

CITY / NATIONAL NETWORK: CARLISLE

ABSTRACT NUMBER:108

TITLE: CARLISLE 'GET INTO READING'

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE

**CITIZENSHIP - COMMUNITY PARTICIPATION TAGS: SOCIAL INCLUSION,
MENTAL HEALTH AND WELLBEING**

Abstract

Through the Healthy City Steering group a Get Into Reading Project is being established across Carlisle. Get Into Reading is a social inclusion project which aims to improve wellbeing, build community and extend reading pleasure, through shared reading of high quality literature. At the core of Get Into Reading are weekly, very informal reading groups in which trained facilitators read aloud, with members joining in as they wish. This means there's no need to read at home and it makes the activity accessible to anyone, whatever his or her educational background.

This project is a continuation or 'bridging' of a pilot, ten week programme run in partnership by Carlisle City Council and Croftlands Trust (an organisation which supports those suffering mental illness.)

There are many social and emotional benefits to participating in a GIR programme, including:

- It enables participants to gel as a wider group, moving away from the usual fragmented groups, learning more about each other's lives and making new friends.
- It encourages deep thinking, beyond surface events, enabling participants to reach their own conclusions through sharing thoughts and ideas. (This is important for this client group who often feel that they have no control over their lives and look to others to make decisions for them.)
- Reading aloud is naturally relaxing, important for people suffering from anxiety and agitation.

- Developing confidence and self-esteem, through increased input into reading and discussions. The process is non-judgemental, there is no right answer and all comments are given consideration.
- Reading shifts the focus from the self, to consider other points of view, developing empathic skills. The themes and thoughts from the story continue to influence participants beyond the session.
- Improved concentration. Many mental health sufferers find it hard to focus and are unable to read alone, however reading aloud hugely improves ability to concentrate and not only are they able to follow the whole story to the end, but are engaged, involved with it.
- The project has a formal evaluation with participants and support staff to assess the personal development, health and happiness of the client group. Because this affiliation are likely to have suffered long and complicated bouts of mental illness evidence is less likely to regard recovery and much more likely to look at quality of life or reliance on services. Much of the evidence is anecdotal but this more sustained version of the programme offers us the chance to record incidencies of acute illness and return to inpatient services, both with a direct cost implication for the health authority. This evidence of value will be used to formulate an approach to health care commissioners to support the activity.
- The project will be delivered by Jane Hanlon, who is a trained GIR facilitator, affiliated to The Reader Organisation in Liverpool. She has extensive experience of devising, delivering and evaluating arts projects in the community, has delivered GR sessions with a range of organisations in Cumbria and facilitated the pilot project at Spencer Street in 2010.
- The Healthy Communities Group of the Carlisle Partnership will also be seeking to re-establish their income-maximisation project aimed at ensuring that Older People receive tailored and targeted benefits advice and support to maximise their income. This will seek to re-establish a project which was run with considerable success between 2007-2009 but with improved linkages to programmes around energy efficiency and fuel poverty activity.

CITY / NATIONAL NETWORK: CZECH NATIONAL NETWORK

ABSTRACT NUMBER: 50

TITLE: HEALTHY CITIES IN THE CZECH REPUBLIC TOWARDS HEALTH AND SUSTAINABLE DEVELOPMENT: CONNECTION AND SYNERGY BETWEEN NATIONAL AND LOCAL ACTIVITIES

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - HEALTH PLAN/STRATEGY. TAGS: RESOURCING, TECHNOLOGY, TOOLS, OLDER PEOPLE

Abstract

The aim is to present the systematic approach of Healthy Cities of the Czech Republic, the Czech national network of healthy cities, towns and regions as a framework and some of the follow-up activities and projects. We focus mainly on: health as a topic of the year 2010 (set by the Government Council for Sustainable Development): the process and outcomes of setting up this topic, links to the implementation of the national Sustainable Development Strategy and national partners; national support for the activities of Healthy Cities of the Czech Republic ; a systematic approach to healthy city development at the local level in the Czech Republic; urban health plans and their links to municipal budgets and to strategic plan and other development strategies, including indicators; healthy city projects and Local Agenda 21 – common methods, linking the outcomes, benchmarking tools, mass-media work and communication with the public.

We will also present specific activities: successful practices and innovative solutions. The About Old Age Amusingly project is a health literacy project with equity factors: an educationally entertaining project focused on the subject of healthy ageing, with well-known Czech moderators and entertainers together with local specialists in a given field discussing with older people on active ageing issues as well as on social and health care at the local level. The performance primarily aims at seniors and family members who are dealing with or will be dealing with active care for a senior. The Healthy City Project is cooperating with a health-promoting company in the joint development of the project safe routes to school (case study from the City of Mlada Boleslav).

There is cooperation on healthy city projects and Local Agenda 21 with healthy city partners in Switzerland, including exchange of good practices (health impact assessment, active living, urban environment etc.) Setting up a proper system at the local and national levels and regularly evaluating progress are required for considerable and sustainable effects on local or national policies. This presentation aims to show a case study from Healthy Cities of the Czech Republic and may inspire other networks with similar conditions and focus. We also believe that this approach has already had positive outcomes.

Many of the Czech healthy cities have been rewarded for their effort at the national level, such as a prize for quality management in public administration and many others, and also internationally (International Awards for Liveable Communities, Safe Communities etc.). Systematic approaches help them to achieve better concrete results.

CITY / NATIONAL NETWORK: DENIZLI

ABSTRACT NUMBER: 057

TITLE: TRAFFIC TRAINING PARK OF THE MUNICIPALITY OF DENIZLI

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN

TAGS: TRAFFIC EDUCATION, CHILDREN AND YOUNG PEOPLE

Abstract

Traffic Training Park: making the children who are the future generation at an early age accustomed to city life and raising traffic awareness. Traffic education is very important in raising living standards and ensuring the social future. The aim of establishing the park is to increase the information of children in our city concerning traffic, as behaviour establishing compliance with traffic rules and the training is expected to provide a decrease in road crashes.

The students are given theoretical training followed by practical training in traffic, reinforcing the training. With practical training, various situations are described: as pedestrians and as drivers using battery-operated vehicles. All training is free of charge at Traffic Training Park. The Traffic Training Park is the first in the Aegean Region. The training park is a miniature city with vehicle roads, bike paths, lighted and unlighted intersections, pedestrian crossings, overpasses, a gas station, amphitheatre, schools, hospitals and nurseries. In addition, to ensure the safety of the children, there are 24-hour surveillance cameras monitored by security officers.

The Traffic Training Park has a different concept from the others found in Turkey, with green spaces, walking paths, seating areas, fitness equipment and ornamental ponds allowing the parents to have a pleasant time together with their children.

The training continues throughout the year, allowing children to experience various situations that can arise in city and urban social life and become conscious individuals at an early age.

The Municipality of Denizli established the Traffic Training Park, which is situated on 7000 m², for children of the city to learn traffic rules in the right way. Besides theoretical training, practical training is also given. So far, 3790 primary school students aged 10 years have received training.

CITY / NATIONAL NETWORK: DENIZLI

ABSTRACT NUMBER:032

TITLE: ACCESS TO THE LABOUR MARKET FOR PEOPLE WITH PHYSICAL DISABILITIES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - WORKPLACE

TAGS: LABOUR MARKET, PEOPLE WITH DISABILITIES, TRAINING

CONFERENCE: 2010 SANDNES

Abstract

Several organizations from the Netherlands and Turkey (Denizli) implemented the Disabled at Work Project in Denizli between May 2007 and April 2010. The Ministry of Foreign Affairs of the Netherlands financed the project. The budget was about €700 000. The owner of the project was Workability Europe, and the Municipality of Denizli was the local coordinator of the project. The project specifically helped the beneficiaries (they will get jobs) but in addition, the project supported changing the attitudes of decisions-makers and politicians, who are becoming more and more aware of the fact that people with disabilities are equal members of society.

The project is a best practice of a multiple organizational cooperation. Local organizations including the Municipality, National Education, Health Directorate, Employment Agency, Social Service Directorate, Chamber of Commerce, Disabled Association and the University signed a cooperation protocol and established an organizational structure to provide qualified employment conditions to people with disabilities. The Ruward method was chosen for determining the working capacity of people with disabilities. Two test sets were purchased, and test centres were opened. The chosen method was evaluated and adapted to the local conditions. A support point was opened in the Municipality for the people with disabilities to provide information about their rights and guide them to the relevant organizations for working or for social insurance. A database for people with disabilities has been prepared. All the local partners can access the database. With this database, all the information on people with disabilities in Denizli is collected using one system. A new job consultancy system has been established in Denizli. The job consultant methods observed in the Netherlands were taken as a model. With this consulting system, experts for career development can guide people with disabilities. Vocational education classes were organized.

Vocational education teachers were trained as job coaches. Job coaches are responsible for the progress of the training and evaluation of trainees. Job coaches report to job consultants and secure the success of the training. Trained and qualified people with disabilities are matched with the employer according to their abilities. These people with disabilities are employed in best fit companies. Further, experts monitor the people with disabilities in their workplaces.

All the local partners implement this system under the guidance of partners from the Netherlands. The national Administration for Disabled People follows the system developed, and the Turkish Employment Agency has taken it as a model and decided to disseminate it. The system was put into writing, and guidelines about cooperation for employment of people with disabilities for local administrations have been prepared. All the local partners in Denizli signed an agreement for continuing the cooperation. The cooperation will continue under the City Employment Commission, which is directed by the Governor.

CITY / NATIONAL NETWORK: ESKIŞEHİR

ABSTRACT NUMBER: 098

TITLE: ESKIŞEHİR ALZHEIMER CENTRE

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES. TAGS: HEALTHY AGEING, OLDER PEOPLE, ALZHEIMER'S, SOCIAL INCLUSION

Abstract

The improved and improving countries in the world are going through a demographic change. As a natural result to this change, all societies are in an effort to prepare for the old age period, which is a real, natural part of life. However, many factors can also determine the content, method and timing of these preparations.

The decreasing fertility in the past 20 years in Turkey has led to some important changes in the composition of the population. According to the Turkey population and health research results, the share of people over 65 years old reached 6.8% as of 2008. If this change is expressed in numbers, it means about 5 million people. The projections prepared by the State Planning Organization state that the population older than 60 years in our country will be 8.4 million in 2015 and 12.1 million in 2025. The life expectancy at birth in Turkey was 70.8 years in 2005 but is estimated to be 72 in 2015, and 74 by 2023.

With the rapidly aging population, creating spaces where older people can have a good time must be one of our aims. As the Municipality of Eskişehir Tepebaşı, we have planned a life village with 250 beds where people with disabilities, healthy older people and people with Alzheimer disease can reside. When the 30 hectares of land that contains 57 duplex villas is finished, the bed capacity will be approximately 250. With its greenhouses and occupational therapy areas, it is planned that this project will set an example. It is planned that the Alzheimer Centre, the first leg of the Life Village project, will have approximately a 60-bed capacity.

The protocol signed between Eskişehir Alzheimer Institution and Tepebaşı Municipality on 2 November 2012 arranged for the operation of the Alzheimer Centre to be carried out with the Institution.

The first phase started its service in 2 January 2013 with a 20-bed capacity. Together with 15 care patients, morning care patients are also looked after in this Centre. In this morning care centre, which provides service 6 days a week, the municipal vehicle picks up 12 people with Alzheimer disease from their homes and brings them to the Centre accompanied by the caretakers, who take turns every two days. Our patients spend their time together with their peers and people in the same conditions from 9:00 to 17:00 and they are driven to their homes accompanied by their caretakers.

With this project, it is aimed that the people with Alzheimer disease will be socialized, have quality time, the relatives will be supported in patient care and they will be able to have time for themselves. With its staff comprising a specialist doctor, psychologist, social service expert and caretakers of older people, the older people receive education by carrying out rehabilitation studies that will help them to continue their life easier, and they will also be able to spend fun time with the activities prepared by experts in charge and with peer patients like themselves. With its green areas, greenhouses, sports and walking areas, common use areas, combining disabled and healthy old people, when the project is completed, it is preparing to become one of the first in Turkey.

CITY / NATIONAL NETWORK: ESKIŞEHİR

ABSTRACT NUMBER: 019

TITLE: OUR SINGLE OBSTACLE IS OUR PREJUDICE: GOKKUSAGI CAFE

CONFERENCE: 2012 ST PETERSBURG

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE

CITIZENSHIP - COMMUNITY PARTICIPATION

Abstract

According to Tepebasi District Governorship research, 42080 children seem enrolled in schools. This number includes pre-school, elementary and secondary education. The high rate of child population means that services increase and new methods and policies are developed. April 23th Children's Art and Culture Center located in the neighborhood of Tunali. This area is with population of 7.839 which is known to be low income families. The Center has also become important central to Eskisehir. The center is designed for children to figure their future through music, theater, dance, play, sport activities. At the same time, the needs of families and schools are very important to design studies in the center. The Center is composed of four classes, multi-purpose room, theater hall, game room, and library and gym area. The center serves children and youth between the ages of 3-17. All events and courses are held free of charge.

From an early age, children are affected by people who are an important in their life, namely, parents, teachers and other elders. The relationship between children and adults take an important place in their future life. If we want to be healthy individual, we must have a high opinion of children. In the socialization process, healthy communication with children is very important to up growth. In Turkey, A total 3-5 aged children percent of 22.53 continue to preschool education. However, possibility of vulnerable groups is low to benefit from preschool education. For this reason, the number of 147 children aged 3-6 applied the Denver Develop Mental Screening Test in April 23th Children's Art and Culture Center.

According to results of test, 40 percent of children were found to be border or back at the personal-social development; 9 percent of children's development of language is limit or reverse. 11 percent of children's development of gross motor skills is limit or reverse. In light of this study, the number of 535 children aged 3-6 take services from their needs. The center provides children and parents very important programs such as; children-author meeting, theatres, modern and folk dance, puppet workshop, fun-hygiene workshop, recycle project, taekwondo course, and piano and guitar course.

In addition to these, parents also benefit from some programs for adults, namely, health, intra-family communication and healthy nutrition seminars. The idea of life-long healthy enable women participate aerobic courses. In today's world, women are still responsible care of children. The Tepebasi Municipality gives an importance of gender studies. Therefore, in the center, professionals hold utility program for fathers.

According to 2011 registrations, the number of 573 children participated in music course; number of 559 children participated in modern and folk dance course; number of 492 children participated taekwondo course; number of 535 children participated in drama course; number of 45 children participated in theatre group; number of 151 children participated in preparation of national exams; number of 1050 children participated in after-school classes. Total number of children who take advantage of the services from the center was 3200 in 2011.

CITY / NATIONAL NETWORK: ESKIŞEHİR

ABSTRACT NUMBER: 013

TITLE: DETERMINANTS OF THE FUTURE FOR HEALTHY CHILDREN: APRIL 23 CHILDREN'S ART AND CULTURAL CENTRE

CONFERENCE: 2012 ST PETERSBURG

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - COMMUNITY PARTICIPATION

TAGS: SPORT, VULNERABLE GROUPS, FAMILIES, CHILDREN, CULTURE AND ARTS

Abstract

According to Tepebaşı District Governorship research, 42 080 children are enrolled in schools. This number includes preschool, elementary and secondary education. The high number of children means that services increase and new methods and policies are being developed.

The April 23 Children's Art and Culture Center is located in the neighbourhood of Tunali. This area has a population of 7839, which is known to be low-income families. The Centre has also become important to Eskişehir. The Centre is designed for children to figure their future through music, theatre, dance, play and sports activities.

At the same time, the needs of families and schools are very important to design studies in the Centre. The Centre is composed of four classes, multi-purpose room, theatre auditorium, game room, and library and gym area. The Centre serves people 3–17 years old. All events and courses are held free of charge.

From an early age, children are affected by people who are important in their life: parents, teachers and other adults. The relationship between children and adults takes an important place in their future life. If we want them to be healthy individuals, we must have a high opinion of children. In the socialization process, healthy communication with children is very important to growing up. In Turkey, 23% of children 3–5 years old are in preschool education.

However, vulnerable groups have few opportunities to benefit from preschool education. For this reason, 147 children aged 3–6 years old took the Denver Developmental Screening Test at the April 23 Children's Art and Culture Centre. The results showed that 40% of children were found to be borderline or under the norm in personal-social development; 9% of children's development of language is borderline or under the norm; and 11% of children's development of gross motor skills is borderline or under the norm.

In light of this study, 535 children aged 3–6 years old are getting services based on their needs.

The Centre provides children and parents very important programmes such as children–author meetings, theatre, modern and folk dance, puppet workshops, fun-hygiene workshop, recycle projects, taekwondo courses and piano and guitar courses. In addition to these, parents also benefit from some programmes for adults: health, intra-family communication and healthy nutrition seminars. The idea of life-long health enables women to participate in aerobics courses.

In today's world, women are still mainly responsible for the care of children. The Municipality of Tepebaşı gives priority to gender studies. Therefore, in the Centre, professionals hold utility programmes for fathers. According to 2011 registration, 573 children participated in music courses; 559 children participated in modern and folk dance courses; 492 children participated in taekwondo courses; 535 children participated in drama courses; 45 children participated in theatre groups; 151 children participated in preparing for national exams; and 1050 children participated in after-school classes. The total number of children who took advantage of the services from the Centre was 3200 in 2011.

CITY / NATIONAL NETWORK: GRENOBLE

ABSTRACT NUMBER:109

TITLE: SIGNALLING SYSTEM FACILITATING WALKING IN GRENOBLE

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE

CITIZENSHIP - COMMUNITY PARTICIPATION. TAGS: OLDER PEOPLE

Sedentary lifestyles increase the prevalence of obesity and many chronic diseases. Associated with a balanced diet, a regular physical activity allows people to stay in good shape and prevent disease. The City of Grenoble, within the framework of its local plan of health and the national plan on nutritional health, is committed to promoting physical activity.

Walking in Grenoble constitutes the primary mode of travel (42%), in front of cars (32%), public transport (21%) and cycling (5%).

To increase regular physical activity, the city will sign walking times throughout the city, rather than the distances, to encourage more of the population to choose walking instead of using their own car.

In 2013, the city implemented a signalling system that provides information on the time required for pedestrians to cross the town (30 km of pathways and pavements). The project links the policies of health, travel and urban development. It promotes an active life on a daily basis and, through the practice of walking, it encourages sustainable active mobility and completes the transport modal offered.

The interest of this project of public health is that it allowed gathering, around a common project, the technical departments (town planning, public places and transport), the health service and a university research team.

The project allowed the technical departments within the local authorities to become aware of public health priorities. It has improved the complementarity between public transport and walking. The WHO tool HEAT (Health Economic Assessment Tool) shows that 27 lives a year in the city of Grenoble will be saved with this level of walking.

This project is being evaluated by a university research team (acceptability of the signs by the locale population and whether the level of walking has increased). The results were to be completed during summer 2014.

The project allowed the technical departments within the local authorities to become aware of public health priorities. It has improved the complementarity between public transport and walking. The WHO tool HEAT (Health Economic Assessment Tool) shows that 27 lives a year in the city of Grenoble will be saved with this level of walking.

CITY / NATIONAL NETWORK: GYOR

ABSTRACT NUMBER:039

TITLE: GYOR "ELDERLY FRIENDLY CITY"

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES. TAGS: PHYSICAL ACTIVITY, SOCIAL INCLUSION, OLDER PEOPLE

Abstract

In the City of Győr the percentage of older people is growing. Győr has taken part in the healthy ageing subnetwork. In 2005, we started to develop a health profile of adults older than 50 years. The health profile set out a concept to develop the quality life of older people. In 2007, the Older People's Council was established. To collect missing qualitative data to the health profile of older people, we conducted a survey on a representative sample of inhabitants older than 50 years.

The data show that 56% of respondents have mild, moderate or severe depression. In daily activity, 43% of the respondents feel limitations, but 23% would be willing to take on voluntary work.

Urban planning and housing: in the WELHOPS project funded by the European Union, the main goal was that services support older people in living in their own homes as long as possible. One main result was guidelines, which were very helpful in planning new homes or renovating older people's homes. The local government created a foundation, which provides opportunities for older people to apply for money to renovate their flats according to this manual.

Other initiatives include shaping community spaces, a park for senior citizens, a playground for older people and banks in several districts.

Social services: the social provider system functions well in our city. There are primary health and daily care, meals, home care service and help at home with a signal system. Space in institutions that provide permanent or temporary residence for older people has been expanded in recent years.

Health services and programmes: these include primary health care, screening programmes, “health markets” in 12 districts in the city and a “chat-network” for mental health.

Active living: this includes 200 season tickets to the swimming pool for nongovernmental organizations of older people, regular sport programmes for older people in six districts of the city, Senior Games, a leaflet for nongovernmental organizations to promote gymnastics and a survey and physical activity in older people’s homes.

Education and culture: initiatives include a university for senior citizens, an open generation teach-in, Grandma-Net, theatre and concert tickets free of charge for older people and intergenerational programmes.

Success factors include situation analysis, concept, political support, media partners, strong nongovernmental organizations, cooperation and collaboration.

Challenges include stereotypes about older people, low pensions and reaching isolated people. Municipal activities can persuade other institutions, nongovernmental organizations, agencies and companies to be active for older people. In 2010, the Ministry honoured these activities with a title: Elderly-Friendly City.

CITY / NATIONAL NETWORK: HELSINGBORG

ABSTRACT NUMBER: 083

TITLE: IMPROVING HEALTH AND EDUCATION AMONG CHILDREN IN HIGH-RISK GROUPS IN HELSINGBORG

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN. TAGS: EVALUATION, MENTAL HEALTH AND WELLBEING, LOW INCOME, HEALTH PLANS

Abstract

Helsingborg is the ninth largest city in Sweden, with a population of about 125 000. Sixteen per cent of the city’s children finish compulsory school at 16 years old without adequate grades.

To turn these negative statistics around, Helsingborg is leading an ambitious development process that aims to improve health and education for children at risk. Some of these children are in foster care; others live in permanently low-income families or are new immigrants.

These groups achieve lower educational results than others and, as a result, face worse future prospects.

The work concerning foster children in Helsingborg started in 2005 and has been scientifically evaluated. The aim of working in multiprofessional teams with the children is to better understand and improve the education process so that it is better adapted to the children's needs. Through continual, systematic follow-up, all involved parties are able to learn which methods and approaches work and which do not. Problems are moved from the child to the environment and surrounding organization.

The positive results from the work with foster children have made the city apply the new model to other risk groups – children in families living on public transfer payments and immigrant children. Seven schools in Helsingborg and the neighbouring city of Landskrona are directly involved in this venture. The process occurs on three different levels: individual, group and system-wide. The primary focus is on reading and writing, mathematics and health.

Within health, the Swedish National Institute of Public Health provides support to the city. At the seven participating schools, children, teachers and parents take part in surveys including measuring children's physical health (height, weight, blood pressure and dental health), health habits and mental well-being. Stress levels are measured using saliva samples. Parallel to the health survey, each child's educational results (reading, writing and mathematics) are measured.

The intention is to study the correlation between positive trends in children's health and educational outcomes. The school physician, school nurse, student health staff, principal and teachers analyse the results from the survey. Together they produce a plan for each individual school. A team of researchers from several academic institutions is following the work closely. They contribute knowledge and assist with the analysis. The survey results determine which areas of improvement on which each school chooses to focus and which methods are most suitable to meet the children's needs.

The work is performed under the assumption that a single administration cannot manage these matters successfully. Society as a whole is responsible for ensuring that children develop positively. PArT, Preventive Work Together, is collaboration that aims to promote the development of disease prevention for children and adolescents in Helsingborg.

It consists of several municipal departments in the City of Helsingborg, Region Skåne (Department of Maternal, Child and Youth Health, Helsingborg Hospital) and the City of Landskrona. By focusing community efforts on smaller groups, we are able to develop best practices and procedures. It is also possible to distribute them to more children.

CITY / NATIONAL NETWORK: IZHEVSK

ABSTRACT NUMBER: 071

TITLE: CREATING CONDITIONS FOR CHILDREN'S HEALTH AND EDUCATION IN IZHEVSK

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER

OUTCOMES FOR CHILDREN. TAGS: CHILDREN, CHILDRENS HEALTH, HOUSING, HEALTH INEQUALITIES

Abstract

Health from early childhood is the central theme of the agenda in Izhevsk and the direction that secures the viability of the whole society.

The city carries out planning for achieving the goal of health from early childhood and fulfilling plans focusing on social determinants. The city leaders' activities on health from an early age include supporting young families, improving the reproductive health and health of children of all ages and creating conditions for preschool and school education.

Municipal and regional authorities are involved in developing and carrying out such activities. Targeted municipal and republican programmes are used as tools for achieving the goals. Improving the housing conditions of young families is the direction requiring significant funding. In recent years, a programme for providing young families with accommodations has been realized in Izhevsk. Within the frames of this programme, 3261 families were provided with high-quality accommodations. I

In 2013, 1000 families else will become new settlers. Institutions of preschool education ensure the mental, intellectual, emotional and physical development of children and prepare them for school. Izhevsk takes the leading position in the Volga Federal District in providing places at preschool institutions is concerned. The needs in kindergartens are fully satisfied. In 2012, all children 3–7 years old had places.

Schools of various levels (lyceums, classical schools and schools with standard programmes) allow the choice of educational institution according to the possibilities and the level of children's development. Programmes of extra education at special institutions are very popular among children and parents. Special attention is paid to work with children from socially unfavourable environments and vulnerable groups.

Significant budgetary sources are allocated to developing the material and technical basis of educational institutions. Students in grades 1–5 are provided with free breakfast.

Comprehensive and responsible policies on the demography and health of children have evident results. The best proofs of the effectiveness of the social policy are the natural population increase and birth rate growth since 2009. In 2012, more than 10 000 children were born in Izhevsk. The natural population increase in 2012 increased 73% compared with 2011.

CITY / NATIONAL NETWORK: IZHEVSK

ABSTRACT NUMBER: 067

TITLE: INTERDEPARTMENTAL WORK ON PRIORITY DIRECTION “HEALTH FROM EARLY CHILDHOOD”. SUPPORTING YOUNG FAMILIES, LITTLE CHILDREN AND CHILDREN OF SCHOOL AGE.

CONFERENCE: 2012 ST PETERSBURG

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN.

Abstract

Preservation of health from early childhood as a social determinant of health obviously ranks high. Good health of children that are being born nowadays influences significantly on health and wellbeing of future generations. Health in early childhood contains potential for active living. To invest in childhood means to invest in the future. Consequently, preservation of health since early childhood is one of the key priority for local and regional authorities, representatives of public health sector and other stakeholders.

Effective actions of the Izhevsk city authorities that are aimed at improving quality of health since early childhood include development and support of events directed at improvement of reproductive health, health of newborn children, infants, little children, children of school age along with assistance for young families.

These events assume application of modern social technologies and implementation of complex target programmes that 1) guarantee availability of high-quality medical and social services; 2) ensure patronage of pregnant women and less-than-a-year children, training of parents according to programmes of psychophysical preparation for pregnancy and delivery, of looking after a newborn, of breast feeding; 3) secure availability of programmes of preschool education and preparation for school.

Among various events that influence on forming children’s health there are some particularly important ones, such as programmes of providing young families with accommodation, of creating urban environment favourable for family leisure and recreation, events and programmes aimed at forming skills of healthy living and

physical activity, at organizing meals at institutions of preschool education and at schools. Special attention is given to work with children from socially unfavourable environments and children from vulnerable groups.

Target municipal and republican programmes function as tools for goals' achievement. There are some concrete examples of programmes that are implemented in Izhevsk within Healthy Cities Project: (1) programme of psychophysical preparation for pregnancy and delivery for future parents (since 1996); (2) establishment of a network of health improvement schools (since 1996); (3) programme directed at forming skills of healthy living and physical activity "Health of the city – health of Izhevsk citizens" (since 1997); (4) programme on improvement of youth reproductive health "We choose life – youth against HIV-AIDS" (2008-2010).

Such WHO/UNICEF initiatives as "Protection, encouragement and support of breast feeding", "Children-friendly hospitals" are adopted. Huge municipal, republican and federal resources were concentrated on implementation of programmes "Providing young families with accommodation", "School meals" and on building facilities for family recreation and leisure.

Municipal legislative and executive regional authorities (the Udmurt Republic Government) participate in the process of programmes' development and implementation. At the municipal level such departments of the City Administration as the Public health department (till 2012), the Department for preventive measures and citizens' health protection, the Department for social support, family, maternity and childhood affairs, the Department for preschool education and upbringing, the Department for education act as principle executors. NGOs and business structures are also involved into the process of programmes' implementation.

Statistical data of demographical situation development in Izhevsk indicate positive changes. Increase of fertility and decrease of mortality are registered every year. During three years population increase has also been rising. Rate of infant and maternal mortality is declining.

CITY / NATIONAL NETWORK: IZHEVSK

ABSTRACT NUMBER:071

TITLE: CREATING CONDITIONS FOR CHILDREN'S HEALTH AND EDUCATION IN IZHEVSK

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN. TAGS: CHILDREN, CHILDRENS HEALTH, HOUSING, HEALTH INEQUALITIES

Abstract

Health from early childhood is the central theme of the agenda in Izhevsk and the direction that secures the viability of the whole society. The city carries out planning for achieving the goal of health from early childhood and fulfilling plans focusing on social determinants. The city leaders' activities on health from an early age include supporting young families, improving the reproductive health and health of children of all ages and creating conditions for preschool and school education.

Municipal and regional authorities are involved in developing and carrying out such activities. Targeted municipal and republican programmes are used as tools for achieving the goals. Improving the housing conditions of young families is the direction requiring significant funding. In recent years, a programme for providing young families with accommodations has been realized in Izhevsk.

Within the frames of this programme, 3261 families were provided with high-quality accommodations. In 2013, 1000 families else will become new settlers. Institutions of preschool education ensure the mental, intellectual, emotional and physical development of children and prepare them for school. Izhevsk takes the leading position in the Volga Federal District in providing places at preschool institutions is concerned. The needs in kindergartens are fully satisfied. In 2012, all children 3–7 years old had places.

Schools of various levels (lyceums, classical schools and schools with standard programmes) allow the choice of educational institution according to the possibilities and the level of children's development. Programmes of extra education at special institutions are very popular among children and parents. Special attention is paid to work with children from socially unfavourable environments and vulnerable groups. Significant budgetary sources are allocated to developing the material and technical basis of educational institutions. Students in grades 1–5 are provided with free breakfast.

Comprehensive and responsible policies on the demography and health of children have evident results. The best proofs of the effectiveness of the social policy are the natural population increase and birth rate growth since 2009. In 2012, more than 10 000 children were born in Izhevsk. The natural population increase in 2012 increased 73% compared with 2011.

CITY / NATIONAL NETWORK: IZHEVSK

ABSTRACT NUMBER: 026

TITLE: STRATEGIC PLANNING ON PREVENTING HIV/AIDS IN IZHEVSK

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH LITERACY - HEALTH PLAN/STRATEGY. TAGS: HIV, YOUTH, SEXUAL HEALTH

Abstract

Preventing HIV infection among young people is one of the highest priorities for the public health system in the City of Izhevsk. The project We Choose a Life – Youth Against HIV/AIDS has become an important event for focusing public attention in Izhevsk on youth health, preventing HIV infection, healthy lifestyle choices and safe sexual behaviour. Development of the local strategic action plan for HIV prevention was the culmination of the project. During the process of creating the plan, several stages were accomplished: monitoring the health of young people, studying methods of promoting safer sexual behaviour, training in strategic planning and analysing leadership involvement. This work resulted in a strategic plan on HIV/AIDS for adolescents and young adults in Izhevsk. The strategic plan aims to promote health, healthy lifestyles and safe sexual behaviour and to raise youth responsibility on these issues.

The support of the city leaders was enlisted, the monitoring results on youth health were extensively discussed with professionals, volunteers and representatives of youth organizations and existing municipal and regional programmes on HIV/AIDS education were analysed during the elaboration of the plan. The document will be submitted for approval by the Izhevsk City Council as part of long-term municipal programme "Health of the City – Health of Its Citizens" for 2011–2013. On the other hand, the Action Plan for 2010 reflects short-term goals. It defines clearly the allocation of human and financial resources, the responsibilities of people involved in its execution, the organizational structure and communication and monitoring activities. It will be approved by the city administration, which is a determining factor for success.

The Action Plan has to comply with regulatory requirements, which includes municipal legislation regarding the programme and target planning. This was one of the obstacles that had to be overcome during the process of elaborating the document.

CITY / NATIONAL NETWORK: IZMIR

ABSTRACT NUMBER:044

TITLE: PUBLIC HEALTH STUDIES AT ESREFPASA HOSPITAL IN THE METROPOLITAN MUNICIPALITY OF IZMIR

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - HEALTH PLAN/STRATEGY. TAGS: HEALTH SCREENINGS, SCHOOLS, PUBLIC HEALTH STUDIES

Abstract

The Metropolitan Municipality of İzmir aims to provide high-quality, equal and affordable health services to every İzmir resident, create a health-conscious community through preventive health training and become a leading city on health. Esrefpasa Hospital, the only municipality hospital in Turkey, has been serving İzmir for 104 years. Esrefpasa Hospital went on the offensive as of 2005, increased the number of personnel and founded its new polyclinic section equipped with high technology. It provides both preventive health services and diagnostic and treatment services as a second-line health care provider.

A team was organized for school health screenings, brochures were prepared and delivered for students and their parents, and training on hygiene, nutrition, adolescent psychology, oral and dental health were given. In addition, students who had internal or external parasites and their parents were treated. School management was informed about other health problems.

Hepatitis A and B screening was started in high schools and neighbourhoods to screen people whose hepatitis status was unknown, to examine and treat them, to prevent worsening cirrhosis and cancer, to provide advanced examination, diagnosis and treatment especially for people without any social security; vaccination was recommended for unvaccinated people and training was given to people with infectious diseases with their families.

The hospital has been giving training on oral and dental health for schools, neighbourhoods and associations and delivering toothbrush and toothpaste sets, information brochures and storybooks. Esrefpasa Hospital provided free health service for people without any social security coverage until the implementation of general health insurance. The health screenings, which were initiated in 2002 in the districts, villages and neighbourhoods of İzmir, were carried out until 2011. People needing advanced examination were referred to our hospital, and the required examinations and treatments were performed.

A work group was formed in 2011 serving under the title of public health studies. Among the public training given is organ and blood donation, development of first-aid, hygiene and healthy mothers and women training projects.

In addition to participating in the projects of Esrefpasa Hospital, this group also evaluates the training needs of neighbourhoods, associations and nongovernmental organizations; plans the training based on the required permits and legal liabilities; makes preliminary arrangements for the location and participants of the training; and undertakes the training given to a sufficient number of people in healthy conditions.

The activities performed in neighbourhoods and schools in previous years were unfortunately terminated at the end of 2010 based on a regulation of Ministry of Health, also for Esrefpasa Hospital, and the required permits were not granted.

Accordingly, free health screening has begun in our hospital for groups coming to our hospital in accordance with the requirements of neighbourhood residents after training and/or their request through petition. During these examinations, blood tests are performed for everyone and their blood types are determined. In addition, our hospital performs prostate laboratory examination for men over 40, gynaecological smear tests for women 30–60 years old and mammography for women 40–65 years old, and our physicians evaluate the results.

Our hospital also offers free patient transfer service with ambulance, primarily for disabled, bedridden or paralysed patients and patients who live alone and in poor financial conditions. We help to increase public consciousness, the expansion of appropriate health behaviour to large numbers of people, diagnose and prevent diseases in the early phases, and thus to protect the community and young people from health risks and create equality and worthiness feelings in the community by means of our services that we perform especially for people who have limited access to health care services.

CITY / NATIONAL NETWORK: IZMIR

ABSTRACT NUMBER: 051

TITLE: INTERNAL MIGRATION INTEGRATION PROJECT (IMIP), CHILD AND YOUTH CENTRE AND SOCIAL SUPPORT CENTRES

CONFERENCE: 2012 ST PETERSBURG CATEGORY: CARING AND

SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN

Abstract

Internal Migration Integration Project was financed by EU and implemented December 2008 and May 2010 in İstanbul, İzmir, Ankara, Bursa as a Major In-Migrant Destinations and aimed to “reduce urban inequalities through enhanced economic, social and cultural opportunities for all citizens”. The Project designed two interrelated components as Capacity Building and Social Measures. Capacity Building comprised activities for strategic planning, programming and project development with special measures for integration problems.

Social Measures designed to establish Child and Youth Centre and directed its activities in guiding and supporting the institutional formation of Centre with its programme, staff and sustainable re-integration model. Children and women are most deeply affected by the psycho-social problems caused by migration. Child and Youth Centre established in a pilot neighbourhood in order to decrease disadvantage and contribute to urban integration of disadvantaged groups.

Child and Youth Centre opened as part of the Project in 2009. The Centre provides protective, preventive and rehabilitative services in the framework of a systematic social services approach for children and youth between the ages 7-22 years. The Centre contributes to the children, youth and their families in a number of ways, including education support, guidance services, psycho-social support countering social and intra family issues, healthy life and nutrition trainings and trainings activities for families.

Furthermore, weekly courses and activities are carried out in the Centre to reinforce their strengths, support school success and help them envision a positive future. In the Centre, etude classes, various ateliers on art, music, dance, narration as well as drawing, craft, free time activities are provided by the professional trainers. Totally, 624 children and youth have benefited from services and activities provided in Centre.

Moreover, 95 families have received training about social, cultural and psychological issues. The Centre experiences showed us the great need for specific centres that provide localized special services. Therefore Social Support Centres project formulated and designed. Feasibility studies have completed and opening of first Centre is being planned for this summer.

CITY / NATIONAL NETWORK: KADIKOY

ABSTRACT NUMBER: 033

TITLE: PROJECT OF THE PREVENTIVE MENTAL HEALTH CARE CENTER OF KADIKÖY

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - COMMUNITY HEALTH. TAGS: MENTAL HEALTH AND WELLBEING, PARENTS AND CHILDREN

Abstract

The main goal of the Preventive Mental Health Care Center, started in March 2011 for the first time in Turkey, is to teach society about the importance of mental development. The Center, with its child and adolescent psychiatrist, nine psychologists and volunteer professionals, aims to contribute to community mental health by helping to raise happier and more creative children and to serve healthy parents with primary preventive mental health care service.

Originally, this project was first planned as a mental health centre to resolve the difficulties in satisfying the increasing demands on the psychologists of Kadıköy's health centres. Subsequently, this was expanded to a Preventive Mental Health Care Center as an attempt to fulfil the public demand. Psychiatric services in Turkey are carried out as either pharmaceutical or therapeutic services, and preventive health services should always come before therapeutic services. This Center aims to initiate the necessary change in that direction.

A total of 1605 children 0–18 years old and 238 parents in Kadıköy applied to the Center between March and December 2012 and each is provided with counselling sessions. After these sessions, psychiatric examinations, psychological tests, psychotherapy and pharmaceutical treatment are provided if necessary. Further, 34 educational parental seminars have been held so far, and informative brochures have been circulated. In addition, through the screening studies in preschools, 1531 children 5–7 years old and their parents were assessed and if necessary guided to the Center. Psychologists observe 300 children in the municipal nurseries weekly.

56% of the clients are still in treatment, 36% of their treatment has been successfully terminated and 8% of them have dropped out. The requests to our project have tripled from the start. There is a 95% success rate and no complaints according to the satisfaction surveys.

Throughout this project, we have observed that the families profoundly need information and guidance about the development and treatment of their children. Our attempts to respond to the mental health needs are increasing, but also limited in our municipality; apparently, more preventive centres are needed.

CITY / NATIONAL NETWORK: KADIKOY

ABSTRACT NUMBER: 010

TITLE: ORAL HEALTH CARE OF DISABLED PERSONS IN KADIKOY MUNICIPALITY'S DENTAL CLINICS.

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - COMMUNITY HEALTH

Abstract

Dental care for people with disabilities

Every person with disabilities should be under a social security plan made available by the state starting from birth. Routine controls and treatments should be provided free of charge by the respective departments, and, thus, the inequality between healthy people and people with disabilities in terms of health care should be eliminated.

The people needing dental treatment are found by screening the schools for children with disabilities about dental health or by the personal application of the parents. According to the requirements of dental care and the physical and mental status of the children with disabilities, dental treatment is given either in clinical conditions or by the help of general anaesthesia in an operating room. A team comprising 10 dentists, 4 paediatric dentists, 1 oral surgeon, 1 anaesthetist and 1 anaesthesia technician are carries out the treatments in our clinic. All treatment is free of charge. The Municipality of Kadikoy pays all the expenses of the clinic. Since June 2009, 96 children with disabilities have been treated in clinical conditions, and 253 children with disabilities have been treated in an operating room under general anaesthesia.

Children with disabilities are followed up periodically after treatment. Services in the dental clinics of the Municipality of Kadikoy will continue in the future. In a metropolis like Istanbul, the number of dental clinics providing dental care for children with disabilities is very limited, and all clinics have high user fees.

The Municipality of Kadikoy provides support so that the children with disabilities can be treated very quickly and free of charge. It was observed that families owned and protected the treatments they received, cared about oral hygiene more and visited the clinic regularly. People with disabilities have great difficulty in benefiting from oral and dental care. Very few centres give dental care to people with disabilities. The conditions of the available centres should be improved and supported and new dental centres should be created.

CITY / NATIONAL NETWORK: KLAIPEDA

ABSTRACT NUMBER: 024

**TITLE: HARM-REDUCTION PROGRAMME FOR SEX WORKERS IN KLAIPEDA
CONFERENCE: 2013 IZMIR**

**CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH
LITERACY. TAGS: SEXUAL HEALTH, HIV, DRUGS**

Abstract

A category of sex workers working in the port and injecting drugs has formed. SSP are at high risk of acquiring and transmitting HIV and other sexually transmitted infections since they usually provide their services while intoxicated by drugs. This makes the probability of using preventive means during sex very low. These women rarely apply for help to social and health care institutions, which is why programmes for preventing HIV infection and other sexually transmitted infection hardly reach them.

Klaipėda is the only seaport of Lithuania. Klaipėda's population in 2012 was 160 361. In 1988–2012, Klaipėda had 25% of the people acquiring HIV in Lithuania.

Further, 30% of the women acquiring HIV in Lithuania lived in Klaipėda versus 24% among men. The Municipality of Klaipėda has been implementing a purposeful programme for preventing sexually transmitted infections since 2004.

It aims to prevent HIV infection and other sexually transmitted infections among sex workers in Klaipėda. The following are free confidential services provided for sex workers: needle and syringe exchange and distribution of means for safer sexual contacts; consultation of a social worker and venereologist; examinations on sexually transmitted infections and prescriptions of medicine for treatment; classes on safer sexual behaviour; and escort by a social worker to social and health care institutions.

The programme contacted 305 sex workers during 2004–2011, and 7571 consultations of a social worker and 564 consultations of a venereologist were provided. 70 clients were treated for sexually transmitted infections for free, 4230 items of lubricants and 15 119 condoms were distributed. Since 2010, the users have had free HIV testing, and 7 people tested HIV-positive.

The services of the harm-reduction programme give the members of the group at higher risk the possibility to apply to health care and social institutions, reduce stigma, form their abilities for taking care for their own health and help to prevent sexually transmitted infections by early treatment. The services and means delivered during the programme are not only the means by which the main aim is being reached, but they are also the ways to involve more hidden sex workers.

CITY / NATIONAL NETWORK: KUOPIO

ABSTRACT NUMBER: 120

TITLE: EMPOWERING AND SOCIALLY INCLUDING VULNERABLE GROUPS BY PROMOTING ACTIVE LIVING

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - COMMUNITY PARTICIPATION

The Municipality of Udine provides contributions and subsidies to people in socioeconomic need because of financial difficulties, such as disability living allowances, rental subsidies, etc.

As concerns employment promotion, many actions have been implemented. Job information desks: places located in institutions or in associations where people can get information about job supply and can offer their competencies; first dedicated to migrants, then they spread their services to everybody. For example, the family assistant desk answers to foreign as well as native demand. Training courses: the Municipality favours the organization of training and vocational courses by training centres, especially for youngsters and unemployed people;

“Socially useful jobs” have been created in the Municipality for unemployed people. Social cooperative institution assistance and vocational measures have been activated in cooperatives (grass-cutting, greenhouses, waste collection, house furniture removal etc.). Evidence of the importance of health equity at the local level has been the introduction of many regulations and subsidies for people in need because of disabilities, mental health problems, frailty or for people caring for persons with these kind of problems.

The Municipality is committed to reinforcing a close relationship with the economic categories and with local social agents to shape some measures limiting the worst effects of the crisis on disadvantaged people.

In accordance with this perspective, the Municipality has promoted some extra social services for the community, for example the service called Pedibus: a service that helps children to walk to school by being accompanied by adults who guarantee for their safety. Pedibus functions throughout the school year, on routes to and from school indicated by a terminal and intermediate stops. The choice of road tracks and stops is made not only according to safety standards but also to the specific needs parents signal in a questionnaires (road problems, place of residence, etc.).

The people who accompany children to school on foot are recruited among unemployed parents and receive in return some shopping vouchers as a sort of reward of their engagement but also as a practical help to satisfy their basic needs. Most of these people are immigrants, who find in this service the opportunity to have a role and be helpful within the community. The service is provided during the whole school year, and in 2013/2014 about 200 children and 70 accompanying people were part of it. In the current year, many more schools have decided to join this initiative and conduct pilot experiences during spring. The total number of children involved is supposed to almost double this year.

Amusing activities are also organized to increasingly stimulate children’s awareness about the importance of adopting healthier and more sustainable lifestyles. However, the most significant result has been the good relationships established by the people taking part in providing the service, both natives and immigrants, who have overcome differences in age, ethnic origin, skin colour, traditions and customs and got together to walk to school with their children.

This kind of activity, besides contributing to reducing traffic congestion near schools and to regular physical exercise, fosters social cohesion, neighbourhood revitalization and an increased sense of community identity. The most noticeable effect deriving from the activity has been the intergenerational relationships between children and older people, who seem to greatly benefit from accompanying children to school and from collaborating with students. Moreover, the shopping vouchers are really a concrete support for people with economic problems, and receiving them makes these people feel able to contribute to their community although they are unemployed. Moreover, the important message of social inclusion, mutual solidarity and integration between people and countries was also an important educational message for children.

The project is innovative especially for its multiple positive effects on the community: from healthy lifestyles to social inclusion, from support to economically disadvantaged people to the well-being of children, from the emancipation of women to healthy ageing.

CITY / NATIONAL NETWORK: KUOPIO

ABSTRACT NUMBER: 018

TITLE: USING NATURAL ENVIRONMENTS TO PROMOTE PHYSICAL ACTIVITY, HEALTH AND WELL-BEING IN EASTERN FINLAND

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - COMMUNITY PARTICIPATION

Abstract

The Moved by Nature project, managed by Metsähallitus, National Heritage Services, aims to increase the use of natural areas and urban green space in the promotion of health and well-being. The project facilitates collaboration between professionals within the park and health sectors and develops services across the public, private and third sectors that improve access to nature.

The increasing prevalence of a sedentary lifestyle, physical inactivity, obesity and mental health problems presents a major global challenge. These factors significantly lower the quality of life at an individual level and dramatically increase health care expenses. Extensive literature suggests that a green environment benefits human health and well-being significantly. Nature not only increases physical activity levels but also provides benefits for mental and social well-being, such as by helping to cope with stress, by reducing the sense of loneliness and by improving mood. So far, nature has been inadequately used in health promotion.

The National Heritage Services manage Finland's national parks and other state-owned protected areas. The Moved by Nature project, funded by the European Social Fund, was launched in eastern Finland in April 2013 (until January 2015) as part of the Healthy Parks Healthy People programme of the National Heritage Services. In total, the project has carried out four pilot studies targeting people at risk of type 2 diabetes and at risk of social exclusion and mental ill health, such as immigrants, unemployed people and young people with a low educational level. In addition, a survey assessing the health benefits of urban green space as perceived by the citizens of Kuopio is currently collecting data. The project is conducted in collaboration with Healthy City Kuopio.

The pilot programmes have increased multisectoral collaboration and provided models for using nature in promoting health. Data have been collected on participants' and organizers' perceptions of activities, effects on health and well-being and the current stage of service quality. The project has facilitated the development of nature-based services in health promotion.

Nature significantly influences people's health and well-being. Collaboration between nature and health professionals may help tackle the health risks associated with modern lifestyle.

CITY / NATIONAL NETWORK: KUOPIO

ABSTRACT NUMBER: 018

TITLE: ACTION-ORIENTED SPACE MODEL OF COMMUNITY CENTRES AS A WELFARE USER INTERFACE IN KUOPIO

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - COMMUNITY HEALTH. TAGS: SOCIAL ISOLATION, SOCIAL INCLUSION, COMMUNITY PARTICIPATION

Abstract

Easy-to-access meeting points in the old parts of Kuopio are reducing many social problems. Loneliness and marginalization decreases, older people stay at home longer and the attractiveness of the area increases. The first community centre was established in 2001, and now there are nine. Areas with indicators anticipating strong ageing, unemployment, marginalization, especially among young people, or other social problems are given priority.

For many people at high risk of marginalization, community centres are only places for contacts. Further, difficult-to-reach citizens are reached through the community centres. The cost of the spaces is a problem with extension of community centres, with 70% of the money going to renting the spaces. In 2012, we decided to draw up an action-oriented space model for the centres.

We found three categories depending on actions: community centres, citizens' houses and block houses from the largest to the smallest. Each category allows different kinds of activities and partnerships. The new space model allows us to plan centres operating with any collaborator. Unnecessary spaces are eliminated and the use rate is maximized. The savings can be used for development. Partnerships are made with senior centres, libraries, youth centres and schools. The model is suitable for the structural modelling of the traditional urban service network.

The committee on the promotion of welfare of the municipal council adopted the model in 2012. The model will be administered for all new and renovated services. These activities correspond to the city's strategic targets: citizen-oriented services, cross-functional activities and preventive health care and welfare. The main coordinator makes strategic presentations on the funding needed, with the development group, including the main partners, meeting four times a year. Settlement Puijola (third sector) is daily coordinating centres and staff recruitment.

From the perspective of the city and other service providers, centres are economical networks near the citizen. The ageing population can feel safe and stay at home longer without centralized, more complex health services. The operating model of the developing community centres will be ready in 2013. The aim is to start six new operations in the coming years.

CITY / NATIONAL NETWORK: KUOPIO

ABSTRACT NUMBER: 031

TITLE: MATERNITY AND CHILD WELFARE CLINICS IN FINLAND

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN. TAGS: POLICY MAKING, CHILDRENS HEALTH, PARENTS AND CHILDREN

Abstract

Finland's Ministry of Social Affairs and Health has promoted legislation and regulations concerning maternity and child welfare clinics: Health Care Law 2010, Government Decree (338/2011) on maternity and child welfare clinics etc., Government Decree (339/2011) on screening and a manual on maternity health care (2013). The main goals of maternity and child welfare clinics are to support and help parents to increase their own responsibilities when making choices that will promote their health, to support parenthood and relationships, to help parents to recognize their own strengths and issues that stress them, to offer early intervention concerning problems of the family and to prevent the need for child protection.

Maternity welfare clinics ensure that pregnant women have as safe and normal pregnancies as possible, provide high-level services, which are based on studies and multiprofessional collaboration, recognize early enough any issues that can be dangerous for the unborn child and provide family planning services. Child welfare clinics improve and support the physical, mental and social well-being of the child and family, intervene early in illness and issues that can prevent the healthy development of the child and recognize other health problems of the family.

Services are family oriented and based on their own resources: the services promote the resources, health and well-being of the whole family. They are voluntary, free of charge and are based on early intervention and on local instructions, which are accepted by the committee on social welfare and health of each municipality and evaluated every year. User satisfaction is evaluated every year by the nationwide survey by the National Institute for Health and Welfare. Maternity welfare services are provided in close collaboration with the specialized health care. Deliveries mainly take place in hospitals.

The aim of the welfare clinics is to help to prevent the marginalization of children and their families and strengthen health promotion, which includes mental health promotion. Early identification of needs for specific support and providing support in a timely manner prevents the exacerbation of problems and curbs the growth of expenditure.

CITY / NATIONAL NETWORK: KUOPIO

ABSTRACT NUMBER: 021

TITLE: PROJECT FOR EARLY SUPPORT OF OLDER PEOPLE IN THEIR DAILY LIVES

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES. TAGS: OLDER PEOPLE, HEALTHY DEVELOPMENT, INDEPENDENCE

Abstract

Proactive measures and early support are means of promoting older people's independence and enabling them to live at home. This can be achieved by developing collaboration between personnel carrying out primary care, specialists and other actors (such as nongovernmental organizations), by enhancing the geriatric and gerontological expertise of personnel and by allocating resources to support a proactive approach.

Early Support (VAMU) came into being in a project to develop geriatric services run by the Kuopio Social and Health Services. The Early Support model provides tools for the early identification of risks, assessment of service needs and follow-up planning by improving practices across administrative boundaries and multi-professionally in cooperation between the management and personnel of the Social and Health Services and other actors. The model is being introduced into the work of the Kuopio Social and Health Services, with the target group being older people living in the city. The model can also be applied to younger population groups.

A team of experts in geriatrics and gerontology (physical therapist, occupational therapist, nutritionist, expert in gerontological social work, geriatric specialist, psychiatric nurse, geriatric nurse) was formed from the social and health care personnel to help the personnel in the Early Support process by providing consultation by phone, electronically or, if necessary, by making home visits. The experts trained the staff in early observation, which may lead to appropriate counselling, guidance and/or service needs assessment. The training emphasizes enhancing the proactive skills of the staff in geriatric and gerontological care.

Services and resources are focused on helping older people live at home on their own terms. Promoting health and functional capacity and supporting rehabilitation are included in every worker's basic task and in the jointly agreed annual personal development goals of the work unit and employees.

Responsibility for promoting and maintaining Early Support has been transferred entirely from the project to the managers. To ensure the success of the change, immediate supervisors are responsible for concretizing and monitoring the Early Support development tasks, through development discussions.

CITY / NATIONAL NETWORK: LIEGE

ABSTRACT NUMBER: 068

TITLE: DEMENTIA FRIENDLY CITIES

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING. TAGS: INDEPENDENT LIVING, ALZHEIMER'S DISEASE, CARERS SUPPORT, OLDER PEOPLE

Abstract

People with dementia often have difficulty in finding high-quality information in their own city. Nevertheless, this type of disease requires familiar references; these people need to be able to rely on someone who comes from a similar background and who can provide them with specific, reliable information on the disease.

La Ligue Alzheimer is aware of these specific problems.

The association's motto is "A.I.D.E. près de chez vous" (help at your side) because La Ligue Alzheimer believes that most solutions can be found within the surrounding background. Several cities have expressed their need to be supported and accompanied in their willingness to develop local activities without considerable expenses. With the Dementia-Friendly Cities concept, La Ligue Alzheimer has been able to meet these cities' interests and financial limits. The Dementia-Friendly Cities are a network of cities that hold and develop activities related to Alzheimer's disease (training sessions include the circle of care; Alzheimer cafés; home assistance to caregivers) in consultation with La Ligue Alzheimer. These activities must be free of charge.

The initiative's objective is to encourage the integration of people with dementia within their community. Each activity must contribute to improving the quality of life of people with dementia and their caregivers, a goal that has been set up based on the WHO Age-friendly Cities network. A Charter drafted by La Ligue Alzheimer and its partners in March 2011 states this objective. The Charter specifies the sharing of tasks between each signatory.

La Ligue Alzheimer will train a *proxidém*: a municipal agent already working in the field of health and quality of life, disability and/or older people. The training session will be free of charge. With this initiative, La Ligue Alzheimer – representing people with dementia and their caregivers – proves that it is part of the solution and is able to find equal partnerships for people with dementia in their familiar surrounding background.

CITY / NATIONAL NETWORK: LIVERPOOL

ABSTRACT NUMBER: 097

TITLE: ASYLUM SEEKER MENTAL HEALTH MODERNISATION GROUP

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - MIGRANTS/BME

TAGS: ASYLUM SEEKERS, MENTAL HEALTH AND WELLBEING

Abstract

The Department of Health programme for delivering race equality in mental health focuses improvement work on: access to appropriate services; improved service user experience; and improved outcomes for ethnic minority groups.

Liverpool is one of the dispersal centres for asylum seekers in the United Kingdom. The local asylum seeker and associated groups within the population (such as destitute failed asylum seekers) are increasing in numbers, and their needs, including mental health needs, can be very complex and hard to respond to effectively.

A modernization group was convened to bring together dispersed knowledge and expertise in practice about mental health need and service gaps to address some of these complex and challenging problems.

The modernization group meets quarterly, reporting to both mental health commissioners and providers. A subgroup has been set up specifically to develop a mental health care pathway for asylum seekers and associated groups. The modernization group has also organized a conference to inform mental health practitioners of the particular needs of these communities. The group has used case studies to inform practice and systemize effective approaches and has supported the production of a video for information and promotion purposes.

The achievements include: the mental health care pathway being completed; and a health and social care guide on asylum seeker issues being prepared for practitioners. Work in progress includes: knowledge and skills support being developed for general practices and inner city primary and secondary mental health community teams; training development and delivery to key workers such as housing and accommodation support workers; and exploring the possibility of using hand-held health records to ensure that important health information goes with people when they move even where they are not fully engaged with the health and care system.

CITY / NATIONAL NETWORK: LJUBLJANA

ABSTRACT NUMBER: 074

TITLE: KEEPING OLDER PEOPLE ACTIVE IN LJUBLJANA

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING

TAGS: OLDER PEOPLE, ACTIVE AGEING

Abstract

Since older people who remain at home for longer tend to maintain their active lifestyles and stay healthy for longer, we would like to present a broad range of projects and initiatives that contribute to the general tendency of trying to keep older people in Ljubljana active. We would do that by focusing on the concept of daily activity centres for older people and presenting some other projects that shape the active lifestyle of older people in Ljubljana, sometimes also attracting older people from elsewhere.

Because of the increasingly ageing population of Ljubljana, increasing life expectancy and older people staying healthy and active for longer, we started methodologically following the idea of keeping older people at home for longer by offering services such as family assistance at home as well as the idea of keeping them active by providing a range of activities that can contribute to their active lifestyles.

Our presentation will focus on the daily activity centres for older people that offer space to socialize and provide a wide range of activities for older people. We would also present some of the other projects for older people in Ljubljana such as popular film meetings over coffee, a yearly festival for older people, etc. We would conclude that such projects prove that active lifestyles and health mutually reinforce each other.

In a relatively short period of time, the daily activity centres for older people in Ljubljana have proven to be one of the well-chosen approaches to engage older people either in mere socializing or in a varied range of activities that the daily activity centres offer. The first one opened in 2005, with another seven geographically evenly spread out around Ljubljana following up so far. As the capacity of the existing daily activity centres for older people is continually filling up, we will continue with expanding the network and plan to open a new daily activity centre for older people in 2014. Following a positive response, we also plan to continue with the other projects we have on offer for older people in Ljubljana while we are open to new suggestions that would contribute to active living among older people in Ljubljana.

CITY / NATIONAL NETWORK: LJUBLJANA

ABSTRACT NUMBER: 049

TITLE: DAILY ACTIVITY CENTRES FOR ELDERLY

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING. TAGS: INDEPENDENT LIVING, DAILY ACTIVITY CENTRES, OLDER PEOPLE

Abstract

A few years ago, the City of Ljubljana deviated from what has been the standard in most EU countries of that time. For decades, residential care has been ultima ratio of supporting system for vulnerable older people. Although there is a low percentage of the people over 65 who are in need of care, there was a high percentage of them concentrated in residential care and less than 1.5 percent enjoyed home care offered by formal care suppliers.

The absence of gradual support in favour of independent living of elderly and general demographic paradigm enforced changes. In principle, the philosophy changed: not care as such, but supporting measures for prolonged independent and self-determined life became a central issue. The new paradigm expects an elderly person to remain active for as long as possible in the social environment s/he is accustomed to and to cope on her/his own with the problems that come with ageing, to make independent decisions, to remain interested in public affairs, and to help others when possible.

In 2005, Ljubljana Union of Older People Associations with financial participation of Municipality of Ljubljana took the initiative to organise Daily Activity Centres for Elderly. The inclusion in social networks influences physical and mental health and these again induces the older person to do another step in the inclusion process. The primary scope of this action was to offer older people the opportunity to knit new social net for themselves and to save across active ageing their psycho-physical condition outside residential care as long as possible.

In the last decade the township of Ljubljana (population of appr. 300,000 inhabitants) gained besides Home Care Institution, offering professional care at older people's homes, seven daily activity centres, mostly already overpopulated and exceeding generational partitions so that they became very much intergenerational. Other is to come in autumn 2011. They represent low threshold establishment and the bid of each of them are some 30 different activities weekly (morning exercises, languages, painting and pottery...). Other townships in Slovenia followed the experience of Ljubljana. Municipality of Ljubljana is partner in WHO Age friendly cities project.

CITY / NATIONAL NETWORK: ŁÓDŹ

ABSTRACT NUMBER: 083

TITLE: SENIORALIA 2014 IN ŁÓDŹ

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING

Given the demographic prognoses and health status of the citizens of Łódź, the social strategy for the city for 2011–2015 established preventing the exclusion of older adults as an intervention area. Changes in the social and demographic composition and poor health status of the community have led to the extension of action and the development of systemic solutions in providing support and care to older people.

In 2010, people aged 60+ years comprised 25% of the population of Łódź, the highest rate among large cities in Poland. By 2020, this will reach 33%. If external conditions remain unchanged, in 2030, senior citizens will be a majority of the city population. This poses a challenge for the institutions and organizations responsible for social policy in Łódź.

In May 2014, Senioralia was organized for the first time in Łódź. It was a week of events addressing the older city residents, encompassing culture, physical activity, education, health and development in its broadest sense.

The aims of Senioralia were: to promote active lifestyle among older people and encourage them to nurture and develop their interests and passions; to organize time and city space for seniors and support their activity; to demonstrate the potential of the people aged 60+ years; and to promote senior-friendly action and projects.

Several organizations and agencies that address their action to people 60+ years were invited to participate in organizing Senioralia in Łódź, with the assumption that joint action would make the offer of the City more attractive and more suited to the needs of older people and have a real effect in improving the seniors' lives.

Seventy actors took part in organizing Senioralia. More than 250 events were organized, including lectures, excursions, workshops, object lessons, open-door events, artistic events, concerts, exhibitions, physical activity, screening examinations and counselling. The week ended with the Senior Community Fair.

Senioralia 2014 showed that senior citizens in Łódź escape stereotypes: they are active, have open minds and are ready to participate in interesting new projects. A great success of Senioralia was involving so many agencies, organizations, businesses and individual actors in its organization, which enriched and diversified the offer of events for the seniors. Further, the number of seniors who participate in the events is constantly growing.

CITY / NATIONAL NETWORK: MILAN

ABSTRACT NUMBER: 013

TITLE: A PLAN AIMED AT SOCIABILITY AND AGAINST LONELINESS

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES. TAGS: HEALTHY AGEING, OLDER PEOPLE, SOCIAL INCLUSION, MONITORING

Abstract

Milan has more than 400 000 citizens older than 60 years, and they shape the human landscape. Increasingly diversified and flexible services therefore need to be defined. Thus, as a part of the Milan Welfare plan we developed a project made of actions aimed at improving the services for older people. In 2012 we transitioned from the simple Hot Weather Plan, a service whose goal was to monitor and provide assistance to older people at higher risk during the summer, to the more integrated Plan for Sociability. The idea was to connect services and interventions and develop a proximity culture through a coordinated and continuous programme supporting older people.

In particular, we developed a model aimed at creating local and neighbourhood-based safeguards capable of monitoring the most fragile citizens on a daily basis. In addition, this model contributes in building supportive communities, having at the root the idea that sociability acts as social protection and that it can also guarantee rights. The goal was to increase places for socializing and existing activities, thus allowing nongovernmental organizations and individual citizens to enjoy places simply to foster relationships or through more structured social projects.

A specific badge was developed and given to citizens to access free places and initiatives. More than 40 nongovernmental organizations and associations adhered to the Plan for Sociability, and more than 3000 older people took part in the several recreational initiatives. In addition, 2051 older people benefited from 37 266 services as listed below.

Services provided from 4 June to 9 September 2012

Support, guidance or taxi service outside the home	934
At-home catering	16 520
Newspaper distribution	10 725
Medical aid or consulting	1
Cleaning	403
Personal hygiene support	1 013
Food preparation	77
Company or fellowship	432

Food shopping	184
Doctor at home	124
Free tickets for the swimming pool	4 876
Movie and pizza	978
Ice cream	126
Hairdresser	83
Guided museum tours	790
Total	37 266

The strengths included: developing a model aimed at creating local and neighbourhood-based safeguards capable of monitoring the most fragile citizens on a daily basis and suitable for creating communities (sociability as social protection and guarantee); and promoting and leveraging existing social experiences in the Milan area and integrating them with new initiatives. The weakness was: limited economic resources. The project assisted older people at risk and developed a community culture by involving government and nongovernmental organizations

CITY / NATIONAL NETWORK: NOVI SAD

ABSTRACT NUMBER:092

TITLE: HEALTH PROMOTION AND DISEASE PREVENTION PROGRAMMES IN NOVI SAD

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE. TAGS: HEALTH PROMOTION, POLICY MAKING, PUBLIC HEALTH

Abstract

The City of Novi Sad enforces health promotion and disease prevention policy through the Rules on Modality and Procedure of Allocation of Assets from the City of Novi Sad Budget for Health Programmes and Projects. These Rules provides financial support for local health systems and nongovernmental organizations in addressing major health problems and public health issues. Based on a document on the health status of the Novi Sad population, policies, strategies and activities are recommended to address main public health issues and health problems in Novi Sad.

Relevant competitions are published in the following fields: public health, preventing noncommunicable diseases, preventing drug abuse, pro-natal policy, separately for health institutions (both state and privately owned) and for nongovernmental organizations. The City of Novi Sad has established committees in the fields mentioned above (comprising professionals who are recognized because of their professional and/or academic work in relevant areas at the local, regional, national and international levels) with help from more specialized working groups assess the technical and professional quality of the applications received and, after discussion and the conclusions of working groups, decide on the competition applications and projects submitted.

Competitions are public (published in the official herald and on the City web page) as well as the results. The application and report forms are standardized and professionally published.

Most of the projects are directed to educating the citizens, especially vulnerable and hard-to-reach groups in the area of health promotion, disease prevention and use of health care services with the emphasis on the preventive services and increasing the use of preventive check-ups; education and capacity-building of decision- and policy-makers on health and health equity; education of the media; education of educators, especially preschool teachers and schoolteachers, in health promotion and disease prevention; continuing education for health care professionals in health promotion and capacity-building for health equity. The City of Novi Sad is dedicated to implementing health promotion and disease prevention programmes for more than a decade through its policies, strategies and financial support.

CITY / NATIONAL NETWORK: NOVOSIBIRSK

ABSTRACT NUMBER: 005

TITLE: INTERSECTORAL APPROACH TO PRESERVING AND STRENGTHENING CITIZENS' HEALTH IN THE CITY OF NOVOSIBIRSK

CONFERENCE: 2013 IZMIR CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP

TAGS: CITY HEALTH, DEMOGRAPHICS, INTERSECTORAL, HEALTH AND WELLBEING

Abstract

Further decline in population was noted in 2006 in Novosibirsk because of high mortality and a low birth rate. The rate of natural population growth was negative. The strategic plan of development of the City of Novosibirsk until 2020 aims to overcome this negative direction. Its goal is to improve citizens' quality of life and improve the demographic situation. It focuses on realizing strategies both in health care and other sectors.

As a part of the strategic plan, the concept of health care system development of the city of Novosibirsk was carried out and target programmes in the health care sector were realized. They aimed to improve citizens' health, reduce mortality, improve the quality and availability of health services, create conditions for providing specialized care for older people, develop health-saving technologies, create an effective preventive system and reduce the depopulation process. With support from the Federal Center and Subject of the Russian Federation, the material and technical facilities of health care were upgraded and modern information systems and standards of health services were introduced.

Various areas, even not connected to health care, can affect people's health. In the Health City Project and others, an intersectoral approach to realizing health-saving technologies was carried out in: childhood, education, youth politics, social support,

barrier-free environment, older people, environment, physical culture and road safety. A strategy of developing voluntary physical activity was realized in the city with wide public involvement to support healthy lifestyles.

Carrying out the strategic plan of development of the City of Novosibirsk supported by 12 programmes with intersectoral executive mechanism is radically improving the demographic situation. The rate of natural growth of the population of the City of Novosibirsk changed from negative -4.1% in 2006 to $+0.9\%$ in 2012 by reducing the mortality rate from 14.0 to 12.3 per 1000 people and increasing the birth rate from 9.9 to 13.2 per 1000 people, as well as increasing the life expectancy from 68.2 to 70.5 years.

These results were mostly achieved based on the growth of budget opportunities and citizens' standard of living because of social and economic development rates. Provision citizens of the City of Novosibirsk with budget charges in 2012 grew 2.5 times what it was in 2006. Growth of citizens' standard of living let them pay more attention to their health, creating healthy lifestyles, disease prevention, physical training and sport.

Due to the growing attractiveness of the city, migration flow has increased. The population is approaching 1.5 million people and is still growing.

CITY / NATIONAL NETWORK: NOVOSIBIRSK

ABSTRACT NUMBER: 011

TITLE: SOCIAL ADAPTATION OF DISABLED PEOPLE

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - COMMUNITY HEALTH

Abstract

There is a problem of social adaptation of people with disabilities in Novosibirsk. Social programmes and projects have been realized in the city that enable the quality of life of people with disabilities to be improved. More than 110 000 people with disabilities live in the city. City authorities consider that people with disabilities should participate in city life. Our main goal is to make Novosibirsk accessible and comfortable for all residents.

Since 2010, hospitals in home were organized under polyclinics of the city, which enable the availability of health care for this category of citizens to be improved.

Since 2010, two inhabited rehabilitation apartments were opened in which experts train people with disabilities in skills of self-service, self-care and physical independence due to life conditions. Since 2006, a social taxi service has operated for providing transport services to people with disabilities and older people.

Since 2009, a social project on orientation and mobility that trains visually impaired citizens has developed that allows the people with disabilities to independently use all types of transport, to cross all types of roads and crossroads and to organize vital space in their homes that is ergonomic and comfortable.

The official portal Hidden Novosibirsk is operating, which allows people with restricted mobility and people with disabilities, including visually impaired people, to receive the necessary information about city events. The city budget allocates money for treatment, improvement and rehabilitation of people with disabilities in the selected sanatoriums; there is social help for pensioners, adults and children with disabilities.

City streets have traffic lights with acoustic signals, and ramps for wheelchairs have been installed in more than 500 urban social objects. The rehabilitation apartments have been visited by 314 people, and 25 experts have been trained.

In an average month, the social taxi service makes more than 550 trips.

In the project on orientation and mobility, 3 people were trained in 2009, 17 in 2010 and 8 so far in 2011. Today Novosibirsk, according to expert evaluations, is one of the most convenient cities in the Russian Federation for this category of the population.

CITY / NATIONAL NETWORK: NOVOSIBIRSK

ABSTRACT NUMBER: 023

TITLE: DEVELOPING FAVOURABLE CONDITIONS FOR PROVIDING SPECIALIZED SERVICES FOR OLDER PEOPLE IN NOVOSIBIRSK

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY

CITIES - ACTIVE LIVING. TAGS: LOCAL GOVERNMENT, PRIMARY

HEALTHCARE, OLDER PEOPLE

Abstract

Implementing healthy ageing is one of the core themes of Phase V of the WHO European Healthy Cities Network. In recent years, local governments of Novosibirsk have worked to improve the quality of life of older people, developing a comfortable and safe living environment for them. One of the tasks is providing health care and social help for them. For this purpose, a unique gerontological centre has been opened in Novosibirsk based on the urban clinical hospital.

Experts of the gerontological centre say that their primary goal is to improve the quality of life of older people and to provide health care for them. Many pensioners and veterans live in Novosibirsk today and need care and kind attention.

The only dedicated gerontological centre beyond the Urals opened in March 2010. It is equipped with modern medical devices for treating older citizens of Novosibirsk.

The main direction of work of therapeutic service in the renewed hospital is preventive maintenance of the exacerbation of severe chronic diseases, active health care for older and disabled people. Reducing the burden on doctors by cutting down the number of patients per doctor allowed extra time for more in-depth dialogue between doctors and patients. It has improved the quality of treatment and has given the chance to eliminate insufficient personal contact. The first patients of the Centre say that they could only dream of such treatment. Wards are comfortable, light and cosy, the food is good and the staff members are careful and attentive.

Older persons even joke that it would not be desirable to leave such a hospital. Advocates are assured that the gerontological centre will be very popular among patients. Thus, by opening this centre they already speak about the future of the project.

CITY / NATIONAL NETWORK: PORTUGUESE NATIONAL NETWORK
ABSTRACT NUMBER: 065
TITLE: EMPOWERING FOR STRATEGIC INTERVENTION IN HEALTH
CONFERENCE: 2013 IZMIR
CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS

Abstract

Context

The Portuguese Healthy Cities Network integrates cities committed to promoting health but which are at different levels of development in their Healthy Cities approach. This reality is visible through their work but also through their participation level in meetings and discussion forums involving the Network's intermunicipal technical group.

This group is composed by a technician of each member city, is coordinated by the Portuguese Network Technical Coordinator and its functions are: a) to deliver notions at the request of the Board of Directors (executive body); b) to participate in the development of the annual Activity Plan; c) to participate in the preparation of the annual Activity Report; d) to give advice on applications submitted by municipalities wishing to join the Association; e) to disseminate information in regards to activities by the Portuguese Network and the European Network of Healthy Cities; and f) to incorporate the principles of the Healthy Cities Project and the technical references that support it in the work developed by the city members, guided by the Portuguese Healthy Cities Network.

Rationale

We identified a need to invest in training actions directed towards the technical group, establishing a platform from which to disseminate knowledge about Healthy Cities strategic instruments, structuring themes, principles and objectives, and thus developed a training plan aimed at qualifying city intervention and producing tools to support their work.

Description

The Training Plan was titled 'Healthy Cities and Local Development' and was developed in partnership with the National School of Public Health, which established a training program according to the needs identified by the technical group.

This training involved a total of 21 participants and consisted of eight sessions spread over four months on topics related to different areas of Healthy Cities Project intervention, namely, a) Goals and Health Indicators / Priorities; b) Urban Health; c) Local government and health development; d) Equity / social inequalities; e) programs and projects management; f) Partnerships in health; g) health communication; h) Healthy Urban Planning; i) Citizen Empowerment - health literacy; and j) Health Profile and Health Development Plan.

Achievements

The 'Healthy Cities and Local Development' Training Action culminated in the development of intervention projects focused on areas such as health literacy, healthy eating and mental health and wellbeing. Examples: The Transform Your Snack Project, which aimed its intervention towards childhood obesity, focusing in primary school children and addressing this issue in multiple strands; the Health Olympics Project, which intended to contribute to greater health literacy and healthier lifestyles in youths from 5th to 9th grades; and the Wheel of Knowledge Project, based on the sharing of knowledge and experiences and the promotion of social contact in an intergenerational perspective aimed at promoting the mental health and welfare of the target population.

Conclusions

The training action's results were very satisfactory. The technical group attended enthusiastically, revealing that they felt more prepared to plan and develop intervention projects supported in Healthy Cities principles and strategies. The group continues, however, to consider training actions essential and thus we are preparing a training plan for this year directed mainly at furthering the knowledge on health impact assessment method.

CITY / NATIONAL NETWORK: PRESTON

ABSTRACT NUMBER: 055

TITLE: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES

CONFERENCE: 2014 ATHENS

**CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE
CITIZENSHIP - COMMUNITY PARTICIPATION. TAGS: OLDER PEOPLE**

There are 800 000 people with dementia in the United Kingdom, with numbers set to rise to more than 1 million by 2021. One in three people older than 65 years will be affected by dementia.

The programme was initiated following a study undertaken by the Communities Scrutiny Panel on Dementia of Preston City Council, which highlighted the importance of developing collaborative approaches across public, private, community, voluntary and faith sector organizations to provide a more coordinated approach to improve the lives of people affected by dementia and to enable them to live well with the condition.

Preston City Council developed a Dementia Awareness Action Plan in October 2013. The plan has three themes: supporting the Council to become dementia-aware as an organization and responsive to the needs of people affected by dementia; raising public awareness of dementia through dementia friends sessions; and developing collaborative approaches across public, private, voluntary and faith sector organizations to support the aspiration for Preston to become a dementia-friendly city.

To date, 140 frontline staff and counsellors have received dementia friends training. The Council is also now rolling out improved signage. Regular dementia friends sessions are now held in community settings across Preston and also provided through equality forums, such as Preston's Women's Network and BME Forum. A Central Lancashire Dementia Action Alliance has been established and meets regularly.

Although the Council and its partners have made a commitment to ensure that services can become more dementia-aware and to raise community awareness of dementia, this ambition is set against a challenging backdrop of cuts in public sector funding. Supporting the aspiration for Preston to become a dementia-friendly city requires that partners establish robust and collaborative approaches across public, private, community, voluntary and faith sector organizations to support a coordinated approach to live well with dementia. There is also a recognition of the need to establish dialogue with private-sector organizations to improve access to high street services.

CITY / NATIONAL NETWORK: RIJEKA
ABSTRACT NUMBER:096
TITLE: PROJECT EGOV4U (E-GOVERNMENT FOR YOU)
CONFERENCE: 2013 IZMIR
CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS

Abstract

Context

A great number of data witnesses that certain residents' groups such as the unemployed, the disabled, the war victims and the elderly, are more exposed to the risk of being socially excluded. One of many aspects of social exclusion in modern life conditions is surely digital exclusion. As the City of Rijeka intends to be an intelligent e-government, which comprises the development of a great number of e-services that will ease the citizen's approach to city services and improve functioning of the city administration, the City's target is to make it possible for the majority of its citizens to make use of such services.

Rationale

Upon the initiative of the Milton Keynes Council (UK), the EGOV4U project has been created and supported by the City of Rijeka, the Dublin City Council (Ireland), Local Council Association Malta and FTZ Community Foundation (Malta), Reykjavikerborg (Iceland), Adepteq Limited, Connect Mk Limited, and the Open University (UK). The overall objective of EGOV4U is to accelerate the pace of e-enabled citizen-centric service delivery to socially disadvantaged citizens.

Description

The project comprises nine working packages, and for the development of each package one partner is responsible and is at the same time obliged to cooperate with other partners on the exchange of knowledge and experience. The project will take 36 months, and it will be financed by the EU funds (CIP ICT PSP) and local budgets of participating cities.

Achievements

This project is a continuation of the City of Rijeka endeavours so far to strengthen capabilities of potentially socially excluded citizens' groups through IT education, development of e-service, offering support to the implementation of psycho-social and social protection and measures within the City Social Programme.

Conclusion

Apart from raising the capabilities and self-awareness of final users, who belong to the socially vulnerable citizens' groups, the project is also expected to support the capabilities of outsourced structures, but also of the City of Rijeka in its communication with the citizens, particularly as regards the implementation of the projects financed by the EU funds.

CITY / NATIONAL NETWORK: SANDNES

ABSTRACT NUMBER:029

TITLE: SAFETY AND SECURITY WALKS IN SANDNES

CONFERENCE: 2014 ATHENS

**CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE
CITIZENSHIP - COMMUNITY PARTICIPATION**

A safety and security walk is a structured method that involves people in the local community in investigating both the physical and social environments. The basic idea is that those who live and are active in the local community have the greatest knowledge of it and that it is important to make use of this fact. Creating a feeling of security, preventing crime and ensuring good accessibility are important perspectives to take into account in this work. During a walk, people also meet, which in itself creates a sense of security and know-how.

The aims were: sharing understanding and responsibility to prevent violence and other crime; promoting dialogue between actors that have a role in preventing crime among young people; identify the need for physical changes; and contribute to increasing drug and crime prevention awareness using an intersectoral cooperation and holistic approach.

The organization coordinating crime prevention among young people (SLT) was responsible for coordinating the walk. SLT is a formal partnership between the local police and the municipality. The coordinator is a part of the healthy city team. The purpose is to prevent crime among young people by intersectional cooperation and holistic approach.

The initiative came from a group of youngster representing the Sandnes Youth Council, and schools and students were strongly involved in the work. The safety and security walk took place on 27 October during the evening and night. In 2012, a safety walk was arranged to identify physical and social elements in the city centre that could be an obstacle to a good social environment for young people. Politicians, the mayor, deputy mayor, representatives from all parts of the Municipality, the trade and housing enterprises, the Night Ravens and the police participated in the project. In total, 39 people joined the walk. A report was made with a list of actions that could improve safety in the city centre.

Although the walks are a tool for identifying locations felt to be particularly exposed and insecure, it is also important to note the places felt to be secure and thriving. This may concern lighting, pretty greenery, well-maintained footpaths, litterbins and park benches or areas or streets that promote general well-being and safety.

A report was made with a list of actions that could improve safety in the city centre.

CITY / NATIONAL NETWORK: SANDNES

ABSTRACT NUMBER:066

TITLE: HEALTHY IN SANDNES

CONFERENCE: 2012 ST PETERSBURG

**CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE
CITIZENSHIP - COMMUNITY PARTICIPATION. TAGS: OLDER PEOPLE**

Abstract

A reform for better interaction between the state run hospitals and the health care services provided by the local authorities/municipalities was introduced in Norway this year. This reform is often called a direction of reform. The essence of this reform, and the incentives from our government, is that early intervention and prevention is better than the later repair. This reform is also about getting different parts of the health service to work closer together. The objectives of the interaction reform are:

- Improve quality of life
- Coping with challenges in everyday life
- Reduced need for health care
- A reduced increase in the demand for hospitalization
- Comprehensive and coordinated services.

In our city and in Norway in general, most people are in good health, even into old age. Most people have a desire to live in their own homes as long as possible. The Norwegian tradition has for many years been that when some sort of assistance or health services is needed, people tend to sit back and wait for the health care system to take action. With this new reform people are expected to take more responsibility for their own health and situation – every challenge that may occur, doesn't necessarily have to lead to hospitalization.

The law that regulates public health was also changed due to this new reform. The aspects of public health have to be shown in all municipal plans. All service areas are responsible for ensuring all citizens the opportunity to take care of their own health. In the city of Sandnes we need to work towards a good multi-disciplinary effort to make this happen. Voluntary organizations and teams do a lot of efforts for the citizens. We need to work together with these and support all good activities going on.

Achievements and Conclusion

In Sandnes we have decided to make some workshops to see if we can find better ways to make the citizens able to take care of themselves. These groups are:

Welfare technology – utilizing new technology to ease coping with the challenges of the everyday life, both for the patients and for the employees, and also help them feel safe and secure in the use of the welfare technology.

Visiting teams will visit the citizens *before* they get ill, and in immobilized, and by identifying challenges in early stages, small measures may be taken, and by providing for instance small aids, the citizens may not become dependent of health care services at all, or at least postpone the time for the occurrence of such needs.

Rehabilitation in your own home rather than in an institution. The biggest change in moving the rehabilitation to the patients' homes is that the patients define what the aims for *their* rehabilitation are. So it is not a generic rehabilitation, but a specific, personal tailored rehabilitation. If going to the local store or cemetery once a week is defined by the patient as his or her aim, then that's the aim.

Healthy life central– focusing on aspects that may put people's health at risk – for instance smoking, obesity, excessive use of alcohol, and so forth, and to help with counseling and facilitation towards a change of lifestyle.

Health promotion and public health – focusing on good health for all - starting in the kindergarten learning about activity and nourishing food – all the way through junior high school, focusing on how to live a healthy life. All the departments in the city show in their plans how they promote the citizens' health. This part of the project is coordinated through the intersectoral Forum for Sandnes Healthy City.

CITY / NATIONAL NETWORK: SANDNES

ABSTRACT NUMBER: 001

TITLE: BICYCLE TRAINING FOR YOUNG IMMIGRANTS

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - MIGRANTS/BME - CHILDREN AND YOUTH

TAGS: CYCLING, TRAINING, PEER SUPPORT, CHILDREN, YOUTH, MIGRANTS

Abstract

The project plan is based on the action plan of the Municipality of Sandnes for following up the partnership agreement on public health with Rogaland County. The understanding of partnership is "committed cooperation towards a common goal among the public, private and voluntary sectors". From 2010, this will be incorporated into one of the Municipality's healthy environment programmes.

The partnership comprises Sandnes Bicycle Club, Dale Refugee Reception Centre, Spinn Bicycle Shop, Gand Upper Secondary School and the following sections of the Municipality: Culture (in charge of the project), Sandnes Language School for Refugees and Immigrants, Volunteer Centre and the Adviser (coordinator) from the Healthy City section.

The target group is people 16–20 years old with minority background such as refugees, asylum-seekers and immigrants. They are taking Norwegian language courses at the Sandnes Language School for Refugees and Immigrants to qualify for further studies. Most of them are lonely minors living at the Dale Refugee Reception Centre, and some come from neighbouring municipalities. About 50 people are participating in this project.

This project aims to promote inclusion, integration and diversity. The more specific objectives are:

- to create knowledge of, interest in and mastering of healthy and positive activities by promoting collaboration between minority and Norwegian youths;
- to stimulate rapid learning of the Norwegian language through meaningful social activities that could pave the way for dialogue and collaboration; and
- to establish natural meeting places between Norwegian and minority youths in which common games, sports and physical activities could be a tool for promoting mutual cultural understanding and respect.

The project group comprises the Cultural Section, Sandnes Bicycle Club, Sandnes Language School for Refugees and Immigrants, Dale Refugee Reception Centre, Volunteer Centre and Sandnes Healthy City. It meets every five weeks at the Sandnes Language School for Refugees and Immigrants to monitor the progress and take action to rectify setbacks.

Sandnes Bicycle Club is in charge of the practical side of the bicycle training and guides the teachers in developing the activities. The Sandnes Language School for Refugees and Immigrants cooperates with the Sandnes Bicycle Club on activities during school hours. The Dale Refugee Reception Centre, Volunteer Centre and Cultural Section cooperate with the Sandnes Bicycle Club on evening activities.

The Project is a great success, as both the students and the teachers are cooperating well to achieve the goals. The girls have especially become more active physically and take initiatives to participate actively. In addition, the social reality of these young people has become more obvious as both the minority and Norwegian youths get to know each other better. The number of young people living at the Dale Refugee Reception Centre who have started cycling to school is increasing.

Most of the youths participating in this project live here for a limited period, and just a few are likely to remain in Sandnes. We offer them these physical activities to give them positive experiences. The impact of this project has to be assessed in a wider perspective. Our most important purpose therefore, is to give young people as good a start as possible, so that they will have a good life while still being asylum-seekers.

CITY / NATIONAL NETWORK: SEIXAL

ABSTRACT NUMBER: 030

TITLE: PROXIMITY INTERVENTION AMONG VULNERABLE GROUPS: THE HEALTH ON WHEELS AND MOON FLOWER PROJECTS

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - MIGRANTS/BME

TAGS: VULNERABLE GROUPS, SOCIAL INCLUSION, HEALTH INDICATORS

Abstract

The rapid population growth of the past decades and Seixal's proximity to the country's capital city have contributed to the development of community groups with strong socioeconomic needs, a great majority of which are migrants (Roma and from ex-Portuguese African colonies) living in deprived residential areas.

Another vulnerable group, also consisting of migrant populations, includes sex workers, often inserted into international prostitution networks. The relationship between precarious living conditions and poor health status has been widely documented, and this specific population presents a low vaccination rate, absence of preventive care, limited health literacy and a weak or no relationship with local health care services. The sex workers have almost no health support, and their behaviour is associated with high public health risks (such as transmission of sexually transmitted infections), in addition to the psychosocial risks to which they are exposed.

Aiming to improve the health indicators of this population group, a community intervention project named Health on Wheels was created in 2004, which offers a wide range of health and social services through a mobile health unit. It is implemented through a partnership between the City Council, health centres, the local hospital and the General Health Directorate and promotes activities such as health education, vaccination, child health monitoring, diabetes and blood pressure monitoring and family planning.

As an extension of Health on Wheels, a new project named Moon Flower was developed, aimed at improving health care among sex workers. The focus of this project is on sexual health promotion and building capacity towards the development of a healthier life project. Health on Wheels resulted in the improvement of health indicators linked to immunization rates, prevention of conditions related to diabetes and high blood pressure and child health care coverage. Through Moon Flower, we have, among other aspects, promoted infectious disease screening and treatment referral. In terms of psychosocial intervention, several domestic violence victims were identified and referred to local support networks.

Both these projects have shown to be effective in their approach and have had an extremely important facilitative role in strengthening the links between vulnerable populations and community institutions. For example, we have a 40% attendance rate among all the people referred to health services through the mobile health unit. We are studying new approaches focused on improving this indicator by helping people develop means to manage their health more effectively and use the health mobile unit more rationally.

CITY / NATIONAL NETWORK: STAVROPOL

ABSTRACT NUMBER:003

**TITLE: ASSESSING THE HEALTH LITERACY OF STAVROPOL RESIDENTS AND HOW THE MEDICAL COMMUNITY CAN CONTRIBUTE TO IMPROVING IT
CONFERENCE: 2013 IZMIR**

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH LITERACY - HEALTH PLAN/STRATEGY. TAGS: POLICY MAKING, PREVENTATIVE HEALTHCHECKS

Abstract

Strategies to improve patients' health literacy and to involve them in the decision-making process should be a fundamental basis of health policy.

Our studies conducted in 2003 showed a low level of knowledge of health professionals in issues of preventive medicine. Since then, regular training courses have been organized for doctors in our centre. In 2012, we decided to reassess the knowledge of doctors and also identify gaps in informing the public and young people in particular.

In 2012, studies were conducted of health literacy and competence among 500 doctors in the primary health care network and among about 700 people 15–25 years old. The survey of a representative sample of doctors and young people has shown the following. Most doctors (51%) believe they do not need information on disease prevention and healthy living. The set of questions that defines the knowledge of physicians in preventive medicine has allowed us to determine the gaps in the adequate information sharing among medical professionals. It was revealed that only 72% of doctors knew the frequency of evaluation of body mass index, only 45% of respondents knew the age of the patient for cholesterol analysis and the frequency of this procedure. When we asked about the frequency and age of the patient for the faeces occult blood test, only 33% of doctors answered correctly. Only 53% of doctors were familiar with modern methods of tobacco addiction treatment.

Understanding the medical and social importance of influenza vaccination, the respondents were asked questions on this issue. It was interesting that only 63% of doctors recommended and always vaccinated themselves; 20% recommended vaccination for patients, but they did not do it; and 11% did not vaccinate or

recommend it for patients; 6% did not believe in vaccination against influenza. Thus, respondents were asked seven questions. All questions were answered adequately by 0.6% of physicians; 6 questions – by 7%, 5 questions – by 24%, 4 questions – by 26%, 3 questions – by 28%, 2 questions – by 11%, no correct answer – 2% of respondents.

The study of health literacy among young people aged 15–25 years showed that 63% do not know how to estimate their body mass index. Less than a third of young people are aware of how much time should be spent on physical activity. The respondents overestimate the time needed for such activity. Many respondents have misconceptions about the multiplicity of vaccination against influenza; thus, 18% believe that it is necessary to be vaccinated every two years, and 13% once every three years.

Health centers are visited by 33% of the young people. And 61% of the respondents gave the correct answer on the purpose of the establishing such centres. In addition, new sources of information were implemented both for doctors and for young people. Gaps were adjusted in the activity of health professionals to raise the awareness of patients of various age and social groups. The correlation was indicated between marital status, income, education of the respondents, their way of life and degree of health literacy.

These results made it possible to assess the knowledge of doctors and their contribution to improving the health literacy of patients and to determine the level of health literacy of young people. This allowed us to make adjustments to existing disease prevention and education programs. Social advertising videos were produced, numerous materials were published on disease prevention and healthy lifestyles for patients, and the main channels of information were taken into account that respondents prefer. Mass events are being developed and implemented to inform the public about health and the prevention of socially significant diseases, which are attended by over 11 000 people.

The health literacy of specialist physicians and the general public requires significant improvement with regard to the study results. To this end in view, a programme at the national and supranational level should be supported at the municipal level, which is where local issues and opportunities can be considered in detail.

CITY / NATIONAL NETWORK: SUNDERLAND

ABSTRACT NUMBER: 082

TITLE: CARE AND SUPPORTIVE ENVIRONMENTS

CONFERENCE: 2011 LIEGE

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - HEALTH PLAN/STRATEGY. TAGS: INDEPENDENT LIVING, TECHNOLOGY, CROSS SECTORAL APPROACHES, OLDER PEOPLE

Abstract

Care and supportive environments

Sunderland, like many cities, needs to meet the challenges that are ahead: demographic changes, including an expected increase in the ageing population; rising expectations of individuals and their caregivers in relation to demand for services; and policy drivers focused on developing and delivering personally tailored, high-quality services

The city aims to complete this through delivering against five aims: choice and control independent living equal access for all improving health and well-being better commissioning. Living in a place of choice has huge effects on a person's quality of life, with a decent and affordable home being central to this. Increasingly, people who would almost certainly have been in institutional care in the past can now retain a large degree of independence if they are in well-designed and - supported accommodation.

There is a spectrum of options to enable people to have their own front doors, including adaptations, equipment, core and cluster schemes, sheltered housing, extra-care housing, use of technology and overnight services. We aim for every person to have the support to live independently in their own home or community, if that is what they want.

This has involved the development of innovative schemes to support people in their own homes, such as telecare and telehealth, and working with partners, including housing partners, to plan holistically for housing and support through an integrated approach. It has also involved managing the residential care market to reduce the number of residential care homes delivering poor standards of care and rewarding quality homes by ensuring that they are offering the right service in the right place at the right time.

Achievements include:

- improved health and well-being and patient experience
- improved health and well-being and medical outcomes
- improved efficiency and value for money
- improved joint working.

Sunderland has achieved much in relation to housing options and surrounding support that enables more people to continue living at home. There are a range of innovative services that support people at home including prevention (home care) teams, a community dementia team, overnight services and a direct social and healthcare workforce who are all supported by the increased use of extra-care facilities and telecare. Intermediate care services within Sunderland have improved outcomes for individuals, supporting many older people back on their feet following injury or illness, enabling people to return to their own homes and communities.

The development of the Home Improvement Agency has enabled a coordinated approach to many services that all have the aim of supporting people to remain safely at home, providing practical support and assistance.

CITY / NATIONAL NETWORK: SUNDERLAND

ABSTRACT NUMBER: 031

TITLE: GETTING CLOSER TO OUR COMMUNITIES

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - COMMUNITY PARTICIPATION. TAGS: LOCAL GOVERNMENT, HEALTH PLANS, DECISION MAKING

Abstract

People are being divorced from the decision-making processes affecting their communities. Participation in elections has been as low as 23% in some areas, and there is a need to re-engage with people so that they are able to have a say in decisions and make public organizations respond to local needs. Surveys suggest that, although people are happy with the services provided at a local level, they do not see the work of the City Council so positively.

Sunderland City Council has recognized the problem and has developed a whole new way of working by the Council to address the issue. The Community Leadership Programme involves both councillors and officers in training and development programmes to ensure that there is a consistent "one-council" approach to the public. It has structured a series of five area committees to involve councillors, partners, officers, residents and the community and voluntary sector so that they can act at the local level and is reviewing how it provides services in a locally responsive way.

During the past 18 months, we have consulted with other local authorities in their approaches, undertaken workshops with councillors, partners and stakeholders and undertaken a wide range of local consultation events in more than 60 venues.

We have developed a series of local area plans with local strategic priorities (health, safety, learning, prosperity, attractive and inclusive) aligned to their areas but set within the bigger picture of the wider Sunderland Strategy so that the area committees clearly understand their roles.

Crime has declined; local services are more responsive, with attention to a cleaner, greener environment, reducing fly-tipping and improving cycleways. Youth provision has been highlighted, increased and supported locally. Mainstream resources have been increased to reduce incidences of antisocial behaviour. The voluntary and community sectors are being supported in providing services to older people and vulnerable people. Addressing issues at a more local level has allowed the strategic objectives of the City to be communicated to people and has also allowed for the locality to influence how mainstream services are provided.

CITY / NATIONAL NETWORK: SUNDERLAND

ABSTRACT NUMBER:025

TITLE: TELEHEALTH IN SUNDERLAND

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - HEALTH PLAN/STRATEGY. TAGS: OLDER PEOPLE, TECHNOLOGY, INDEPENDENT LIVING, PRIMARY HEALTHCARE

Abstract

The project is intended to provide evidence of the effectiveness and acceptance of telehealth and determine a business case for a telehealth service in Sunderland, operated jointly by Sunderland Teaching Primary Care Trust and Sunderland City Council. At a high level, the service will provide an alternative service offering for people with long-term conditions.

Telehealth builds on the success of the city's Telecare provision, which forms part of Sunderland's vision for care across the city and plays a central role in our disease-preventive health care model. The local authority has extended the service to 23 000 people across the city. This preventive approach is working to support individual choice and independence and to help people to remain safe and secure in their homes.

Equipment is provided to support the users in their home and tailored to meet their needs. Telehealth is designed to complement health care by monitoring vital signs and transmitting the data to a response centre or clinician's computer, where they are monitored against parameters set by the user's clinician. In Sunderland, the available equipment for patients includes blood pressure monitors, weight scales, blood oximeters and thermometers, which can be used in conjunction with the patients' responses to a medical questionnaire.

Telehealth does not provide critical care but manages a pre-existing condition and prevents deterioration through improved self-management. At a high level, operating Telehealth involves the following roles.

Health and well-being and the patient experience have improved. The key outcome is improved quality of life, and others include:

- increased patient safety
- increased patient satisfaction
- increased patient knowledge about their condition
- reduced anxiety
- improved convenience
- increased independence.

Health and well-being and medical outcomes have improved. The key outcome is reduced exacerbations. Although Telehealth is not able to improve patients' conditions, it can contribute to their holistic well-being. This can be measured via individual patient patterns, compared with the evidence base for the frequency of exacerbations of their conditions. Efficiency and value for money have improved.

The key outcome is reduced use of resources, and other outcomes include:

- reduction in admission rates
- reduced length of stay
- improved monitoring of conditions
- improved joint working.

Telehealth aims to directly improve the health and well-being of those directly and possibly indirectly in receipt of the service. Telehealth is not only unobtrusive but also delivers 24-hour support for service users, to ensure timely and preventive care when needed. Sunderland's Telehealth service is backed up by a monitoring centre, and a team of technical assistants and the social and health care teams are available 24 hours a day to provide a rapid response across the city.

CITY / NATIONAL NETWORK: SWANSEA

ABSTRACT NUMBER: 038

TITLE: KEEPING IN TOUCH (KIT) TO PREVENT NEET (NOT IN EMPLOYMENT, EDUCATION OR TRAINING) AMONG PEOPLE 16–18 YEARS OLD

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - HEALTH PLAN/STRATEGY.

Abstract

Responding to the Welsh Government's youth policy Extending Entitlement (2000), the City and County of Swansea and Careers Wales West developed a Keeping in Touch (KIT) Strategy. This was to clearly document that the location of all people 16–18 years old in Swansea was known and whether they were in education, employment or training. The cost of young people being not in employment, education or training is more than financial, as the impact of low levels of engagement affects future outcomes for young people, their families and for society.

A KIT Strategy Manager carried out research through a pilot phase during 2005–2006. In 2005, Swansea was 21st of 22 local authorities in Wales, with 12.5% (352) 16-year-olds not in employment, education or training on leaving school, including 8.3% (234) known to be not in employment, education or training and 4.2% (118) with destination unknown. These figures declined to 10.8% (305) not in employment, education or training, 8% (226) known and 2.8% (79) unknown in 2006. The Director of Education sought strategic support to continue the project.

The process starts in year 11 with the early identification of those at risk of becoming not in employment, education or training at 16 years. An information sharing agreement between Careers Wales West and the Education Department helps ensure that all young people within the cohort are identified, including their history and characteristics. All those identified as most at risk are contacted by a careers adviser and offered one-to-one support and engagement from the spring term onwards.

The key features between 2005 and 2011 were: a 77% reduction in the percentage of year 11 leavers not in employment, education or training between 2005 and 2011; and the only local authority to have the status and destination known of all year 11 leavers in both 2010 and 2011.

Success factors include a strategic focus of shifting resources to enable earlier intervention, robust information for identifying target groups among young people, sharing data, providing early support for the at-risk group and enthusiasm. The main focus has been to shift resources to work more intensively with the young people identified as being at risk of becoming not in employment, education or training at an earlier stage so that all school leavers have a status and destination known.

CITY / NATIONAL NETWORK: TURKU

ABSTRACT NUMBER: 018

TITLE: RESILIENT TICKET ENCOURAGES PEOPLE WITH LOW INCOME TO BE ACTIVE

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE

CITIZENSHIP - COMMUNITY PARTICIPATION

According to statistics and surveys, socioeconomic groups differ greatly in the extent of physical and cultural activity in leisure time. This and other expert information has been used in planning action to tackle inequalities in Turku.

People with low income have a greater risk of being excluded from physical activity and cultural services, mainly because they cannot afford the prices or fees. The low income can be caused by various reasons and usually affects the whole family. The individuals receiving income support in Turku in 2013 comprised 7.8% of the inhabitants (14 000 people).

To offer physical activity and cultural services to people with low income, the most recent innovation, the Resilient Ticket (*kimmoke* in Finnish), was developed to tackle inequalities in a very practical way. It targets the people in the weakest financial situation. The Ticket is marketed mainly by the social service workers to people receiving income support or other social benefits, who are unemployed or in rehabilitation or have low income for some reason. With the Ticket (cost €39 for six months), the holder can use all city-maintained sport facilities, such as swimming pools, sport facilities and gyms. In addition, the Ticket holder can visit museums and they are invited to theatre, concerts, ice hockey and football matches free of charge. Some of the events are available for the whole family. A person who is legitimated to purchase the Resilient Ticket needs to show a certificate when purchasing it. Information about the possibilities is available on the website www.turku.fi/kimmoke, and news about tickets for matches or concerts are sent via text messaging.

The tickets have been available since September 2013, and by summer 2014, more than 1200 people have bought one. According to a follow-up, swimming pools and gyms have been the most popular places to visit, and the biggest group of users are middle-aged men. Also the cultural activities as well as matches are well used and appreciated.

Development of the Resilient Ticket required wide cooperation between health and social services together with physical activity and cultural service providers. In addition, the city's main football and ice hockey teams were enthusiastically involved. It is obvious that family options are needed more in the future, and constant training must be organized for the social service workers.

CITY / NATIONAL NETWORK: UDINE

ABSTRACT NUMBER:120

TITLE: EMPOWERING AND SOCIALLY INCLUDING VULNERABLE GROUPS BY PROMOTING ACTIVE LIVING

CONFERENCE: 2014 ATHENS

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - ACTIVE CITIZENSHIP - COMMUNITY PARTICIPATION

The Municipality of Udine provides contributions and subsidies to people in socioeconomic need because of financial difficulties, such as disability living allowances, rental subsidies, etc.

As concerns employment promotion, many actions have been implemented. Job information desks: places located in institutions or in associations where people can get information about job supply and can offer their competencies; first dedicated to migrants, then they spread their services to everybody. For example, the family assistant desk answers to foreign as well as native demand.

Training courses: the Municipality favours the organization of training and vocational courses by training centres, especially for youngsters and unemployed people; "Socially useful jobs" have been created in the Municipality for unemployed people. Social cooperative institution assistance and vocational measures have been activated in cooperatives (grass-cutting, greenhouses, waste collection, house furniture removal etc.).

Evidence of the importance of health equity at the local level has been the introduction of many regulations and subsidies for people in need because of disabilities, mental health problems, frailty or for people caring for persons with these kind of problems.

The Municipality is committed to reinforcing a close relationship with the economic categories and with local social agents to shape some measures limiting the worst effects of the crisis on disadvantaged people.

In accordance with this perspective, the Municipality has promoted some extra social services for the community, for example the service called Pedibus: a service that helps children to walk to school by being accompanied by adults who guarantee for their safety. Pedibus functions throughout the school year, on routes to and from school indicated by a terminal and intermediate stops. The choice of road tracks and stops is made not only according to safety standards but also to the specific needs parents signal in a questionnaires (road problems, place of residence, etc.).

The people who accompany children to school on foot are recruited among unemployed parents and receive in return some shopping vouchers as a sort of reward of their engagement but also as a practical help to satisfy their basic needs. Most of these people are immigrants, who find in this service the opportunity to have a role and be helpful within the community.

The service is provided during the whole school year, and in 2013/2014 about 200 children and 70 accompanying people were part of it. In the current year, many more schools have decided to join this initiative and conduct pilot experiences during spring. The total number of children involved is supposed to almost double this year. Amusing activities are also organized to increasingly stimulate children's awareness about the importance of adopting healthier and more sustainable lifestyles. However, the most significant result has been the good relationships established by the people taking part in providing the service, both natives and immigrants, who have overcome differences in age, ethnic origin, skin colour, traditions and customs and got together to walk to school with their children.

This kind of activity, besides contributing to reducing traffic congestion near schools and to regular physical exercise, fosters social cohesion, neighbourhood revitalization and an increased sense of community identity. The most noticeable effect deriving from the activity has been the intergenerational relationships between children and older people, who seem to greatly benefit from accompanying children to school and from collaborating with students. Moreover, the shopping vouchers are really a concrete support for people with economic problems, and receiving them makes these people feel able to contribute to their community although they are unemployed. Moreover, the important message of social inclusion, mutual solidarity and integration between people and countries was also an important educational message for children.

The project is innovative especially for its multiple positive effects on the community: from healthy lifestyles to social inclusion, from support to economically disadvantaged people to the well-being of children, from the emancipation of women to healthy ageing.

CITY / NATIONAL NETWORK: UDINE

ABSTRACT NUMBER: 088

TITLE: ROMA POPULATION: TACKLING HEALTH INEQUITIES IN VULNERABLE GROUPS

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - MIGRANTS/BME

TAGS: MIGRANTS, SOCIAL INCLUSION, HEALTH INEQUALITIES

Abstract

According to the data collected by the Council of Europe, Italy has about 170 000–180 000 Roma people. In 2010, according to the Ministry of Labour, Italy had about 130 000–150 000 Roma people, of whom about 70 000 were Italians. The final report of the survey on the status of Roma community in Italy, issued in February 2011, stressed the following features.

- 60% of the Roma population are children or teenagers (one third 0–5 years old, almost half 6–14 years old), while only 2.8% are older than 60 years.
- In accordance with the European situation, only 2–3% of the Roma people are nomadic, while the large majority is settled; almost 40 000 (between one fourth and one fifth of the total Roma population) live in camps, especially in large urban neighbourhoods, often unhealthy and illegal settlements where two or three generations were born and lived.
- Public perception of the presence of Roma is dominated by prejudice and racial bias: such as Roma exploiting or stealing children, living exclusively by theft or choosing voluntarily to live separate from civilisation.
- Illegality and criminality are related to young people, since inadequate education, unemployment and marginalized conditions foster illegal acts.

According to the Italian Constitution, as well as to European and international law, protection measures should be adopted and social inclusion and non-discrimination policies should be promoted in relation to the Roma/Sinti population. The major challenges faced by the Roma population come from both their physical isolation and social exclusion from the rest of society.

The Roma community suffers from extremely poor living conditions and, because they lack residency rights and official registration, they fail to qualify for the most basic social services such as general health care and education. This results in poor health and high levels of illiteracy, which lead also to high levels of unemployment and petty crime rates. A strategy for providing assistance with education, better housing and job opportunities has been regarded as necessary.

Based on this, the Municipality of Udine decided to join a European project called ROMA-NeT to reduce health inequities and improve the health of the Roma population, by encouraging their integration in the local community and better access to health and social services.

The goal in access to key services was to make contact easier between Roma people and public services, avoiding forms of discrimination.

The goals for labour market inclusion were:

- promoting the overcoming of barriers in the access to the local labour market;
- making vocational training more accessible;
- providing for materials to start activities and informing about how to start an activity; and
- proposing forms of self-management of places where Roma live.

The goals for self-help programmes were:

- promoting involvement within the project network, particularly in the Local Support Group;
- enhancing Roma self-entrepreneurship; and
- reinforcing positive experiences, such as cooperatives.

The most important achievement of the project was the formal constitution of a multi-professional group, the Local Support Group: it included both institutional representatives (Municipality of Udine, Ministry of Justice and Health Department) and members from the organized civil society and from associations (Caritas, La Tela, San Vincenzo, UCAI, UNICEF and Vicini di Casa), all committed to analyse the situation of Roma people, to single out topics and problems, to discuss feasible solutions to problems, to participate in international and local meetings and to contribute in writing a local action plan. The local action plan is a joint output that summarizes the state of the art in describing the context, the subjects involved and the actions already implemented.

Specifically for Roma children and adolescents, one of the priorities – through the ROMA-NeT project – has been to think and implement strategies and practices to grant continuous education from the very beginning, with a strong link to primary and secondary schools. Moreover, the plan has involved preventing Roma youngsters from dropping out and enhancing vocational training, as a bridge to the labour market.

CITY / NATIONAL NETWORK: UDINE

ABSTRACT NUMBER: 087

TITLE: MOVE YOUR MINDS ... MINDS ON THE MOVE (HEALTHY AGEING AND MENTAL FITNESS)

CONFERENCE: 2010 SANDNES

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - AGE-FRIENDLY CITIES - ACTIVE LIVING. TAGS: HEALTHY AGEING, ACTIVE AGEING, MENTAL FITNESS

Abstract

As people get older, in tandem with other physiological changes, they tend to experience losses of mental functions. Some of these changes are due to various diseases or irreversible ageing procedures. However, many of these changes can be prevented or slowed down by leading an active life, considering several factors (such as a healthy diet, social contacts, continuing learning, physical fitness, etc.). In general, activity is a key factor in maintaining the quality of life in older age.

The same process occurs with mental fitness. It has been proven that keeping our mind active and exercising the brain regularly enhances cognitive performance and slows the process of mental deterioration.

Considering this situation and the scientific evidence that intellectual stimulation helps to maintain mental fitness, the Municipality of Udine has launched a project called "Move Your Minds ... Minds on the Move. This is an integral part of the comprehensive strategy implemented by the local government to improve the quality of life of older people in Udine. That is why the Municipality of Udine decided to devote to this project the funds coming from a mandatory national tax called 5 Í 1000 (0.5% of citizens' income is devoted to their own municipality and used for social needs).

The project comprises training lessons with exercises, games and laboratories aimed at promoting intellectual stimulation of people older than 65 years and helping them to retain mental flexibility and wellness. In this sense, learning is one of the most useful types of mental activity, since it requires attention, makes us set objectives, plan our time and activities and make efforts to understand the information we hear or read. To focus on the main cognitive abilities, the training programme included various modules on different topics: music, math and logic games, memory games, language curiosities, card games and handwriting.

Brief sessions were also organized with students from the University to give people information about brain training and the mental processes involved in learning. The lessons were held from September to December 2012 in public meeting halls that were easily accessible, and they were free to participants.

The participants' perceptions regarding their mental abilities and their satisfaction with the training programme was assessed according to the scientific literature to evaluate the effectiveness of the project. A handbook will also be produced as a guideline and a theoretical background on brain training for professionals working

with older people. The project was carried out in accordance with the WHO healthy ageing strategy and as a joint action between many local stakeholders dealing with education and learning, institutions such as the Municipality of Udine, the local health agency, the University and educational partners, such as the Third Age University, the toy library and associations from the third sector. It was a good example of networking and effective alliances for health.

Next year the project will spread to other areas of the city and will be available as a constant offer to inspire the community to enhance memory and recall ability while engaged in more active and healthy lifestyles. Another important aspect emerging from this project was the need and pleasure of older people to meet and spend time together, sharing activities, thoughts and viewpoints. The project also offered a solution to one of the most serious problems in our community: the sense of solitude among older people.

CITY / NATIONAL NETWORK: VIENNA

ABSTRACT NUMBER: 012

TITLE: HEALTHY DISTRICTS IN VIENNA – EXPERIENCE AND PERSPECTIVES

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS

TAGS: HEALTH PROMOTION, SOCIAL DEPRIVATION

Abstract

One major goal of Vienna Health Promotion is to foster community health, especially in socially deprived areas. Life expectancy is significantly lower in urban districts with a high share of socially disadvantaged groups than in neighbourhoods where the average population is better off financially and socially. In disadvantaged areas, promoting public health can be particularly effective, since it contributes to healthy and resilient communities.

Five districts of Vienna have been chosen as core areas for action based on socioeconomic data (such as age, educational level and percentage of immigrants) as well as discussions with experts and local actors. Various framework conditions and initial situations in the core areas have led to various concepts for the individual target groups, approaches or methods. Since 2010, five community health promotion projects have been launched to encourage and initiate participation processes, empower citizens and develop health promotion in these areas.

The project activities range from establishing and supporting local networking forums and developing training programmes for local residents who wish to take an active part to appointing health commissioners in municipal housing estates or holding health conferences for young people.

A formative evaluation of the overall programme supports the processes in the areas involved and documents the experience gained. Valuable experience has been gathered in the two and a half years since the project was first launched. In reaching specific target groups, for instance, the results show that socially disadvantaged people do not form a homogeneous group and, in part, face complex health challenges. It is therefore essential to use highly customized strategies, methods and measures (such as regarding participation, costs and locations) to actually reach the desired group and implement specific projects.

All five projects are scheduled to run until October 2013 (Phase 1). The results and lessons learned during project implementation in Phase 1 will contribute significantly to the development of municipal health promotion strategies in Vienna in Phase 2 (2013–2016).

CITY / NATIONAL NETWORK: VILLANUEVA DE LA CAÑADA

ABSTRACT NUMBER: 063

TITLE: EVALUATION OF THE THAO-SALUD INFANTIL PROGRAMME IN VILLANUEVA DE LA CAÑADA, 2007–2011

CONFERENCE: 2012 ST PETERSBURG

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - BETTER OUTCOMES FOR CHILDREN

TAGS: OBESITY, CHILDREN, HEALTH PROMOTION

Abstract

Obesity in general and, in particular, in children, has become a major challenge for public health policies in Spain. In 2007, the City Hall of Villanueva de la Cañada joined the Thao-Salud Infantil programme (in France, called the Epode programme), a pioneering local programme to prevent childhood obesity that is implemented at the community level involving all key social actors. It is led by the City Hall with the aim of promoting healthy lifestyles on children and their families. It is based on a plan of long-term and continual action, a complete model of evaluation and permanent communication. The programme is based on public-private partnership and is designed and coordinated at the national level by the Thao Foundation, which is also the link of knowledge and value shared between research groups, universities, public institutions and corporate sponsors.

Villanueva de la Canada believes strongly in local competencies in health promotion, is interested in mobilizing the whole local citizenship towards healthy lifestyles and considers essential to participate in the Thao Programme, a large network of more than 80 cities in Spain.

In Villanueva de la Cañada, the annual evaluation of results includes anthropometric parameters: weight, height and waist circumference of all children (3–12 years) as well as surveys of eating and physical activity habits. The prevalence of overweight and obesity is calculated from the body mass index and International Obesity Taskforce cut-off points.

In cross-sectional studies, the prevalence of overweight and obesity is the following:

Year	Overweight & Obesity	Sample
School Year 2007/08	21.9%	2362
School Year 2008/09	22.3%	2631
School Year 2009/10	22.6%	2727
School Year 2010/11	20.9%	2593

The longitudinal study (sample = 712) shows the following trend:

Year	Overweight & Obesity
School Year 2007/08	18.4%
School Year 2008/09	22.9%
School Year 2009/10	23.3%
School Year 2010/11	23.9%

We also make stratified calculations by school, age and sex.

At the local level, success means maintaining the active involvement of all key social actors regarding the promotion of healthy habits.

The implementation of the Thao-Salud Infantil programme has slowed down the growing trend of overweight and obesity prevalence in children compared with other cities and regions of Spain. We also make stratified calculations by school, age and sex.

CITY / NATIONAL NETWORK: VILA REAL

ABSTRACT NUMBER: 067

TITLE: CAMARA AMIGA

CONFERENCE: 2013 IZMIR

CATEGORY: CARING AND SUPPORTIVE ENVIRONMENTS - HEALTH AND SOCIAL CARE - COMMUNITY HEALTH. TAGS: COMMUNITY HEALTH, HEALTH AND WELLBEING

Abstract

Vila Real has developed structured projects based on the health needs of the community, supported by a vast strategic partners such as: the university; local community; institutional organizations; nongovernmental organizations; volunteers; schools; parents' associations; public services; and private local and commercial agents.

Câmara Amiga began in 2008 and is involved in small projects: a senior municipal card and a home workshop: to making small repairs at home for free, in terms of plumbing, electricity, locks and small improvement tasks.

The mobile unit makes daily runs through all the rural parishes of the Municipality and serves some 25 people per day, which amounts to nearly 500 people served monthly. These users are mostly older people. The goals of this unit are: to provide primary care, including screening for cholesterol, diabetes, high blood pressure and minor treatments. Remote cardiology services include not only electrocardiograms but also sending the results over the Internet for analysis by a cardiologist and creating a database.

Partnerships: Vila Real City Council, the regional health department and parish councils. Tele-assistance includes giving people SKeeper™ personal communicators with a distress alarm, which are mobile and that can be transported on the wrist or on a necklace, enabling users, especially seniors who lives alone, to be constant contact with family members or with health care services at the touch of a button. We have given about 50 of these so far.

The Volunteer and Goods Donation Bank of Vila Real is a charity shop that operates daily from Monday to Saturday with volunteers. The main goal is to encourage the practice of volunteer work, while also receiving goods donated by the university, schoolchildren, companies and individuals, including food, clothes, furniture, domestic appliances and toys. The beneficiaries are families from the Municipality who are poor or facing social exclusion. Partnerships: Vila Real City Council, the University (UTAD), schools, Vila Real Lions Club, churches, scouts and friends of S. Pedro Hospital League. The volunteer bank has help more than 542 families (per year) and a total of 1500 people. We believe that this number will increase considerably because of the social and economic instability in Portugal.

This work affirms that the Municipality of Vila Real is clearly committed with all the population of this region to promote the best quality of life through projects that we are building to stimulate and encourage the development of healthy intergenerational city projects. We look at the city from the perspective of how it affects health, because the city has potential and limitations that must be worked on to raise the level of health of the inhabitants. Health is undoubtedly a subject that interests all participants who are involved in the public domain and it is a common asset that must be preserved and improved. The health promotion projects presented by this Municipality and the partnerships that support them are an example of this. The priority for the municipalities should be implement projects that create healthy lifestyles, health education, access to health services and care, equality in health, promotion of healthy ageing, mental health, community participation, reduction of the illnesses associated with lifestyles, increase in environmental quality and healthy urban planning. Promoting health and the quality of life in cities is at the heart of the social work of the Municipality of Vila Real.

The municipalities are clearly committed to the principles and strategies of health for all, and it is very important to include these goals in terms of the social factors that influence the health and well-being of people in the city. Because the health of people who live in cities and around them is greatly affected by its living and working conditions, by the physical and socioeconomic environment and by the quality of health services, the Municipality of Vila Real has developed structured projects based on the health needs of the community, supported by many strategic partners such as: the university; the local community; institutional organizations;

nongovernmental organizations; volunteers; schools; parents' associations; public services; and private local commercial agents.