

**WHO European Healthy Cities Annual Business Meeting  
and Technical Conference**

**Web-based conference: 8–10 December 2020**

***Healthy Cities in Times of Pandemic: Protecting  
Communities and Building Back Better***

**Book of abstracts**

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Tuesday 8 December 2020

Parallel session A: 12:05 – 13:05

A2 Learning through practice: vulnerable groups in times of pandemic

**Abstract: CYP-University-001**

*Cyprus University of Technology, Cyprus: Exposome changes in primary school children in Cyprus following the wide population lockdown due to COVID-19*

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The first COVID-19 cases in Cyprus were reported in early March 2020, and school closures were one of the first nonpharmaceutical intervention measures implemented to limit SARS-CoV-2 transmission (13 March 2020). Simultaneously, recommendations were made for physical distancing and personal hygiene measures. The gradual easing of nonpharmaceutical intervention measures began in early May, with schools reopening on 21 May 2020.

By implementing the nonpharmaceutical intervention measures, children changed their lifestyles, such as spending more time at home, decreasing the number of social contacts and modifying their daily routine. The totality of these changes can be assessed by implementing the concept of the human exposome. Our objective was to describe the children's exposome in Cyprus before and after the lockdown and to assess their compliance with the public health recommendations.

An online survey was forwarded on 1 June 2020 to parents, via primary school administrations in Cyprus, with questions about the children's lifestyle and behaviour for two periods; school reopening, following the wide population lockdown (post-lockdown) and the school period before the lockdown (pre-lockdown). Descriptive statistics and exposome-wide association study analysis were performed. The analysis included 1510 children; the mean age was 10 years old; 48% girls; 41% from Nicosia and 25% from Limassol. Differences between pre- and post-lockdown were observed in sugary food consumption, physical activity, screen time, digital communication and handwashing frequency. More than 72% of the children complied with the recommendations. Increased time spent at home post-lockdown was positively associated with not returning to school, using antiseptic less frequently pre-lockdown and doing less physical activity during school break post-lockdown, while the odds of compliance were less with days elapsing from school reopening, living in Paphos (smaller town) and eating meat less frequently post-lockdown.

The study revealed differences in sugary food consumption, high adherence with personal hygiene measures and differences in compliance between the children living in a smaller versus a larger city. Our results could inform communication strategies and future nonpharmaceutical intervention measures so that less sugar consumption, increased physical activity and decreased screen time are recommended for primary school children.

The lockdown may have affected the exposome profile of primary school children, who show a high level of compliance with the COVID-19 response recommendations for the community and school settings.

*Turku, Finland: Interadministrative collaboration in school dropout prevention during the COVID-19 pandemic*

**Riikka Koivunen**, Marika Ahonen  
*City of Turku, Finland*

On 18 March 2020, basic education shifted from face-to-face teaching to remote schooling to stop the COVID-19 pandemic. However, a small number of students were in danger of becoming completely excluded from education. At the same time, the Education Division was considering reallocating its teaching assistants since the normal workload was diminishing, and the Welfare Division was assessing the support needs of children and parents living in particularly challenging conditions due to the extraordinary circumstances.

The City of Turku's strategy emphasizes its residents' well-being, and one of the focal points is preventing social exclusion. Among the strategic key elements is also the well-being of students in basic education. All children in Finland are subject to compulsory education, and the goal is, therefore, for everyone to get a school-leaving certificate from comprehensive school.

Ten teaching assistants transferred from the Education Division to child welfare services to provide support to their clients with school. These teaching instructors became members of working groups operating under child welfare services' noninstitutional social work unit and children's homes. The child welfare services' working groups identified the children and adolescents who were at risk of becoming completely excluded from education, and the teaching assistants served as working partners of child welfare services' employees, supporting children living at home as well as their parents. The teaching assistants also supported children and their parents during the remote schooling by providing assistance with school assignments. For example, the teaching assistants in child welfare services' southern district of noninstitutional social work had two meetings with client families per day on average. Each meeting was approximately 1.5–3 hours long. During the meetings, the assistants worked with the children but also provided guidance to the parents on how to support their children with school.

This extra service was extremely well received in the families, and the teaching assistants were a welcome help in aiding children in their educational challenges. The new approach also sparked a debate about making such a service a permanent part of child welfare services. After all, child welfare services work with school performance challenges year-round, even under normal conditions. At least in child welfare services' southern district the experience was well received. The school assistants quickly became part of our work community and carried out all the tasks allocated to them with appropriate vigour. They also added their own set of specialized skills to the mixture, previously not included in child welfare services. The clients and employees in other units also gave similar feedback. In fact, the number of dropouts fell below the level it had been during normal times.

Interadministrative collaboration creates better services for the clients, in addition to which it is more efficient and cost-effective.

## **Abstract: GRE-Alexandroupolis-001**

*Alexandroupolis, Greece: Good practice of the Municipality of Alexandroupolis in avoiding transmitting COVID-19 in Roma districts and among vulnerable population groups in the area*

### **Triada Tsakiroudi**

*Municipality of Alexandroupolis, Department of Social Policy, Greece*

Our municipality is inhabited by various cultures, including Roma and Muslims. Due to their cultural background, their customs and ethics as well as their educational level, their socioeconomic status is consequently low and makes their access to information difficult. Thus, the hazard of transmitting the virus among them is enormous.

All the management of communication, social policy, sanitation and cleanliness of the Municipality worked together to motivate the vulnerable groups by distributing materials and information.

The aim of the project action was to enlighten the inhabitants about the hazards of the virus, to show ways of protection and to offer free materials needed for better health sanitation as well as for better access to information so that they become able to apply the rules of protection and precaution against transmission and dissemination of the virus. In this way, the district becomes more resilient and the whole community safer. This practice includes several actions, such as: supply of materials and their distribution per family, such as: masks, disinfectants and hand antiseptics, garbage bags, bleach, bins with lids, etc.; supplying and installing Internet access antennas (wifi) for the best and free information for all and especially for students of the specific districts who had to attend their school programme online; an information campaign on the preventive measures against COVID-19 by conducting a competition quiz through an application set at the Municipality's website. Brochures with pictures and simple questions are also distributed, so that all residents, even illiterate ones, are informed about the precautionary measures but also the actions required in case of symptoms. The incentive to participate in the competition was given by providing prizes to the winners such as laptops, tablets and smartphones.

More people were better informed, and the number of infected people was kept low.

Proper information campaigns as well as good cooperation within the management and departments of the municipality leads to a more resilient community.

A3 Learning through practice: food aid in times of pandemic

## **Abstract: FIN-Turku-008**

*Turku, Finland: Arranging school meals and providing food aid to disadvantaged people during the COVID-19 pandemic in Turku in spring 2020*

### **Sari Salmio-Nurminen, Jenni Tähkävuori**

*City of Turku, Finland*

Finland's schoolchildren are given hot meals at school, and food waste distribution for disadvantaged people, organized by third-sector operators, takes place all around Finland. During the COVID-19 pandemic, schools began providing education remotely, and some of the services by NGOs were suspended. In Turku, new operating models had to be designed quickly for the important social operations to continue to run.

In the changed social situation caused by the pandemic, the aim was to use new operating models to guarantee that even the most vulnerable residents of the city would continue to have an adequate diet. Students attending face-to-face classes were provided school meals as usual, adhering to all the hygiene instructions. During remote schooling, students were able to order school meals from their school. Cooperation between different sectors was deemed necessary in providing food aid to disadvantaged people, and this approach allowed the work to commence rapidly: within a week from when the planning phase had begun, completely free food aid packages were being delivered to the homes of disadvantaged clients.

To secure food aid for disadvantaged people, a new operating model was developed through collaboration between the city, the third sector and private enterprises. The model allowed disadvantaged residents to call a service number or ask for help using an online form to have a bag of food aid delivered to their door. The Kompassi phone service operating under the City of Turku's Welfare Division received the food aid requests, the city's logistics team managed the deliveries and Turku City Data planned the transport routes. Artificial intelligence was used in designing efficient delivery routes. A third-sector operator called Operaatio ruokakassi was in charge of picking up food waste from shops and wholesalers and packing the foodstuffs in bags. School meal orders for an entire week were placed on a Friday to be delivered the following week using a Webropol questionnaire, and the meals were picked up daily. The number of schools taking delivery orders was 25, and they were located around the city. The clients were instructed to order their meals from their nearest schools. To avoid queues, the food pickups took place twice a day. Each chilled meal included a main dish and a salad or dessert and came packed in a portion-sized container. Two portion sizes were available. All orders with special dietary needs were also taken into account. Students of vocational education and upper secondary school were also able to order meals. They picked up their lunch packets twice a week.

Completely new operating models were designed for providing food aid to disadvantaged people and school meals to face the challenges created by the COVID-19 pandemic. A total of 5000 food aid bags were delivered to disadvantaged clients over three months. Simultaneously, the amount of food going to waste in shops and wholesalers was reduced and sustainable development was successfully promoted. The number of takeaway school meal orders continued to rise throughout this period.

New operating models can be achieved through interadministrative and cross-sector collaboration, and these models help ensure that the most vulnerable members of society continue to receive vital services. In a changed social situation, bold decision-making is imperative so that operations can be launched quickly. The operating models kept developing further throughout the work, and typically such models operate at their smoothest once the work is coming to an end.

#### **Abstract: UNK-Belfast-005**

*Belfast, Northern Ireland, United Kingdom: Belfast community response to COVID-19*

Kelly Gilliland, **Ryan Black**

*Belfast City Council, Neighbourhood Services, Northern Ireland, United Kingdom*

The COVID-19 emergency and response profoundly affected the residents of Belfast and services, including health, pharmacy and social support. A new way of working was required, to remove organizational boundaries, mobilize local assets, identify people at risk and align appropriate support.



Belfast has several health challenges, including respiratory disease and mental health, conditions that are exacerbated by COVID-19 and the necessary physical distancing and shielding measures required to mitigate transmission. The implementation of response measures required system leadership at the city level, which could extend between policy and local delivery.

A citywide community response mechanism was established, using key intervention strands, including a community hub for food distribution, a contact centre to process and coordinate responses to local needs, area-based teams to manage welfare referrals and provide a link between partners and creating a grant funding budget to support emergency response and recovery activities. This mechanism played a critical role in the wider regional response process, which included the Department for Communities, Belfast Health and Social Care Trust and Advice NI.

The response aligned financial and human resources from a wide range of partners and sectors and expedited processes that previously restricted collaborative working. A total of £1.6 million was allocated across 134 community groups. The citywide call centre handled 9770 calls, with the vast majority of these (6908) relating to the need for food parcels and a further 5115 calls handled by community partner helplines. Statutory and community partners also delivered 107 407 food parcels and hot food deliveries, with 9320 deliveries or prescription pick-ups.

The community response has demonstrated at scale and pace a whole-system approach to supporting vulnerable populations. Intersectoral working has been enhanced, with new and existing structures strengthened across the city. The response has tested new approaches to joint working across sectors at both the strategic and policy setting level and the operational and neighbourhood level and has provided an opportunity to future-proof emergency and non-emergency frameworks for collaboration.

#### **Abstract: UNK-Carlisle-001**

*Carlisle, United Kingdom: Carlisle Affordable Food Network*

Darren Crossley<sup>1</sup>, **Niall McNulty**<sup>2</sup>

<sup>1</sup>*Carlisle City Council, United Kingdom;* <sup>2</sup>*Cumbria County Council, Carlisle, United Kingdom*

There has always been a demand among the people in most need to have access to free or affordable food, and projects across Carlisle have been developed to meet this need. Early in 2020, the County Council brought together some of these projects to support a strategic approach to develop affordable food hubs. Since the outbreak of COVID-19, the need for emergency food and affordable food has increased dramatically and has once again been met by existing and new community groups.

Communities are facing difficult times, with financial hardship for a growing number of households. There are also many people who have had regular access to emergency food parcels, which has placed them in a position of relying on this free food.

The project has the guiding principles of dignity in practice; using available resources; working in partnership with community led groups to set up projects at a neighbourhood level. Affordable food hubs provide a food shop experience in a community building, which helps people by giving them a step up the ladder from free food towards being more self-sufficient. It is intended that affordable food hubs will meet the needs in the local community, tackle food poverty and reduce food waste by local food hubs accessing local supermarkets and food producers.

The project has a steering group that works with the City Community Centres Federation and the Local Food Coordinator. This Coordinator works with local community buildings and

projects to develop hubs across the city and district. In turn, the hubs work with supermarkets to develop a coordinate way to pick up and distribute food among the hubs and to continue to develop the affordable food hub network in Carlisle.

Although still in its early stages of development, this project has great potential for tackling not only food poverty issues but also social isolation, use of vital community facilities and links with wider health-care support. The development of the project will be a key feature in the Carlisle Healthy City Phase VII work.

## Parallel session B: 15:00–16:00

### B2 Learning through practice: delivering social and health services

#### **Abstract: FIN-Helsinki-002**

*Helsinki, Finland: Developing service chains and multi-level collaboration in mental health services for children and youth*

#### **Kaisa Pasanen**

*City of Helsinki, Finland*

This paper presents the results of a multi-administrative project for developing mental health service chains for children and youth in Helsinki, Finland. The objective of this initiative is twofold: to prevent social exclusion by improving the mental health of children and youth and to shift the focus of service delivery from secondary care to preventive and primary care.

The percentage of children and young people experiencing mental health problems has increased in the past years. In the 2019 national school health survey, 15% of the respondents reported experiencing mood or mental health problems. An increasing number of children and youth are referred to specialized mental health services because of shortages in primary care. Specialized services, however, fail to meet the needs of children and youth requiring intensive outpatient care.

A series of workshops was carried out in fall 2019 with participants from social and health care, education and youth services. Moreover, experts by experience were invited to participate. The workshops set out to identify the critical gaps in the service chain.

Six key measures for tackling the issues related to mental health services were identified in the workshop process: (1) reinforcing primary and low-threshold mental health services; (2) developing a model for supporting children and youth with concurrent child protection and mental health needs; (3) reinforcing the role of schools in identifying and supporting children and youth with mental health problems; (4) introducing the Common Approach model as a shared framework for identifying and discussing issues related to well-being; (5) increasing the use of evidence-based interventions across agencies; and (6) defining responsibilities in the service chain and setting indicators. These measures will be executed during 2020–2021. Developing and monitoring the effectiveness of the service chain is a continuing process.

The expected outcomes of the initiative are an easier and timelier access to mental health services. Further, the measures ensure a comprehensive approach across agencies towards the mental health of children and youth.

## Abstract: FIN-Kuopio-002

*Kuopio, Finland: Digital hackathons – designing new ways to offer social welfare and health-care services during the COVID-19 pandemic*

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The COVID-19 forced our community to consider new ways to offer services for youth in these demanding circumstances.

The employees in the social welfare and health care already work in challenging situations, and the spreading of COVID-19 made the situation even more challenging since physical contact was not recommended.

The cities can transform into open-innovation living laboratories, places to experiment and co-create creative solutions to improving residents' health and well-being. For a city, an open-innovation living lab is one step towards a smarter and healthier society. In the City of Kuopio, the Kuopio Living Lab is coordinated by the Kuopio University Hospital, the City of Kuopio and the Savonia University of Applied Sciences. During the pandemic, Kuopio Living Lab in cooperation with DigiCenter North Savo created new solutions for this challenging situation. DigiCenter monitors and maintains up-to-date information on digital technologies and their maturity levels, performs research and development projects on digitization and solves demanding business problems together with the customers. In May 2020, the Kuopio Living Lab and DigiCenter arranged a digital hackathon called Digital Hack. Hackathons are design sprint-like events in which people come together to solve problems and methods for the living labs to add knowledge about available data and enhance its use. By organizing hackathons, the living labs can generate innovative applications and services for the public.

Organizations working with youth such as the Mannerheim League for Child Welfare, the local social services and the education authority, got new perspectives on how to co-create new services to tackle the challenges brought by COVID-19. This way of co-innovating brought together cross-sectoral expertise trying to solve the challenges in the mental health services.

Kuopio Living Lab cooperates with regional development projects to acquire new ideas and needs from the residents. Hackathons can open up the community to develop new knowledge and expertise but also challenge living labs to think outside the box and generate new services to meet the community's needs.

## Abstract: TUR-Nilufer-001

*Nilufer, Turkey: Preparing for COVID-19 in a nursing home in the Municipality of Nilufer*

**Kayihan Pala**<sup>1</sup>, Zerrin Gules<sup>2</sup>, Selcuk Sahin<sup>2</sup>, Mehmet Can Yilmaz<sup>2</sup>

<sup>1</sup>*Bursa Uludag University, Turkey;* <sup>2</sup>*Municipality of Nilufer, Turkey*

People living in nursing homes are at high risk for COVID-19 due to both being older adults and having chronic health conditions. Therefore, a robust infection prevention and control programme during the COVID-19 pandemic is essential to protect both residents and employees.

The Inci and Taner Altınmakas Nursing Home was established (in 2016) and operated by the Municipality of Nilufer. In the nursing home, services are provided to people 60 years and older who can perform self-care. When the pandemic started, 73 people (34 women and 39 men) 60–

95 years old were living in the nursing home. Among the residents, 44 had hypertension, 36 had chronic heart disease and 17 had diabetes. The Municipality of Nilufer prepared an action plan in early March to protect the nursing home residents and employees from the COVID-19 pandemic.

The outline of nursing home pandemic action plan was as follows: residents are restricted from leaving the nursing home; a no-visitors policy has been enforced; COVID-19 training was provided to the residents and staff; the nursing home is generally disinfected twice a week, and common areas (WC, dining hall, etc.) twice a day; hand sanitizers are put in common areas; employees were started to work in seven-day shifts in March and 14-day shifts in May; the transport of the personnel during the shift change was provided by the Municipality; nurses examined residents (fever, pulse, respiratory rate, cough etc.) daily; the dining hall and the garden are arranged according to physical distance rules; and COVID-19 test is requested from residents who leave the nursing home when they return to the institution.

With the implementation of the action plan, no COVID-19 cases have been confirmed or suspected so far.

Nursing home populations are at high risk of dying from COVID-19. Well-prepared action plans against infectious disease epidemics can contribute to protecting nursing home residents.

### **Abstract: NET-Rotterdam-001**

*Erasmus University Rotterdam, Netherlands: Effects of the COVID-19 pandemic on behaviour, (mental) health and care-seeking behaviour of people with low socioeconomic status in Rotterdam*

**Inge Merkelbach**, Paul Kocken, Semiha Denktas, Shakib Sana, Sarah Boer  
*Erasmus University Rotterdam, Netherlands*

In deprived neighbourhoods, COVID-19 infection rates are high, possibly suggesting that people with low socioeconomic status living in these neighbourhoods show low levels of compliance to corona measures. However, other explanations are possible (such as a less facilitating environment in the workplace). Insight into barriers to and facilitators of compliance behaviour in this group is lacking, as is knowledge on how the pandemic affects physical and mental health. This is especially worrisome, since in normal circumstances, use of GP care in this neighbourhoods is high. During the pandemic, regular GP care is scaled down, resulting in less and different (such as digital) contact opportunities. How this changed procedure affects people's health is unknown.

To promote the (mental) health of people with low socioeconomic status, insight into both compliance with COVID-19 measures and use of GP care is crucial. Identifying experienced barriers can help in developing effective strategies to support health-promoting behaviour in this vulnerable group.

These issues were addressed via semistructured in-depth interviews ( $n = 70$ ) and structured short interviews ( $n = 120$ ). The participants were people with low socioeconomic status living in deprived urban neighbourhoods. We selected native residents and residents with a Turkish or Moroccan immigration background. Interviews were carried out in the native language of participants. We also distinguished between people with and without chronic diseases and people with low or high levels of health literacy. People were recruited via the GP.

This research reached a group of people that is normally underrepresented in research efforts. Recruitment via GP and interviews in the native language were critical success factors. The results offer insight into important motives for and barriers to health-promoting behaviour. These results offer direct leads for effectively organizing GP care for people with low

socioeconomic status and for effectively communicating and promoting COVID-19 measures to this group.

People with low socioeconomic status are most vulnerable to the health effects of the COVID-19 pandemic. Via interviews, the motives for and barriers to health-promoting behaviour and the (mental) health effects of the pandemic were identified.

B3 Learning through practice: vulnerable groups in emergency and post-emergency situations

#### **Abstract: CRO-Rijeka-001**

*Rijeka, Croatia: Community in Action – Rijeka against COVID-19*

##### **Jadran Mandekic**

*City of Rijeka, Croatia*

The appearance of COVID-19 and the ensuing panic that spawned sudden and strict lockdown measures found the City of Rijeka and its residents facing one of the biggest crises in history. It required swift decisions to be made and mechanisms to be put in place to minimize the negative consequences of the disease and the lockdown itself. The population that was most severely at risk during this time is the growing population of older people. With about 20% of its residents older than 65 years, it is obvious that the City will have to put special focus on protecting its older residents .

To do this, the City of Rijeka funded the delivery of free meals for the most vulnerable people among them. In addition, Rijeka's local Red Cross organized the delivery of food and medicine to senior citizens and all other people in need who were not already benefitting from Rijeka's other social measures. For delivery, volunteers used all available means of transport, including public transport, cars and the recently introduced system of public electric bicycles in the area of Rijeka called RiCikleta. The transport costs were co-funded by the City of Rijeka. Also, the City of Rijeka provided the Red Cross with the use of one personal car for this purpose.

In addition, residents started volunteering and organizing among themselves to help their neighbours and the broader community. One such example is the association SKANI Creative Center 50+. The association that normally deals with creative workshops for older people organized more than 120 volunteers who worked tirelessly to deliver groceries and medicine to people in need, take them to the doctor, walk their dog, bring them a book to read or take out their trash.

The combined effect of all the measures taken during these times of crisis helped Rijeka and its residents to successfully get through the first wave of COVID-19 in Croatia. The community of Rijeka has shown that by working together it can get through the worst of challenges, take care of its most vulnerable and ensure that no one is left behind.

#### **Abstract: FIN-Kuopio-004**

*Kuopio, Finland: Kuopio Aid for high-risk groups during the COVID-19 pandemic in the City of Kuopio*

##### **Kati Vähäsarja**

*City of Kuopio, Civic Services, Finland*

Residents older than 70 years have been regarded as a high-risk group for COVID-19 in Finland and have been asked to stay at home during COVID-19. Variation within older residents' ability to take care of their personal health and well-being while staying at home was evident. In addition, low-income families were regarded as a high-risk group during the school lockdown. To ensure that none of the high-risk group members would be left without the necessities of living, the City of Kuopio established Kuopio Aid using an intersectoral approach. Kuopio Aid was coordinated by the civic services unit of the City of Kuopio and conducted in cooperation with other city departments and units; health and social services, education, marketing and communication, and partners such as Finnish Red Cross Kuopio, Kuopio Parish Union and Save the Children Kuopio.

Promoting the well-being of residents is a primary duty of the city organization. However, during the COVID-19 pandemic, wider intersectoral cooperation was needed to ensure well-being. People older than 70 years living at home were contacted by phone to enquire about the need for help and to offer help. A help-line was also opened for families who need help during the pandemic.

Forty employees contacted 13 179 older people from 7 April to 15 May 2020 to identify those who needed help; 269 residents within the target group were not reached by phone. Home visits for those residents' addresses were then conducted by the Red Cross volunteers. Kuopio Parish Union helped those who needed someone to talk to and coordinated aid for families with the help of Save the Children Kuopio. Coordinating meetings were organized twice a week to coordinate aid and to report to the city's steering group.

Kuopio Aid was able to cover high-risk residents widely. Intersectoral collaboration crucially improved to reach the population in need for help. Kuopio Aid highlighted the necessity of cooperation between the public organization, the third sector and the residents.

Kuopio Aid was established to ensure the well-being of high-risk groups during the COVID-19. Cooperation established during the first phase of the pandemic enhanced the readiness to act and provide help for the residents in future need of aid.

### **Abstract: UNK-Belfast-009**

*Queen's University Belfast, Northern Ireland, United Kingdom: Co-designing a shared future: how can children be a part of reimagining Belfast's interfaces?*

#### **Rachael Black**

*Queen's University Belfast, Northern Ireland, United Kingdom*

The conflict in Northern Ireland has resulted in a legacy of peace walls that have instilled both physical and mental barriers. Following the publication of the 2023 target to remove interfaces, there has been substantial discourse on how this can be achieved. The Together: Building a United Community strategy included a 10-year programme to reduce and remove all interface barriers by 2023, although there appears to be a significant lack of clarity or direction around how exactly this target can be met.

The presence of walls has altered how children in interface communities perceive their spaces, community and city. The participation of children in complex areas is key to unlocking the full potential of spaces that exist behind physical and mental barriers. Envisioning spaces through a younger lens would incorporate untainted perspectives on neighbourhood places. Children are paramount in the design of communities and cities. This is particularly crucial in a post-conflict society. Incorporating play and nature within the context of an urban environment is difficult. Especially in areas of multiple deprivation, in which regenerating contentious urban sites is more challenging.

This research will explore the views of children who live in interface localities facing deprivation in Belfast. It will analyse children's perception and usage of interface sites; how they are currently consulted as part of planning and regeneration processes and how different consultation approaches could be used to harness the creative potential of the younger generation. The time frame for project completion is 2023, since it is a PhD project funded by the Northern Ireland and North East Doctoral Training Partnership.

After undertaking a pilot placemaking summer school programme related to an interface area with a local community centre, innovative and relevant concepts were developed. The plan created as a result has generated interest from statutory agencies and stimulated real-life improvements that have been achieved by working closely with the young children within the community. Challenges moving forward include remote working, which is extremely difficult for those in disadvantaged areas, land ownership, vision buy-in and funding.

Wednesday 9 December 2020

Parallel session C: 12:20–13:20

C2 Learning through practice: Healthy Cities and networks dealing with pandemic

**Abstract: CRO-NN-001**

*Croatian Healthy Cities Network, Croatia: Croatia's experience in managing the COVID-19 crisis at the local level*

**Selma Šogorić**, Dorja Vočanec

*Andrija Štampar School of Public Health, School of Medicine, University of Zagreb, Croatia; Croatian Healthy Cities Network Support Center, Croatia*

In autumn 2019, the Croatian Healthy Cities Network had selected its Phase VII goals, core themes and priority areas of action: healthy urban planning, investment in people in local policies and strategies (people at the centre) and empowerment and participation.

In the Phase VII implementation document, the Network stated that it would focus its activities on the needs of the people who live in vulnerable circumstances (especially children, people with disabilities and older people), transforming the delivery of services towards community-based services and developing an inclusive society and resilient and empowered communities. Over the decades, Croatian Healthy Cities Network members have learned that effective, comprehensive and integrated strategies and interventions are essential in addressing complex challenges, such as the COVID-19-induced crisis. Rich experience in managing the COVID-19 crisis at the local level, generated by Network members between March and July 2020, was assembled and presented in August 2020 in the latest issue of *Epoha Zdravlja* (Epoch of Health, the Network journal).

Twelve examples selected for publishing are textbook descriptions of how healthy cities and counties could incorporate complex academic and policy concepts (such as resilient communities, a people-centred approach and integrated care) in everyday practice. Some case studies describe how cities had linked various sectors and introduced new ways of working. They managed to transform local delivery of services, making them more accessible, especially for vulnerable population groups. Some of the examples address the health care and welfare system's challenges of improving its own capacity for change: reorganizing for better efficiency and response to the new health needs. Some examples describe how city administrations addressed the economic consequences of the COVID-19 epidemic and eased its burden for their residents. Mental health was addressed through organized lay and professional support. Services were accessible at the community and primary health care level and through digital solutions (online platforms and e-mail) even during the lockdown. Being mediators between the media and the general public on one side and professionals and politicians on the other, city and county public relations officers were especially valuable during the initial response to the COVID-19 crisis and helped to increase the health literacy of general public.

The COVID-19 crisis has influenced how community leaders and decision-makers perceive public health and preventive medicine. Integrated programmes that succeeded in overcoming intersectoral boundaries and the boundaries between levels of care helped us to share the burden of disease and showed that, where there is a will, there is a way.



## Abstract: GRE-Aspropyrgos-001

*Aspropyrgos, Greece: Immediate package of measures to tackle COVID-19 (first wave)*

### **Efstathios Restemis**

*City of Aspropyrgos, Greece*

We are going through a period of unprecedented phenomena in which the whole European Union faces a multidimensional crisis, completely asymmetric in its interconnected aspects: the COVID-19 pandemic, massive immigration, the European heterogeneity in managing these phenomena and a forthcoming economic recession (some economists talk about depression). Our municipality understood at the very beginning of the crisis that it would be easier for operational management and timely decision-making to create a separate, exclusive political body, with the corresponding forces and responsibilities, that will coordinate emergency measures to contain the pandemic. This body was named the Municipal Committee for Tackling the COVID-19 Pandemic and consisted of the Mayor, the Secretary General, the deputy mayors, the heads of departments and the service doctor. The Committee set specific dates for its meetings, but it also met extraordinarily when required. Indeed, with this unique institutional formation, our municipality managed to successfully draft its strategic planning, which was based on seven main work streams, over which it planned its actions:

- immediate establishment of a special pandemic management body
- dissemination of information
- civil protection
- strategic action by the municipal police
- activation of social structures
- volunteering
- acceleration of digital transformation.

This crisis is an incomparable challenge for the primary local authority to prove the reasons for its essential existence. A stable homogenizer of social cohesion and a pillar of the state, it must deliver the maximum to the citizen with holistic diligence, devise solutions and make the unmanageable manageable.

We want to get out of the current situation as unscathed as possible, to establish relations of cooperation and mutual trust with the residents, for a city that is healthy, humane, functional and sustainable, to move gently and smoothly to the desired normality and deal once more with whatever issues they want to arise, giving our best again.

## Abstract: ISR-NN-001

*Israel Healthy Cities Network: The role of city health coordinators and the Israel Healthy Cities Network during the COVID-19 pandemic*

### **Milka Donchin**

*Israel Healthy Cities Network*

In Israel, restrictions were imposed early in the first COVID-19 wave (March 2020), and about one third of the city coordinators were sent on paid or unpaid leave. Only 65% of them continued to work in the municipality, mainly because they were responsible for health in emergency. Another 13% worked from home. Nevertheless, most of them were active despite

not being formally employed. During the second wave, almost all of them are considered “essential employees” and hence remain employed.

The city health coordinators have a dual task: to manage the efforts to prevent the spread of the COVID-19 epidemic while supporting people with COVID-19 and isolated people and to maintain and promote the residents’ general health. During the first lockdown, they explained regulations to other officials, answered residents’ concerns and participated in providing food and medication to older people and to isolated people without family support. As for maintaining and promoting health – they encouraged engagement in physical activity at home and nearby, encouraged keeping up with health-care routines, provided mental health support and offered Zoom activities. Some of the coordinators were highly creative and provided instructions for families, prepared short video instructions for physical activity targeting various population groups and prepared information booklets for the residents.

During the reopening, their main task was to clarify the ever-changing regulations and to convey the new messages to the residents in close cooperation with the municipal spokesperson. Their challenge was to convince the residents to continue to comply with the mitigation measures.

During the entire period, the Israel Healthy Cities Network provided a platform for sharing information, initiatives and experiences. The city coordinators shared all the creative initiatives via the Network’s social media channels. It also made scientific information accessible, by translating it into Hebrew and summarizing the main findings, answered individual questions and provided general support.

The entire period was significantly challenging but provided an opportunity to strengthen the Network’s ties, to provide virtual learning days and to increase the resilience of individuals and the Network.

#### **Abstract: TUR-Bursa-001**

*Turkish Healthy Cities Association, Turkey: Healthy cities of the future*

#### **Murat Ar**

*Turkish Healthy Cities Association, Bursa, Turkey*

The unexpected COVID-19 pandemic put countries in a difficult situation. The first measures taken, such as closing schools, shopping centres, restaurants and sports facilities and cancelling sports events, were vital. Large businesses and factories that provided substantial employment were closed. Some countries closed all businesses other than those providing vital services. In some places, public transport was halted or the frequency was reduced. Use of masks, hygiene and physical distancing rules became mandatory. With so many restrictions, we have entered a period in which we feel a great change in our lives. This study discusses surveys conducted by the Turkish Healthy Cities Association with member municipalities and observations made during online workshops and suggestions for the future healthy city approaches.

During this period, there were sudden and important changes in the way local governments work. With the onset of the pandemic, many things changed such as flexible working hours, teleworking, office arrangements for physical distancing and the precautions to be taken by the personnel working in the field. The importance of municipalities in combatting the epidemic was clearly noted. It was clearly demonstrated that municipalities were the closest authority to the public, because people rushed to municipalities for support.

Strengthening hotlines, setting up crisis centres, supporting people that had to stay at home, providing care services at home, providing psychological support services, creating new regulations on farmers’ markets and providing masks and hand sanitizer were some of the areas

in which municipalities had to produce rapid solutions. Municipalities also provided guidance to residents regarding the new hygiene and physical distance rules published by the Ministry of Health. Cleaning the streets and disinfecting public spaces were important for the continuity of the fight against the pandemic. During the pandemic, discussions about the necessity of cycling becoming the new mode of transport increased. Local governments increasingly started to embrace technology for local administration activities.

During the pandemic, the importance of some responsibilities has been better understood. This period showed that some units such as counselling centres, crisis desks, psychological support units, sanitation units, those who provide food support, those who maintain home care services, those who carry out cemetery and burial works and those who care for stray animals need to be further strengthened for the future.

### C3 Learning through practice: Health for All strategies

#### **Abstract: FIN-Turku-006**

*Turku, Finland: Work conducted with the third sector to manage the exceptional COVID-19 circumstances*

**Risto Tolonen**, Maarit Luukkaa, Noora Orvasto  
*City of Turku, Finland*

During the pandemic, the city was unable to receive information about its residents' service needs through the normal channels. The city and NGOs therefore created a shared means of gathering this information. About 5000 organizations operate in Turku.

The COVID-19 situation and exceptional circumstances in spring 2020 caused an increase in the need for support and services. The city was unable to meet the residents' increased need for information and support on its own. This made the NGOs' low-threshold support and awareness of silent signals especially important when developing and coordinating services. That is why the City of Turku and the social and health care project JärjestöSotehanke 113 formed an organizational team with the aim of promoting the collaboration between the city and NGOs and distributing information systematically to the city, NGOs and the residents.

Some of the main goals of the work include making the residents' and NGOs' needs and concerns visible and identifying and listing them. Turun järjestöt 113, a joint project between the City of Turku's central administration and the NGOs involved in JärjestöSotehanke 113, continually collects the NGOs' concerns, observations and silent signals regarding the residents' lives via an online link. The same link can also be used to propose solutions to any concerns and problems identified. The responses received via the link are submitted weekly to the city's organizational team, which is in charge of processing them. The results are also used through JärjestöSotehanke 113, which passes information on to the area's social and health-care service organizations so that their operations can better match the real needs of clients. Every year, the City of Turku distributes some of the surplus from the social fund and the estates passed on to it to the central administration's units, based on applications, to promote well-being among older people. In 2020, the decision was made to expand this to a wider range of recipients as part of the COVID-19 measures. The amount of money was increased from €270 000 to €500 000, and non-profit associations and foundations were added to the list of eligible applicants. The applicants were asked for ideas under four themes: digital support, mental well-being, ability to function and loneliness. The applicants were asked for their input

in four key areas on how to respond to the challenges in residents' well-being both during and after the COVID-19 pandemic.

Important insight through experience and fresh new development ideas were achieved through the work carried out together. The call for ideas regarding well-being and health promotion attracted organizations with whom this type of collaboration had not been carried out before. Interaction improved, and we managed to reach target groups we would have otherwise missed and that would have thus been left without services. Both parties passed on information from each other to their target groups in a coordinated manner.

The extraordinary circumstances enhanced and reformed the cooperation conducted between the city and the third sector. Knowledge-based management also improved vastly, and the NGOs were able to develop new operations based on remote interaction quickly.

### **Abstract: NET-Utrecht-001**

*Utrecht, Netherlands: Health Pact Utrecht: co-creating health!*

Miriam Weber<sup>1</sup>, **Hedwig Leijten**<sup>1</sup>, Matthijs Zwier, Martin Chaigneau<sup>1</sup>

<sup>1</sup>*City of Utrecht, Netherlands*

Utrecht's ambitions on healthy urban living for everyone have been adopted in several political and policy visions and programmes, including the public health policy plan Health for Everyone! The main goal is to use the growth of the city as healthy, inclusive growth in a participative, multi-level governance approach. The Health Pact Utrecht illustrates Utrecht's ambitions.

Utrecht has many health and well-being initiatives and programmes, by residents, professionals, the municipality and local entrepreneurs. However, there are gaps as well in reaching specific groups of residents and in missing links between initiatives. Impact can be increased once knowledge, expertise and initiatives are co-created and combined. The Health Pact Utrecht organizes and facilitates this process by providing a platform for individuals and networks specifically focusing on experience, knowledge and the perspective of inhabitants and linking this specific knowledge with researchers, professionals, entrepreneurs and initiators.

The Health Pact Utrecht is based on the public health policy plan. The Health Pact Utrecht is part of several regional and local networks within the national programme Everything is Health funded by the Ministry of Public Health. The Health Pact Utrecht is identified as innovative participation initiatives by the City of Utrecht. Stimulating, expanding and strengthening the network of the Health Pact Utrecht is the main task and aim of the Health Pact Utrecht, to continually create new connections, alliances and collaborations in the city.

Since the Health Pact Utrecht started in 2018, several results have been achieved. Examples are co-creation and collaboration with the network Healthy Weights for Utrecht's Youth; with Utrecht Natural and Food4Good; the "Big Failure" festival with students; and the Vaccination Alliance. In April 2019, the Health Pact Utrecht organized its first Healthy Ideas Festival, which was attended by 150 participants, mainly residents, professionals and initiators. In December 2019, international and local professionals and initiators met during the Healthy Empowerment Symposium, which particularly focused on participation, empowerment and resilience. During the COVID-19 pandemic and the lockdown, the Health Pact Utrecht organized six online dialogues together with residents addressing current topics, such as chronic stress, arts and health and vaccinations.

The COVID-19 crisis significantly increased the importance and the impact of the Health Pact Utrecht. The existence of infrastructure, a network and formal and informal contacts proved to be of paramount importance in times when support needed to be provided and contacts needed

to be established quickly and smoothly, specifically regarding vulnerable and hard-to-reach individuals and groups of residents.

For more information:

<https://www.youtube.com/watch?v=5Rr0CiVA8Ek>

<https://zorgprofessionals.utrecht.nl/gezondheid/gezondheidspact-utrecht>

### **Abstract: SWE-Gothenburg-001**

*Gothenburg, Sweden: Community-based interventions through cultural mediators and health guides to increase knowledge of and trust in Sweden's COVID-19 strategy in north-eastern Gothenburg*

Catarina Åsberg<sup>1</sup>, **Maria Magnusson**<sup>1,2</sup>

<sup>1</sup>Region Västra Götaland, Gothenburg, Sweden; <sup>2</sup>SV Hospital Group, Angered, Sweden

Health inequity within the City of Gothenburg between groups with different socioeconomic status is well documented. In the north-eastern parts, half the population is foreign born, and many languages are spoken. Due to living conditions, the COVID-19 pandemic strikes the residents hard. The methods used by national and regional public authorities to share information (one-way communication by national television, posters etc.) are not efficient. Also, Sweden's COVID-19 strategy differs from the guidelines in other countries, which makes it difficult for the individual to attune. To minimize the spread of COVID-19 and its negative long-term health effects and to strengthen trust in Sweden's public authorities, alternative methods have been used for communicating health information.

The human rights approach has formed the basis for the community-based interventions. The public authorities, health-care providers and municipalities are obligated to adjust their approaches to meet the needs of their populations. The population enjoys the right to support, participation and influence in matters that concern them.

The actions were planned and implemented by the Public Health Department of the community hospital Angered Hospital together with residents in north-eastern Gothenburg and the City of Gothenburg during spring and summer 2020. Longstanding partnership enabled rapid action. The use of cultural mediators and health guides enabled dialogue between local authorities, health-care personnel and the residents. An upstream approach facilitated the learning process. The knowledge obtained improved the public authority's ability to adapt new ways of communicating necessary health information.

Associations between communication methods and the numbers of people with COVID-19 are difficult to compare. Analysis of detailed reports from the cultural mediators and health guides will clarify views in the community and shed light on processes. This will guide the development of tools for similar challenges in the future.

Influence, participation and control are keys to increased health equity. A long-term perspective is a necessary prerequisite.

C4 Learning through practice: social networks in times of pandemic

### **Abstract: AUS-NN-001**

*Austrian Healthy Cities Network: Ongoing project Keeping Social Networks Alive in New Ways (Soziale Netzwerke auf neuen Wegen lebenig halten)*

**Gernot Antes**

*Austrian Healthy Cities Network, Vienna, Austria*

The Austrian Health Promotion Fund (Fonds Gesundes Österreich – [www.fgoe.org](http://www.fgoe.org)) started an ad hoc funding campaign (<http://gesunde-nachbarschaft.at/gesunde-nachbarschaft-verbindet>) for measures relating to the social isolation and mental health of high-risk groups in response to COVID-19 measures in May 2020. The project is one of 21 projects that receive funding and exchange experiences through networking meetings within the call. The project is being implemented in cooperation with the institute queraum. kultur- und sozialforschung (<https://www.queraum.org>).

Social networks are an important resource for mental health and well-being and for the functioning of cities. Many social relationships exist due to membership or participation in associations, church parishes, events, social organizations and the like and are based on personal contact in groups. Due to COVID-19 measures, this traditional form of contact is hardly taking place at the moment and probably for some more months during the winter season. For many people, but especially for groups at high risk of COVID-19, an important source of social contact collapses, and social isolation can easily be the result.

The Austrian Healthy Cities Network started a joint project running from September 2020 to March 2021 with four member cities aiming to develop tailor-made support for organizers of social networks that normally depend on meeting physically. Initiatives, resources and needs were exchanged and collected via telephone interviews or online focus groups. The primary target groups are organizers of relevant social networks of various types. In the next phase, support offers will be developed from the interview results, which will be reflected in an online workshop together with the participating cities and other cities of the Austrian Healthy Cities Network. In the last phase, recommendations will be published combined with a call to counteract social isolation.

Five focus groups have been conducted so far, and some more are planned.

The content of the focus groups and interviews will be appraised by the end of November, so that first conclusions can be presented at the WHO Healthy Cities meeting.

## Abstract: DEN-Horsens-001

*Horsens, Denmark: Horsens – together at a distance*

**Christian Høgh Gregersen**

*Municipality of Horsens, Denmark*

On 11 March 2020, Denmark was locked down as part of the national COVID-19 measures. All non-essential public sector employees were sent home. Due to these measures, the Healthy City Shop in Horsens and all our activities promoting sense of community, volunteering, citizen participation, health promotion and co-creation, were temporarily closed. Thus, we had to reconfigure from a physical context to a new normal on digital platforms.

How to digitalize the Horsens Healthy City Shop? Further, this initiative had to support our mission of strengthening the community, mental health and co-creating platforms.

In the weeks following the lockdown, we began planning the strategic framework for the platform. We decided to create a closed Facebook group to make a safe space, promoting intimacy and a sense of community. The content we posted aspired to create a sense of coherence and openness to share. Within a few days of the group's launch on 27 March 2020, residents were actively participating, sharing stories, photos and ideas on how to live healthy, mentally resilient and social lives when most contact with the outside world was limited to a screen.

From March 27 to early July, the group reached 414 members, with more than 2400 reactions and 170 posts. A critical challenge was to enable and maintain participation throughout the shutdown period. Further, it was an initiative that required time, resources and priority-setting – and therefore fundamentally dependent on the initial planning process. The University of Southern Denmark and ABC for mental health will conduct a qualitative evaluation of the experiences by participating residents in October 2020. We hope to present these insights at the meeting in December.

As Denmark was locked down, in Horsens we were able to reposition our usual activities from a physical Healthy City Shop to an online platform. Through strategic priority-setting, we were able to nurture a sense of community, a platform with strong citizen participation and a place of shared inspiration on how to live mentally resilient and social lives during a nationwide lockdown.

## Abstract: UNK-Carlisle-003

*Carlisle, United Kingdom: Space to Talk – small gestures meaning a lot*

Darren Crossley, **Jeannie Pasley**

*Carlisle City Council, United Kingdom*

We know COVID-19 has created anxiety and fear for many people across Carlisle District, for a variety of reasons: employment, financial, relationships and increased loneliness and isolation.

To help address some of these issues, health care, community and local authority partners came together to develop and deliver Space to Talk events. We know that one of the greatest gifts people appreciate is to be really listened to and heard; this is a human connection that supports good mental health and well-being, so our primary purpose has been to provide safe spaces where people feel able to share their experiences and feelings.

Vulnerable people often rely on local services, groups and daily personal interactions – the very things most affected by physical distancing and lockdown – for their well-being. Some of these people will be struggling with well-being, and others may be experiencing conflicts, anxious to stay safe, while also being desperate for human connection.

250 people were listened to during the first two events, held in Carlisle City Centre in late August and early September 2020. The vision now is to develop this model as part of wider action to create healthier communities as we navigate COVID-19 recovery. The core partnership of Carlisle City Council, Carlisle Vineyard Church, volunteers and local medical centre social prescribers plans to reach out further by holding events with local community centres, secondary schools and universities; training will be offered to parish councillors so they can develop their listening skills to support their own communities; training volunteers from within school communities so that, as they progress through their school careers, they can transfer listening skills to those coming behind them, to provide sustainable wider support available for young people; reaching out and listening to unemployed people, through local unemployment centres; extending events to involve large employers; exploring ideas from Denmark, where you can borrow a person for up to 30 minutes.

We have been delighted by the response to the initiative and have already been approached by other interested parties who would like to become part of this community well-being model.

## Parallel session D: 13:40–14:40

### D2 Learning through practice: urban places promoting health and well-being

#### Abstract: FIN-Helsinki-003

*Helsinki, Finland: Promoting access to green areas with the help of an innovative tool*

**Maria Jaakkola**, Maria Hyövälti

*City of Helsinki, Urban Environment Division, Finland*

The Helsinki City Strategy outlines that “The ecological quality, accessibility and health effects of green and blue areas will be secured” and aims to create a moving and healthy city for all. The Helsinki Green Areas Strategy (VISTRA) strives at a city in which open spaces form an interconnected and easily accessible network.

Green networks promote healthy lifestyles by providing attractive places for outdoor activities and nature experience for mental well-being, contributing to the resilience of cities. Based on mobile data, the number of nature area users has increased during the COVID-19 pandemic, within the absence of urban amenities. International research has shown the beneficial effects of nature exposure for people and the importance of usable outdoor space within easy access, especially for older people and in low-income neighbourhoods. The effect of an accessible and high-quality green network is emphasized in a densifying city and during a pandemic, when many work from home and avoid public transport.

To ensure equal access to green areas in existing neighbourhoods as well as future ones, a tool based on spatial data in geographical information systems was developed in 2019 in collaboration with Sitowise consultants. Using the criteria of a maximum of 300 metres to local parks, 800 metres to neighbourhood parks and 2 km to regional ones such as the green fingers (wedges) of Helsinki, the tool makes use of open street map data, taking into account mobility barriers such as roads. The results tell us that the green network in Helsinki is extensive in its current state, but future infill development needs to be observed from this point of view.



The accessibility tool gives potential to map and communicate the big picture in terms of accessibility and use pressure of the cities' green area network. To map recreational services more comprehensively and to consider the quality of green areas as an element of their attractiveness, future development of the tool in collaboration with research institutes is needed. Critical success factors include the deployment of the tool in different sectors in the government and the accuracy of the data based on geographical information systems.

The accessibility tool is useful to study and visualize the current situation, the potential and the possible effects of land-use change and infill development. Planning green networks based on informed analysis may help reduce the health differences in different parts of the city.

#### **Abstract: POL-Lodz-001**

*Łódź, Poland: Social revitalization in the age of COVID-19*

**Iwona Iwanicka**, Anna Wasiak

*Łódź City Office, Department of Health and Social Affairs, Łódź, Poland*

The City of Łódź is currently – on an unprecedented scale in Poland – in the process of massive regeneration. Revitalization is an intervention in the economic, ecological, functional, spatial and technical crisis. It is an example of good practice, conducting a huge transformation, because it concerns many infrastructure levels. Modernization of infrastructure will not cause gentrification.

Its purpose is to bring a degraded part of the city to life and supplement it with new functions. The area of the revitalized area is 1783 ha, which is 6.1% of the total area of Łódź. Ongoing modernization will end in 2022.

Implemented activities include: total renovation of downtown buildings; all renovated volumes meet the requirements of standard design; the reconstruction of the downtown street grid is coordinated; the bicycle infrastructure of the whole city is being built; the city has 200 km of bicycle paths and a developed network of public bicycle stations; revitalization strongly emphasizes social issues: renovated buildings will be used as flats but will also be used for new social functions in modernized institutions.

The city is still connecting more than 14 buildings to the heating network. We are getting rid of about 1900 furnaces from the centre of Łódź. These activities are just the beginning of an intense battle for clean air. The currently running road and pedestrian passages meet all the requirements of European Union standards. Streets with calmed traffic are emerging with a clear preference for walking and cycling. Bicycle communication of 300 km of Łódź's area in the north-south and east-west relation is already a fact. The renovated tenement houses have social functions: community clubs, day homes for seniors and mentally ill people, art clubs, libraries, sheltered flats and kindergartens. The renovated city introduces social revival.

The described activities improve the quality of life of the inhabitants of Łódź, also in terms of the perception of everyday functioning in the time of limitations caused by the pandemic. COVID-2019 trauma provoked the evaluation of sectoral policies and urban policy. That is why the City of Łódź is currently working on a new city strategy, an important aspect of which will be to increase attention to the safety of its residents.

#### **Abstract: TUR-Bursa-002**

**Gül Sayan Atanur**<sup>1,2</sup>, Murat Ar<sup>1</sup>

<sup>1</sup>*Turkish Healthy Cities Association, Bursa, Turkey;* <sup>2</sup>*Bursa Technical University, Department of Landscape Architecture, Turkey*

Public spaces are places that are accessible to all segments of society, expected to create benefits for the whole of society and are under public control and responsibility. Public spaces bring people together and provide space for play, social interaction, creativity, economic activity and entertainment, which are among the concepts that develop cities. They are important for physical and mental health.

Cities in the 21st century face serious land and resource optimization problems, with a perspective of seeking a balance between the natural and the built environment. Although the amount of land used for each new house produced is increasing in 59% of the cities, the efficient use of land is one of the key targets for sustainable land use in the Sustainable Development Goals. Relatedly, there are many studies on the reduction of public spaces in cities. The COVID-19 pandemic created an extraordinary situation by disturbing many definitions of the public sphere. In contrast to the principle of being open and accessible to all in the definition of public space, access to public spaces has been prohibited in many countries. However, these areas are used at different crowd levels on days when going outside is possible, and they were used more intensively during the normalization period. With the curfew in Turkey, there have been many restrictions on access to public spaces.

The municipalities operate and control most public spaces. To minimize the use of public spaces, municipalities have taken measures that ensure social isolation and physical distancing. These measures can be categorized under categories such as: written and verbal warnings, prohibiting access to public spaces, removing urban furniture in public spaces, banning the use of urban furniture or designing urban furniture that increases physical distancing and suggesting new ways of use.

This study aims to discuss the restrictions imposed on the public spaces during the COVID-19 pandemic and the future role of urban health and public spaces.

**Abstract: FRA-NN-001**

*French Healthy Cities Network: Healthy city actions for preventing mental health problems and promoting mental health in the context of the COVID-19 crisis*

**Maude Luherne**, Nina Lemaire  
*French Healthy Cities Network, France*

Cities, alongside other actors in health, directly faced and continue to face the consequences of the COVID-19 crisis. The virus spread, lockdown and stop-and-go situation strongly affect well-being and mental health.

Cities implemented specific actions to face residents' problems (fear of going out, isolation, stress related to the crisis or life conditions, work or family care overload, etc.) and prevent more serious mental health problems. Social inequalities in health are a reality, and the crisis highlighted that mental health issues affected single-parent families, socially excluded people, and people living in tiny or crowded spaces more than other groups.

This presentation provides an overview on how cities delivered specific actions to respond to mental health challenges in times of crisis. Actions include mobilizing local health partnerships to act on mental health coordination and provide emotional and technical support provided during home visits, detect and support vulnerable people by mobilizing students in health or municipal police services via dedicated hotlines, support for providing medicines, meals and any type of support for isolated people, train-the-trainers sessions for local agents, providing communication guidelines or dedicated hotlines with psychologists.

Overall, while the health crisis was mainly managed from a security point of view, disease prevention and health promotion should be an integral part of the crisis management; it is of utmost importance to ensure cooperation between the national-level and local-level actors; provide adequate financial means for local health networks to efficiently react in times of crisis and ensure that all actors can be around the table and react quickly; monitor social and geographical inequalities in health to adapt policy responses to local realities; and support access and understanding of scientific knowledge for local decision-makers.

Although mental health issues were a key challenge during COVID-19 crisis, they were not a priority of the national crisis management. Cities were at the forefront to innovate and provide solutions for promote mental health and prevent mental health problems.

**Abstract: ITA-Udine-001**

*Udine, Italy: School and community programmes to reinforce resilience, emotional health and peace*

**Stefania Pascut**<sup>1</sup>, Diana Rucli<sup>2</sup>  
<sup>1</sup>Municipality of Udine, Italy; <sup>2</sup>International Federation of Telephone Emergency Services, Udine, Italy

Peace is one of the key pillars of the WHO Healthy Cities vision for the future, and peace-building means addressing the underlying causes of structural and cultural violence, which are inequity, exclusion and intolerance. Peace-building should start from schools, by promoting inclusion, citizenship and well-being, by addressing health inequities, by encouraging understanding and valuing difference and thereby building a more cohesive and inclusive community within and beyond the school. In Udine, we are implementing a series of

programmes in schools and within the community that intend to reinforce resilience, tolerance and emotional health in collaboration with the International Federation of Telephone Emergency Services, which held its international congress in Udine in 2019.

Some programmes address adolescents, specifically: (1) affectivity and sexuality education programme, to increase self-awareness and tackle stereotypes; (2) listening skills programme, to improve students' capacity for active listening and communicating with others, by understanding their value system and point of view; (3) a mindfulness programme, to reduce stress and increase students' self-consciousness; (4) intergenerational activities, to reduce discrimination and stigma towards older people and increase intergenerational relationships (computer literacy, cognitive stimulation exercises, etc.).

In addition, we have organized thematic events during the year investigating the various facets of solitude, depression, drug abuse and game addiction, with witness testimony.

During the COVID-19 lockdown, the programme was enriched with additional activities, in particular embedded within the general framework of "distance 1 metre, closer 1 second". This initiative comprised interactive remote conferences (through various platforms such as YouTube and Zoom) in which people could listen to prestigious international speakers and then exchange reflections, ideas and perspectives. The themes of the conferences were loneliness, depression, effects of the COVID-19 pandemic and lockdown, isolation and stigma, with many different population targets (migrants, older people, adolescents and children and women).

#### **Abstract: LTU-Kaunas-002**

*Kaunas, Lithuania: Health promotion and disease prevention for people 60 years and older*

#### **Jurate Jackyte**

*Municipality of Kaunas, Public Health Bureau, Kaunas, Lithuania*

The number of people 60 years and older is increasing over the world. According to WHO, keeping the health and functional independence of older people is one of the major challenges facing the European Region. Older people in Lithuania are not linked to take care of their health. As a result, most of the people 65 years and older have poor health. In 2018, 52% of people 65 years and older had limited knowledge of health literacy in health promotion. To change health-related behaviour, the Public Health Bureau of the Municipality of Kaunas started a healthy ageing project.

The project started in September 2018 and ended in December 2020. The aim of the project was to improve the health literacy level of Kaunas residents 60 years and older and to improve their health behaviour by implementing a public health promotion programme in Kaunas.

Various evidence-informed physical activities were organized during the project: tai chi, line dancing, aquatic exercise, functional training and physiotherapy exercise. A total of 888 residents 60 years and older participated in 816 project activities. Healthy cooking classes with professional chefs were also organized for older people. As a result, 120 older people gained knowledge and skills in property nutrition during 40 healthy cooking classes. To improve older people's mental health, psycho-emotional activities such as mindfulness-awareness and brainstorming sessions were organized. A total of 314 older people participated in the 37 training sessions to improve the psycho-emotional state.

Women were more likely to participate in health promotion activities. To attract more men, collaboration and involvement of local communities were used.

Empowering older people to make healthy choices can help to prolong the autonomy of older people and thus bring significant economic and social benefits.

**Abstract: ITA-Udine-002**

*Udine, Italy: Placemaking and tactical urbanism to create a culture shift in urban planning*

**Stefania Pascut**<sup>1</sup>, Marco Pollastri<sup>2</sup>

<sup>1</sup>Municipality of Udine, Italy; <sup>2</sup>Centro Antartide, Bologna, Italy

Cities worldwide must increasingly respond to a growing and diverse population, ever-shifting economic conditions, new technologies, climate change and demographic change. Also, urban spaces need to be experienced and shaped in new ways, since they become essential as key elements for promoting social inclusion, intergenerational relationships and socialization opportunities. Places provide meaning to the people who enliven them and become enabling places emphasizing culture, opportunity, beauty, belongingness (places versus non-places). Safety issues are also involved when talking about places, since people should feel safe to experience that place; for this reason, environmental aspects are very important such as reducing noise, pollution and traffic, facilitating sustainable mobility and considering visual impact.

Reinventing the urban landscape and placemaking takes into account these everlasting processes and is at the core of the project ExpertOver65 in the City of Udine. This project is based on a national working group within the Ministry of Transport and has been implemented in collaboration with Centro Antartide and the local pensioners' trade unions. It comprises a participative process that enables residents, especially older people to take part in urban planning decisions and managing neighbourhoods. Some areas of the city were selected and analysed from a demographic and urban development viewpoint. People living, working and playing in those areas expressed their voice and needs through interviews, questionnaires and focus groups. Quick, low-cost and creative interventions according to the tactical urbanism movement have been designed to drive lasting improvements in neighbourhoods. Residents became key actors in transforming urban places.

A protocol was signed between the Municipality and various trade unions with the idea of making healthy urban planning a shared process in which residents can express their needs and perspectives. This has proven to be even more important with the COVID-19 pandemic, since green areas and open spaces have become more and more important as well as services within walking distance. Tactical urbanism actions will be further developed throughout the city to co-design neighbourhoods.

**Abstract: TUR-Bursa-003**

*Bursa, Turkey: Measuring the health of places and the place standard: three field studies in design training in Turkey*

**Gül Sayan Atanur**<sup>1,2</sup>, Murat Ar<sup>1</sup>, Merve Ersoy Mirici<sup>2</sup>, Nazlı Deniz Ersöz<sup>2</sup>

<sup>1</sup>Turkish Healthy Cities Association, Bursa, Turkey; <sup>2</sup>Bursa Technical University, Department of Landscape Architecture, Turkey

Many social and economic conditions affect the physical qualities of urban living environments. Urban spaces are places where complex social and economic characteristics are concretely

expressed. In addition, this complex physical, economic and social structure of the city is constantly changing. The Place Standard tool has been developed to enable the discussion of these complex features of city spaces and to add the opinions of non-experts on the subject to the system. This discussion provides the opportunity to non-expert users to evaluate inequalities in urban spaces.

Studies on the Place Standard in Turkey were initiated based on the collaboration between the Turkish Healthy Cities Association and NHS Scotland in 2018 and started during the training event for coordinators of national healthy cities networks in the meeting of the Network of European National Healthy Cities Networks in Turkey.

This study focuses on the three field studies in Turkey completed after the meeting mentioned above. The first study was completed with the participation of NHS Scotland and the Turkish Healthy Cities Association, students and professionals from local governments. One of the area studies is a commercial centre with no residential use and is inside the boundaries of a UNESCO World Heritage Site located in the historical city centre. The second area is a different neighbourhood that is also within the boundaries of the same UNESCO World Heritage Site and consists mostly of residential buildings. The study was carried out with students of an urban design studio, and the Turkish Healthy Cities Association also participated in the study. The last field study took place at the university campus, which is a new urban area, with students of a public spaces course.

The three field studies mentioned above have shown that the Place Standard tool supports the formation of a common language in discussing the physical quality of the space. In addition, it was concluded that this language simplified design problems for students and assisted them in solving such problems.

#### **Abstract: UNK-Newcastle-001**

*Newcastle, United Kingdom: Innovating the housing offer through intersectoral approaches*

**Rose Gilroy**<sup>1</sup>, Barbara Douglas<sup>2</sup>

<sup>1</sup>*Future Homes Alliance, Newcastle, United Kingdom;* <sup>2</sup>*Newcastle Elders Council, United Kingdom*

Newcastle academics, industry actors, community organizations and the local authority came together in 2016 to explore housing alternatives responsive to real lives. The imperative was to develop accessible housing in multigenerational communities that are socially and environmentally sustainable. In 2018, the Future Homes Alliance Community Interest Company was formed, with directors representing all partnership sectors.

Surveys suggest that older people who consider moving to a new house struggle to find options beyond the age-segregated apartment blocks that dominate the spatial imagination of what is “suitable” housing in later life. If this is not what older people want, what else is possible? In the City of Newcastle, activists have been working to provoke conversations about later-life housing options and opportunities through the Doorbells dramatized narratives. The Creative Living Partnership is exploring various solutions for creatives to live and work intergenerationally. The Future Homes project, which will build 66 new dwellings, has been born from this culture of action-oriented enquiry.

Key to developing new models of housing has been a commitment to inclusive processes leading to a continuum of engagement. The design of Future Homes stems from 17 co-design workshops with occupational therapists, older people, parents of young children, housing managers and partnership members. Once occupied, residents will contribute their experiences to the iterative process of improving design and performance. The dwellings feature moveable

partitions, so the layout can be configured to suit the changing needs of diverse households. The buildings are to Passivhaus standard and benefit from communal facilities, including gardens, mini-allotments and secure cycle storage – all aimed at making the homes as sustainable and inexpensive to run as possible.

Delivery of creative processes for engaging residents and professionals in the co-design of housing. The development has planning consent and will be on site in early 2021 with occupation mid-2022. Industry stakeholders are queuing to test innovative products in our dwellings.

Our innovation lies in the fusion of meeting societal challenges and inclusive processes. Residents, as mutual learners, will contribute to the lessons learned that will inform further developments.

### Abstract: UNK-Belfast-008

*Belfast, Northern Ireland, United Kingdom: Social return on investment – analysis of an urban greenway*

**Ruth Hunter**<sup>1</sup>, Mary Dallat<sup>2</sup>, Mark Tully<sup>3</sup>, Leonie Heron<sup>1</sup>, Ciaran O’Neill<sup>1</sup>, Frank Kee<sup>1</sup>

<sup>1</sup>Queen’s University Belfast, Northern Ireland, United Kingdom; <sup>2</sup>Public Health Agency, Belfast, Northern Ireland, United Kingdom; <sup>3</sup>Ulster University, Northern Ireland, United Kingdom

Evidence supports the multifunctional nature of urban green space, and economic evaluations should therefore have a broad lens to capture their full impact. However, to date, economic evaluation, when conducted, tends to be viewed through a unidimensional lens.

Given the evidence for a range of health, well-being, social and environmental benefits of such interventions, we modelled the potential social return on investment of a new urban greenway intervention (the Connswater Community Greenway) in Belfast, Northern Ireland.

Areas that the Greenway was purported to affect included: land and property values; flood alleviation; tourism; labour employment and productivity; quality of place; climate change; and health. The most recent and applicable evidence before the development of the greenway for each area was summarized to obtain an effect estimate; this was then applied to available data for the greenway area and the impact estimated and monetized using various methods. To calculate the benefit–cost ratio, all seven monetary benefits were summed, for both a worst-case and best-case scenario and divided by the total investment cost.

The benefit–cost ratio ranged from 2.88 to 5.81. This means that, for every £1.00 invested in the greenway, £2.00–6.00 would be returned.

This is one of the first studies to determine the social return on investment of a new urban greenway, estimating the potential benefits. The results help us to begin to better understand a fuller value of the multifunctional and co-benefits of urban greenways that can support future investments, policies and practices.

**Abstract: CYP-University-002**

*Cyprus University of Technology, Cyprus: The exposome and compliance with physical distancing measures during the COVID-19 pandemic, Cyprus, 2020*

**Konstantinos Makris**, Xanthi Andrianou, Corina Konstantinou, Andria Constantinou, Costas Christophi

*Cyprus University of Technology, Limassol, Cyprus*

The first COVID-19 cases were reported in Cyprus in March 2020 and were followed by implementation of non-pharmaceutical interventions (such as school closures, suspension of mass events and extensive physical distancing measures (lockdown)) to limit SARS-CoV-2 transmission.

Compliance with the measures required swift change in lifestyle, including spending more time at home, decreasing the number of social contacts or limiting hours spent in the car, since nonessential travelling was not allowed. These changes led also to exposome changes (changes in the totality of exposure). We therefore aimed to explore the exposome of the general population of Cyprus and the compliance with the non-pharmaceutical interventions.

A survey was set up in two phases: during the lockdown (phase A: March–April 2020) and afterwards (phase B). The questionnaires were designed to capture exposome components, including socioeconomic status, lifestyle, routine exposure and contacts. In phase A, 597 responses were collected (42% from Limassol and 40% from Nicosia, the two major cities in Cyprus); the mean age of the respondents was 39 years and 62% were women. Differences were observed between men and women in stress levels, sleep efficacy, digital communication and handwashing patterns. Increased time spent at home during the lockdown was associated with spending more time at the workplace before and using digital communication with co-workers, while change in the time spent at home was associated with the number of contacts and increased communication with the family through social networks.

Lifestyle changes during the lockdown were comprehensively described. Among the respondents, we observed high levels of compliance with the measures and differences between men and women. Since the sampling method (snowball sampling) and the different cities were not proportionally represented, further geographical stratification and targeted communication of the study during phase B to each city should be conducted.

The results of phase A indicate a high level of compliance with the measures and show differences in exposure profiles, such as by sex, while informing continuation of the study.

**Abstract: FIN-Turku-001**

*Turku, Finland: How recreational services were changed during the COVID-19 lockdown and the way forward*

**Heini Parkkunen**

*City of Turku, Finland*

COVID-19 caused sudden and dramatic changes in all services of the City of Turku in March 2020. The first step was to close down all recreational services and places (sports, culture and youth). However, the second step was to plan and develop compensatory services to maintain people to be active for their health and well-being.



The total closing of all recreational services caused a need to transform the services into virtual platforms and finding new and innovative solutions to offer people recreational services despite the closed “normal” places and services.

Innovative, new and inspirational ways were developed. The following are examples of the variety: youth services transformed their services into a virtual world by using the Discord platform “Your place to talk and hang out” and increased also remarkably the services in the streets to meet young people. Sports services produced daily gym screens and videos for various target groups. Older people were provided gym lessons under their balconies in the neighbourhoods. People increased remarkably their outdoor activities, and a variety of different routes and nature trails were presented. Museums offered virtual tours, increased visibility in social media and outdoor places and screens. Libraries screened coffee breaks with authors, offered digital support to people and gave reading tips virtually. Additionally, the library stressed Omakirjasto services for older people, including easy-to-access virtual concerts, physical activity, books etc. The main channels for these digital and virtual services were YouTube and Instagram or the city’s own digital platforms.

Many of the services had already before COVID-19 virtual or digital services or presented in various channels. Spring 2020 brought a lot more users and also visibility to these existing online services. Additionally, COVID-19 forced them to rethink and strengthen these services very fast, almost overnight.

One of the main lessons is that a city can change how it works very fast when needed. Employees of the city are innovative and find new solutions to tackle even unforeseen challenges. It is already apparent that inhabitants change their behaviour due to COVID-19, and this needs to be considered in the long term. The future challenge is to maintain the digital and virtual services that are useful, used and effective. The future will most likely have a hybrid model: virtual and digital ways and live or attended services. Also, the challenge of measuring these services needs to be solved. What and how to measure to indicate the impact? Usually cities are said to be slow in changing anything, but spring 2020 showed skills and willingness to take a giant digital leap!

#### **Abstract: UNK-Newcastle-004**

*Newcastle, United Kingdom: Creating a virtual movement: adapting to a COVID-19 world*

**Kate Montague**, Donna Charlton-O’Malley

*Active Newcastle – Newcastle City Council, United Kingdom*

Our challenge as a city is to tackle the high levels of inequalities facing significant numbers of Newcastle residents. COVID-19 has significantly disrupted normal physical activity behaviour across the city.

Active Newcastle is well established at providing appropriate physical activity for residents living with long-term health conditions. Before the COVID-19 pandemic, there were one-to-one and group interactions, volunteer-led activity sessions, structured programmes and GP referral programmes.

Our virtual solution was initially developed to support our existing participants to keep them moving at home, increasing mental well-being. Since then it has developed significantly and has been accessed by all.

This is an insight-led, new virtual well-being and physical activity platform for Newcastle. Developed by staff, existing participants, feedback and research. Influenced by resources, closure of facilities, community groups and COVID-19 restriction. Solutions: telephone calls (those without digital access); What’sApp groups; Facebook; YouTube channel; emails and

newsletters; and a public health messaging communication framework. The implementation speed was extraordinary, removing our usual referral pathways and establishing a physical activity platform with processes, policies and training and a communication plan established in days. Our communication plan is based on 5 Ways to Wellbeing, incorporating the theme “being active”. We have applied previous insight, removing barriers and enhancing the likelihood of success, such as removing sports terms, changing session leaders’ dress, creating a fun, warm and inclusive look and feel and tailoring session types. Locally, we have surveyed residents to improve understanding of how COVID-19 has affected the physical activity behaviour of Newcastle residents. The results of this provided insight that will help us to adapt and change the current offer accordingly.

Partnership working and cohesion have been paramount to the success. Added value and a shared purpose have been created through the better integration, planning and relationships. The success can be attributed to understanding the local picture and impact; aligning resources across the council and the city; and developing new relationships.

Thursday 10 December

Parallel session F: 12:30–13:30

F2 Learning through practice: community resilience and mobilization

**Abstract: ITA-Udine-005**

*Udine, Italy: Play and the city: an innovative paradigm for social inclusion, sustainability and placemaking*

**Stefania Pascut**, Agnese Presotto  
*Municipality of Udine, Italy*

Cities provide unique opportunities for addressing the challenges of urbanization, population ageing, climate change and social exclusion, provided that inclusive, enabling and enjoyable places for promoting sustainability, health and resilience are co-created. The present good practices stem from the experience developed in the City of Udine through the project The Playful Paradigm. Udine has used games as a flexible, innovative co-created placemaking paradigm for promoting active ageing (Udine has an old age index of 217 and promotes active learning policies for older people), healthy lifestyles and energy awareness (Udine signed the Covenant of Mayors Initiative for Energy and Climate Change since 2009 and decreased its CO<sub>2</sub> emissions from fossil fuels by 18% in 2016 compared with the 2006 baseline).

The overall philosophy driving this process is based on games as promoters of social inclusion and participation, intergenerational and cultural mediators, facilitators of healthy lifestyles and energy awareness, placemakers and economic boosts for inclusive and resilient communities. A gamification urban strategy means applying game-design elements and game principles in non-game urban contexts: for example, serious games, edutainment, games for promoting health literacy, healthy eating habits, reducing the boring repetitiveness of physical exercise (fun theory, such as piano staircases). Primary examples of playful places and activities in Udine are the CamminaMenti community centres, the Municipal Toy Library and its public park, the Energy in Play annual Fair, the Travelling ToyBus, the city squares during the World Games Day, Pi Day, Darwin Day, the library of living books etc. The playful participatory paradigm can increase the capabilities of urban areas to respond to local challenges, promoting intergenerational solidarity and fair behaviour as well as smart integrated urban development.

Based on these premises, Udine has implemented an integrated strategy for promoting physical, mental and relational well-being as well as ecological awareness, thus creating healthy and sustainable environments through the healthy, green approach in all policies and including the playful participatory paradigm. This approach has been proposed also for a transfer network at the European level, and Udine is the lead city of a European project within the URBACT Programme, a European exchange and learning programme promoting sustainable urban development. The aim is to enable cities to work together to develop solutions and to replicate the playful paradigm based on gamification as an innovative concept for promoting social inclusion, healthy lifestyles and energy awareness, intergenerational and cultural mediation, placemaking and economic prosperity. During the COVID-19 pandemic and lockdown, games to be played online or remotely have been used as tools to contrast to loneliness, isolation and depressive mood.

**Abstract: SWE-Trollhattan-001**

Kristina Engstrand<sup>1</sup>, Anna Nilsson<sup>1</sup>, Ann-Christine Carlsson<sup>1</sup>, **Magnus Eriksson**<sup>2</sup>

<sup>1</sup>City of Trollhättan, Sweden; <sup>2</sup>Alliansloppet, Trollhättan, Sweden

Alliansloppet Action Week is a week full of sports festivities in Trollhättan, Sweden. The festival first took place in 2007 and has grown every year since. Today, Alliansloppet Action Week is a community-led sports festival for skiing, running, biking and more. The Action Week engages people and organizations from all sectors, backgrounds and ages.

Due to COVID-19 and the need for physical distancing, many festivals worldwide had to cancel or postpone their summer events. That was not going to be the case for Alliansloppet Action Week. Instead of cancelling, the organizers wanted to find a way to bring people together through sports, even in times of physical distancing and travel restrictions.

The organizers gathered people from both the city (municipality), the industry and the civic society. Together they started to rethink and reset Alliansloppet Action Week. By mobilization and digitization, the team managed to redesign and adjust the festival to fit the restrictions caused by COVID-19. The event, Klassjoggen, involved hundreds of students.

By mobilizing the whole city, Alliansloppet Action Week was able to take place both online and offline. What would have taken years before COVID-19 was now made possible in just a couple of weeks. Alliansloppet Action Week was awarded the Swedish Tourism Prize for its efforts to reset instead of calling off.

By mobilization and creativity, it is possible to build community resilience. In a plausible future, where we choose our travels carefully, global meetings at a distance will be an important way to exchange concepts, cultures and ideas. Alliansloppet Action Week is a great example of how we can use digital solutions to bring people together at a distance.

#### **Abstract: TUR-Nilufer-002**

*Nilufer, Turkey: Facemask production for COVID-19 in the Municipality of Nilufer*

**Kayihan Pala**<sup>1</sup>, Zerrin Gules<sup>2</sup>, Selcuk Sahin<sup>2</sup>, Mehmet Can Yilmaz<sup>2</sup>

<sup>1</sup>Bursa Uludag University, Turkey; <sup>2</sup>Municipality of Nilufer, Turkey

The Ministry of Health declared the first confirmed COVID-19 case in Turkey on 11 March . The Ministry of Health emphasized the importance of physical distancing, facemasks and personal hygiene to prevent illness. The use of masks is part of a comprehensive package of prevention and control measures that can limit the spread of certain respiratory viral diseases, including COVID-19. On 6 April 2020, the Presidency of the Republic of Turkey announced that all residents who need facemasks will get them free of charge through governorates, e-government and Post Telegraph Telephone Authority, and the sale of masks was banned. However, with the ban, a sufficient number of masks could not be distributed in a short time and residents began to have difficulties in procuring masks.

The Municipality of Nilufer established a mask production workshop in the main municipal building to meet the mask needs of both its employees and residents.

Technical opinions were obtained from the Chamber of Textile Engineers and the Bursa Medical Chamber for the production of medical masks. In accordance with the recommendations of professional associations, machines were provided to produce masks in accordance with the standards (three layers, 80-gram weight, 19.5 × 7.5 cm in size, 10-

centimetre plastic wire covered etc.), and workers who work in mask production were employed. The masks, made of nonwoven fabric, were heat treated at 140°C.

In about four months, 2 million masks were produced and distributed free of charge to municipal employees, residents and public institutions. In addition, masks were distributed in all marketplaces and were also given to the mukhtars to be distributed to the residents of the neighbourhood.

With the production and distribution of facemasks, the needs of the Municipality's employees and residents were met and contributed to fighting the pandemic.

### F3 Learning through practice: services in times of digitalization

#### **Abstract: DEN-Horsens-003**

*Horsens, Denmark: Horsens Healthy City: the Community Link – a digital platform facilitating communities and empowering the residents*

Kristina Rahbek Schmidt, **Ingunn Søndergaard Jacobsen**  
*Municipality of Horsens, Denmark*

The Municipality of Horsens and the civil society associations provide a variety of possibilities for the residents. The problem is the lack of a comprehensive overview, and the consequence is that professionals must spend a large amount of time searching for the right community for the individual citizen while the residents have a hard time or fail to take initiatives by themselves.

The aim is to provide a very user-friendly and intuitive platform that enables the users to take action and be a part of communities that can increase their quality of life, personally and socially.

The platform has been developed through Design Thinking and intersectoral approach methods: (1) a field study of the professionals “What is your need, how will you use a solution, who are your users and what are their needs?”; (2) analysing insights, making user-personas and developing a prototype; (3) testing prototype with professionals and residents 8–75 years old and different life situations, such as senior citizens, people with chronic diseases (physical and mental), vulnerable families, dyslexic boys and a brain-damaged woman; (4) developing and testing the platform with other sectors and civil society associations in Horsens; and (5) implementing and branding the platform.

Contrary to other solutions in Denmark, the Community Link is innovative and designed from a user-oriented perspective; avoiding professional, stigmatizing terms and focusing on user logic and language.

Future solutions are increasingly digital. In a democratic perspective, the platform will provide safe and easy access to knowledge, be user-friendly and give inspiration to take action to positive life changes and activities. Further important knowledge is shared, such as if professionals change their job. Operational: the residents are empowered to take initiatives and the professionals will save time and resources, resulting in better work efficiency and service. COVID-19 has prolonged the time of development and increased the need for a platform.

Even if some associations close down during a pandemic, the user will be able to find web-based alternatives, contact information and expectedly already be part of a community provided by the platform.

*Kuopio, Finland: The digital leap during the COVID-19 pandemic in the City of Kuopio*

Arto Holopainen<sup>1</sup>, **Milla Porkka**<sup>1</sup>, Pauliina Ruotsalainen<sup>1</sup>, Paavo Maskulainen<sup>2</sup>, Jouko Miettinen<sup>1</sup>

<sup>1</sup>*City of Kuopio, Finland*; <sup>2</sup>*Savonia University of Applied Sciences, Kuopio, Finland*

The COVID-19 pandemic has had far-reaching implications for people's daily lives and the delivery of public services. Avoiding face-to-face encounters and the spread of the epidemic created a great need for access to digital services. This has forced municipalities to take an almost immediate digital leap.

The City of Kuopio's Strategy 2030 sets digitization as a cross-cutting theme that is integrated in all levels of the Strategy. As the COVID-19 pandemic progressed, Kuopio's digitization road map was refined, and rapid action was taken in spring 2020 to improve the city's digital services and employee skills.

The challenge was approached from three perspectives:

1. Creating a situation picture of the digital maturity stage of city services to identify areas for development with most impact
2. Involving employees in finding new ideas and ways of working
3. Using existing digital tools to meet new needs quickly

The Finnish government digital service maturity model was used as a framework for the situation picture, which revealed many services that can be provided digitally quite easily.

The Mayor of Kuopio encouraged employees to give ideas on how to cope with this unusual situation. Already available digital tools were harnessed as an open and low-bureaucracy idea and innovation discussion channel *Ideapulputtamo* (Idea Fountain), where peer discussion could start immediately.

The lessons learned:

- The development of digital services brings a change in work, requiring operational changes and improving employees' skills and motivation towards change.
- The commitment of management and decision-makers is a critical factor in successfully implementing new digital services. For example, the good peer discussion in the *Ideapulputtamo* might be worthless if the management does not pay attention to it.
- Co-creating ideas to innovations with public-private-people partnerships provides an agile development channel for municipalities.

Kuopio's advantages were an existing human-centric digital municipality and Kuopio Living Lab projects, which provided opportunity for rapid action.

**Acknowledgements:** This study has been performed with the support of the European Social Fund, European Regional Development Fund, Regional Council of Northern Savo and Centre for Economic Development, Transport and the Environment South Savo.

*Palaio Faliro, Greece: Investing in healthy and active ageing through digitization creates value for European societies and economies: the case of the Municipality of Palaio Faliro*

**Ioannis Arkoumanis**<sup>1</sup>, Anastasios Rentoumis<sup>2</sup>

<sup>1</sup>*Municipality of Palaio Faliro, Greece;* <sup>2</sup>*Alliance for Integrated Care, Palaio Faliro, Greece*

The challenges European societies encounter, putting health and social care systems under immense pressure, are the following: the continuous increase of the older population with a simultaneous increase in longevity and the increase in costs of hospitalization and care. There is an urgent need to find and implement effective and efficient social innovations such as disruptive technologies and new organizational structures such as mobile integrated care teams, keeping older people active, healthy, safe and self-sufficient. These are now more important than ever, especially under the new situation of physical distancing and loneliness the older people already face due to the COVID-19 pandemic.

Investing in social innovations in integrated care delivery, facilitated by eHealth solutions, is not an economic burden. It creates value in terms of direct, indirect and induced effects, measured by the growth value added.

In the forthcoming PRONOO project of the Municipality of Palaio Faliro, the socioeconomic impact of an eHealth app supporting the self-management of older people with chronic noncommunicable diseases, living independently at home, and especially cardiometabolic diseases will be assessed. The evaluation framework will be based on a macroeconomic approach, measuring the direct, indirect and induced effects of the eHealth intervention and summing them up into a total growth value added index for the society and the economy as a whole. The project is due to begin in late 2021 and will last for three years. It is expected that a new paradigm for evaluating such interventions may be created.

The innovative solution will influence health system redesign at the municipal, intermunicipal and national level, creating new processes and pathways of primary care delivery for lifestyle factor modification supported by innovative information and communication technology tools (mobile apps, big data analytics and measuring socioeconomic impact). The most important critical success factors are the vision of the mayors involved and the existence of funding tools. Investing in novel processes and eHealth tools for active and healthy ageing creates value for economies and societies.

Parallel session G: 14:00–15:00

G2 Learning through practice: culture and health

**Abstract: DEN-Horsens-002**

*Horsens, Denmark: Cultural activities and sense of community in the new normal*

**Christian Høgh Gregersen**

*Municipality of Horsens, Denmark*

When Denmark was locked down on 11 March 2020, the Culture & Event Department of the Municipality of Horsens was sent home, as were all civil servants. The usual core task of providing the residents of Horsens with cultural highlights in the city space was severely challenged. Thus, the planned activities had to be moved from a live setting to digital platforms. In this restricted and isolated new normal, it was important to offer alternatives to secluded isolation and create cultural activities that would promote citizen participation, ensure the prosperity of the local cultural scene and the mental health of the people.

On Monday, March 30, the Culture & Event Department launched the campaign Feel the City, at Home – Culture Moves In. From March 30 to May 10, more than 50 cultural activities were presented. This included online yoga, painting, concerts in backyards and much more. The two months of culture on new platforms included only local cultural actors, thereby highlighting the strong cultural scene of Horsens and sustaining local cultural actors in a financially insecure time. All activities enabled people to stay at home and still experience everything to the fullest. The activities adhered to COVID restrictions while enabling activation and shared meaningful experiences – promoting participation and mental health in a severely challenging time.

Participation in activities fluctuated from 10 at the fewest to more than 1000 at the most. Moving culture to a strictly digital platform enabled new participants who would not have participated otherwise. However, being digital was also a key challenge, since the response and degree of participation are more difficult to decipher online compared with a physical space.

In a new normal in which people were isolated alone or with their families, the Municipality of Horsens created new cultural activities on digital platforms to facilitate positive shared experiences and create meaningful experiences to promote the mental health of the population and sustain the financial resilience of the local cultural scene.

**Abstract: FIN-Helsinki-001**

*Helsinki, Finland: Culture Kids in Helsinki*

Ulla Laurio, **Mari Männistö**

*City of Helsinki, Culture Services, Finland*

Every child born in 2020 or after and living in Helsinki will be sponsored by a cultural operator who will invite the child and their family to arts events every year until the child starts school. The events are free of charge and designed to support the child's development and the well-being of their family. The programme aims to reduce inequality between socioeconomic groups. Newborn children are invited to the programme through the maternity clinics, which are also involved in developing the programme with early childhood education experts and art specialists.



The Culture Kids programme guarantees every child an equal right to art and culture but also gives the 30 cultural operators who act as sponsors a chance to adjust their work to correspond to the rapidly changing demographics of Helsinki. By bringing new audiences close to arts institutions, the City helps the institutions to evolve as the cultural and linguistic diversity of the City increases. Children unite parents. The experience of having a baby shakes a person in the same way regardless of cultural background. Offering groups of young families fun and relaxing moments with high-quality music, paintings or theatre can help in creating common ground and kinship.

The Culture Kids programme started at the beginning of 2020 and COVID-19 almost immediately forced all the actors in the programme to change their plans. The first artistic events had to be cancelled, and instead there have been family concerts via the Internet. The original target was to get 3000 families involved in the programme during the first year and after that 5000 more each year, but at the beginning of September 2020 there were only 1400 registrations. The Helsinki Philharmonic Orchestra was scheduled to start the live events at the end of September, taking only 15 baby–parent couples to each event.

Culture Kids events for 2021 have been planned and have been designed to be scaled up or down easier in terms of the size of audiences and numbers of events.

#### **Abstract: UNK-Newcastle-002**

*Newcastle, United Kingdom: The Geordie Guide to Happiness*

**Alex Henry**<sup>1</sup>, Kathleen Smith<sup>1</sup>, Christopher Thomson<sup>1</sup>, Dominic Smith<sup>2</sup>

<sup>1</sup>*Curiosity Creative CIC, Newcastle, United Kingdom;* <sup>2</sup>*Newcastle, United Kingdom*

The Geordie Guide to Happiness is a digital inclusion project that is engaging participants in the ancient art of storytelling through the modern medium of podcasting. Exploring the idea that “our culture is who we are”, it is focusing on the intangible heritage of people’s stories and experiences that contribute to the heritage of Newcastle.

We have been engaging with the people of Newcastle to tell us what makes them happy. At the time the grant application was written in November 2019, the United Kingdom felt divided because of several political factors. By the time the grant was awarded in March 2020, the United Kingdom was in lockdown as a result of the COVID-19 pandemic. At this uncertain and unusual time, it was felt that this project was needed more than ever. We want this project to help people think about what makes them happy, reflect on what is important to them and still feel connected with the outside world while we having to spend more time staying at home.

We wanted the content of the podcast to be relevant to our local audiences. We wanted local people from Newcastle to help us generate the content so that it is of interest and relevance to the people of North East England. We therefore saw the process of creating the content as collaborative and discursive. We have worked with local community groups and individuals to tell stories and create content on the theme of happiness and well-being. Stories have been captured through virtual facilitated happiness workshops on Zoom and shared publicly by creating a new podcast – The Geordie Guide to Happiness – which is available on all major podcast platforms and via our project website <https://thegeordieguidetohappiness.co.uk>.

The podcast itself has also been recorded and produced remotely using a web-based remote recording platform. The project is still live and will be running until March 2021 thanks to a grant from the Newcastle Cultural Investment Fund at the Community Foundation.

#### **Abstract: UNK-Carlisle-002**

Jeannie Pasley, **Darren Crossley**  
*Carlisle City Council, United Kingdom*

A key part of building back better following the COVID-19 crisis is Carlisle's determination to embed health and well-being outcomes within all aspects of the City partnership work. A recent illustration of this has been the inclusion of community well-being as one of the key strands of the Strategic Framework for Culture in Carlisle. The Framework has been developed by the University of Cumbria, Tullie House Museum and Art Gallery, Prism Arts and Carlisle City Council, with financial support from the Arts Council England and working with a range of partners.

The Framework aims to give new life and vision to the City's rich culture and heritage and how culture will play a leading role in the future growth of the City region.

The Framework sets out 10 priorities, two of which directly address health and well-being opportunities: priority 7 is to invest in specific areas of need by forming task-focused culture partnership panels, when possible, using existing networks such as community centres, to collaborate across the district and to ensure that local cultural opportunities are diverse, reflect and include people's needs and successfully connect large-scale events with ongoing local community activity, keeping culture current and dynamic. WHO Healthy City phase VII priorities underpin these activities. Priority 8 is to work with the NHS and other health-care providers to strengthen and broaden the range of cultural opportunities available through social prescribing.

With support from a broad range of partners, the inclusion of health and well-being within the Cultural Framework is a good example of how health and well-being needs are increasingly seen as being fundamental to the success of the City region and, therefore, as vital aspects of everything we are seeking to deliver.

To ensure that this is happening, Carlisle City Council has recently restructured part of a previous team to create a new Healthy City Team that brings together arts and culture, physical exercise, green spaces and allotments, sustainable food, volunteering, participation and community engagement into a single, integrated service focused on delivering health and well-being benefits for communities across the City.

**Abstract: FIN-Turku-007**

*Turku, Finland: City-level management of the exceptional situation caused by COVID-19*

**Risto Tolonen**, Maarit Luukkaa, Karoliina Luukkainen  
*City of Turku, Finland*

The City of Turku is responsible for promoting its residents' health and well-being and providing them with basic services in these areas. Turku has about 195 000 residents, and the City organization employs about 11 000 people.

When the pandemic reached Turku, it became apparent that the city's normal operations had to be adjusted to the new situation, and an information collection system was needed as a basis for the city's decision-making to compile all the fragmented information about how the pandemic was affecting the residents' lives.

A crisis response team comprising the City's leading authorities was put together to monitor the situation and make the necessary decisions. The mayor gave a public face to the City during weekly media briefings. Due to the demands of the crisis situation, the City's central administration unit in charge of welfare began coordinating the social support provided to the residents and generating data for the crisis response team. The work was conducted in close cooperation with the City's divisions. The welfare unit coordinated the communication pertaining to the theme and gathered signals from the City's divisions and interest groups. The unit initially called the divisions a few times a week and later as often as required depending on the situation to hear about their experiences with the COVID-19 measures. Based on the signals, the unit made proposals to the divisions and took part in changing the divisions' service provision due to the exceptional conditions. The City of Turku's Welfare Division has a pandemic plan in place as part of the preparedness plan. Based on the pandemic plan, some of the social and health care operations were suspended and the resources were reallocated (such as to the infection prevention unit for tracking and tracing) to guarantee the continuation of vital services and match the challenges caused by COVID-19. In addition, more than 300 employees from the city's other divisions (Education Division, Recreation Division and central administration) were transferred between March and July to the Welfare Division and COVID-19-related work. Those moved to the Welfare Division included, in particular, practical nurses from the Education Division with the qualifications required in the social and health care sector, such as to provide home care to older people. Further, personnel were reallocated to assisting roles, such as to 24-hour care units for older people (laundry and meal services), the hospital pharmacy (hand sanitizer bottling), health stations (guidance and advice for clients), children's homes (teaching assistants) and services organized by Kompassi: contacting older people and assisting them with accessing services and delivering food waste parcels to disadvantaged people.

New forms of collaboration within the City organization were created at the operational level. The divisions were able to provide services despite the changed conditions, and the city's central administration supported the divisions at the operative level as well, when required. The city was able to avoid furloughing staff members and used its resources to help the social and health care services cope with the first COVID-19 wave in the spring. The reallocation of personnel was viewed positively, and the personnel came to understand and value the work of the social and health care services more. Summer workers and permanent employees were also hired from the other divisions to care for older people, and the pressure felt by the social and

health care personnel was successfully reduced through additional resources. These experiences will be used during normal times as well. One critical factor in the success was that the organization shouldered its responsibilities even in the unfamiliar circumstances. The management trusted its employees, and the employees were willing to be flexible about their roles.

The city organization and decision-making system displayed the ability to adjust under the unprecedented conditions. As the pandemic continues, we will be continually assessing which operating models and forms of collaboration will remain in use.

### **Abstract: NOR-Bodo-001**

*Bodø, Norway: Remote monitoring of people with COVID-19*

Vibeke Tellmann, **Francis Odeh**, Marius Rekkedal Edvartsen  
*Municipality of Bodo, Norway*

The COVID-19 pandemic has not affected the population of Bodø (population 55 000) that severely. Currently, there are few confirmed cases (0.2% incidence) and no fatalities. However, the health and social services were not adequately prepared to tackle the challenges of the pandemic while continuing to provide regular services. It was necessary to rethink how services were provided and find innovative new solutions to maximize the efficiency of the limited resources available.

Shortage of health-care providers, limited access to personal protective equipment and limited bed capacity at the municipal institutions were three crucial issues that needed to be addressed urgently. Remote monitoring was determined to be a viable solution to address these concerns. Two groups of people with COVID-19 were best suited for remote monitoring: those placed in isolation in their own homes and those admitted to the isolation ward at the community hospital. Their eligibility was based on their clinical condition and potential risk for rapid deterioration. Eleven people were recruited. They were given the necessary equipment and instructions on how to measure their own vital signs. They reported values via a smartphone or tablet application for daily assessment. All had 24-hour direct access to a health-care provider.

Decreasing the frequency of direct contact with people with COVID-19 reduced the exposure risk of infection. This lowered the daily amount of personal protective equipment used and had an indirect cost-effective benefit. Monitoring people at home relieved the burden on hospital and institution beds and hence made them available for critically ill people.

No adverse effects were reported and no major issues regarding compliance were noted. All reported a better sense of health awareness and independence. None had concerns regarding security and safety but were comforted by the knowledge that their vital signs were being monitored and that they had direct access to a health-care provider at all times during the observation period. Further, they reported a higher level of satisfaction in the health services provided by the municipality.

Remote monitoring can be a reliable, feasible and cost-effective tool.

### Abstract: RUS-St Petersburg-003

*St Petersburg, Russian Federation: St Petersburg ambulance services as a key element of the city preparedness for disasters and emergencies*

Aleksei Boikov, **Andrey Kremkov**

*St Petersburg City Ambulance Station, St Petersburg, Russian Federation*

The St Petersburg health-care system has a complex organizational structure and needs a unified approach to manage the resources available to eliminate the consequences of disasters and emergencies.

The 120-year-long history of the evolution of the ambulance services and experience in mass-casualty incidents formed the system, which is capable of efficiently shifting from everyday operations to emergency mode.

We describe two levels of the organization of the ambulance services: the city level and the district level.

The St Petersburg City Ambulance Station performs important functions at the city level as pre-hospital emergency response organizer: the unified call and dispatch centre for the ambulance services; distributing emergency patients to the hospitals; managing mass-casualty incidents; and gathering and analysing statistical data. About 200 ambulance teams provide emergency care in all types of accidents with victims (road traffic, industrial etc.) and all medical incidents in public places and workplaces. The district level consists of the multiple ambulance departments of local ambulatory care centres. Their medical teams (about 300 units in total) provide care at the patients' residence in case of acute illness and exacerbation of chronic diseases.

The St Petersburg ambulance services performed well during mass-casualty emergencies such as the subway terrorist attack in 2017. The St Petersburg ambulance station also has extensive experience in organizing health care during international sports, political and culture events (FIFA World Cup 2018, St Petersburg international economic forum and G20 and G8 summits). The existing structure of emergency medical services has a sufficient safety margin to stand the challenges of the novel COVID-19 pandemic and sustain the accessibility of emergency care. St Petersburg ambulance services have sufficient resources and adaptive management to provide prompt access to emergency care in various kinds of disasters and emergencies.

G4 Learning through practice: reaching out in times of pandemic

### Abstract: DEN-multiple-001

*Multiple cities, Denmark: Using a resident-to-resident information and communication technology platform, Boblberg, for local community care in municipalities in Denmark*

**Rasmus Stæhr**<sup>1</sup>, Rie Toft<sup>2</sup>, Mikkel Bernt Nielsen<sup>3</sup>, Malene Lund Grindsted<sup>4</sup>

<sup>1</sup>Boblberg, Hvidovre, Denmark; <sup>2</sup>Municipality of Frederiksberg, Denmark; <sup>3</sup>Municipality of Copenhagen, Denmark; <sup>4</sup>Municipality of Fredericia, Denmark

The number of people with poor mental health has increased by 32% in Denmark in just seven years: from 10% in 2010 to 13.2% in 2017 according to the national health profile. Further, an estimated half of all people in OECD countries will develop a mental disorder during their lifetime. During the COVID-19 pandemic, the need for communities and contact with fellow

residents led to an increase in the numbers of postings at Boblberg. Most of the posts concerned words such as: friendships, loneliness and walks “with social distance”.

According to the Australian method ABC (act, belong, commit), being active, having a sense of belonging and having a purpose in life all contribute to happiness and good mental health. One way to do this is by helping residents get in touch with each other. Boblberg is a private company that cooperates with Denmark’s municipalities and civil society organizations to create meaningful communities for the residents. The contact is initiated online, but the online contact often results in, for instance, a walk in the park. Since the outbreak of the COVID-19 pandemic, more than 10 new municipalities have signed up with Boblberg. Today Boblberg is collaborating with more than 40 municipalities, and the platform now covers more than 320 000 residents.

During the COVID-19 outbreak, many residents felt lonely because of the isolation, and the traffic at the resident-to-resident platform increased by more than 150% in Horsens, Fredericia, Copenhagen and Frederiksberg. To address this challenge, Boblberg reached out to the residents and created a digital visitor service in collaboration with the Danish Red Cross. The digital visitor service provides a platform for digital communication between a resident and a volunteer at the Danish Red Cross. The digital visitor service has created more than 2500 chats and it is still being used actively.

The platform, Boblberg, was found to support its users in fulfilling their needs for belongingness by expanding their access to social networks; supporting them in overcoming barriers related to reaching out to new people in real life; providing them with an improved starting-point for identifying a relational match; and supporting them in (re)gaining confidence in their social attractiveness. Further, the digital visitor service has proven to be a great success for the residents who feel isolated and lonely.

Boblberg, a resident-to-resident information and communication technology platform, can serve as a helpful tool in interventions specifically designed to promote mental health in communities since they may support people in fulfilling their needs for belongingness.

#### **Abstract: POR-Matosinhos-001**

*Matosinhos, Portugal: Reaching out during a pandemic: physically distant but not isolated – good practices from the Isolation Support Helpline*

Catarina Pires<sup>1</sup>, **Ana Rodrigues**<sup>2</sup>

<sup>1</sup>Health and Social Promotion Division, Municipality of Matosinhos, Portugal; <sup>2</sup>Adeima, Matosinhos, Portugal

The national strategy to prevent the transmission of COVID-19, based on physical distancing by confining people and shutting down various activities, placed the most socioeconomically vulnerable people at greater risk due to isolation and greater difficulty in accessing services and in activating social support networks. Understanding the inherent risks, the Municipality of Matosinhos selected and formed a team of psychologists to provide telephone support to the community. The Isolation Support Helpline contemplated different aspects, having continually adjusted itself to the identified needs. Informative: to give clear, correct and objective information, based on credible sources, with the goal of normalizing and validating feelings; promoting socioemotional adaptation and the adoption of responsible and conscious behaviour. Psychological counselling: to facilitate emotional expression; identify problems, alternatives and strategies for solving them by mobilizing internal and external resources to facilitate adaptive processes, to structure and organize in times of crisis and to promote mental resilience and combat social and emotional isolation. Referral: to explore the various alternatives to

respond to the situation presented and refer to specific or specialized services. Psychological intervention and ageing support response: systematic psychotherapy and counselling using online platforms and/or telephone. We were able to rapidly extend the same service to the deaf community by using a sign language interpreter and video calls. In addition, a protocol with the Portuguese League Against Cancer was made to articulate specific responses for people with cancer, not only for the pandemic period but permanently. The Isolation Support Helpline operated on these terms between 13 March and 30 June 2020, responding to 2528 telephone contacts, comprising 455 families and serving 83 people in systematic psychological intervention, who were referred to psychological community services as they reopened and according to people's needs. At this time, the Isolation Support Helpline is maintained as a social response, through community partner referrals and through the ageing support response, to which older people who need continued assistance were directed. Quality control strategies were implemented to monitor the quality of the intervention.

### **Abstract: UNK-Belfast-007**

*Belfast, Northern Ireland, United Kingdom: Roma Helpline*

Nicola Lane<sup>1</sup>, Briega Arthurs<sup>2</sup>, **Leish Dolan**<sup>1</sup>

<sup>1</sup>*Belfast City Council, Northern Ireland, United Kingdom;* <sup>2</sup>*Forward South Partnership, Belfast, Northern Ireland, United Kingdom*

The COVID-19 crisis and response measures had the potential to disproportionately affect marginalized communities, particularly those experiencing additional barriers to compliance with emerging public health messaging and government guidance due to, for example, non-English-speaking communities. Taking a partnership approach across sectors was essential, with partners to this service including Belfast City Council, Forward South Partnership and Belfast Health and Social Care Trust.

The Romanian Roma community was identified as a vulnerable group, with an estimate of 2000 Romani people living in Belfast. This community has very specific language and cultural needs, with many not able to communicate proficiently in English and most being illiterate in Romanian. These challenges also create difficulty for members to access accurate public health advice and information about keeping themselves safe and well during the initial COVID-19 emergency and beyond.

There was a need to provide an advice and advocate resource that could develop trust and relationships with the community and that could communicate relevant information and advice. Providing such a resource would also improve understanding of the needs of the Romanian Roma community and support the improvement of good relations. The Roma Helpline provided an outreach bilingual support line for the community to access support services such as emergency food deliveries, advice on housing, benefits, employment and travel and public health information.

The Roma Helpline initially supported 582 people between April and June. Although it supported mainly the Romanian Roma and Romanian communities, other minority communities also benefitted from the service. The high volume of callers demonstrated the improving relationships and trust with members of these communities. The needs identified and supported through the service included advice on the European Union settlement scheme (24%), food (23%) and benefit advice (17%).

The Roma Helpline has provided a responsive service, delivering trusted health messages during an emergency situation, improving connectivity to and within vulnerable communities,

enhancing partnership working and understanding of needs while providing valuable learning for the planning of future good relations.