



Hrvatska mreža "Zdravih gradova"

Croatian Healthy Cities Network

Zagreb, 31 December 2012

Report on the Activities of the Croatian Healthy Cities Network for the year 2012

The most important achievement in 2012 was successful implementation of the agreed strategic network activities. Your Presiding Committee promised that it would 'upgrade Network activities to a higher level of excellence'; the following report is therefore the evidence to our commitment to that goal. Strengthening joint research activities of our members we have been working on introducing notions of academic public health to daily practice of local self-government. Representatives of cities and counties active in the Presiding Committee of the Croatian Healthy Cities Network have begun to take over more important and comprehensive obligations in carrying out regular Network activities, which leads to strengthening Network activities and the Network itself. Joined themed workshops resulted in designing and implementing efficient interventions aimed at improving community health. Professional cooperation with national and international partners resulted in the Network gaining the position of essential factor in the design of national and international strategies and plans. According to my estimate, the above activities have been carried out very successfully.

1. National Level

a) The Activities of the Network and its Support Centre

There haven't been major changes in the activities of the Network Support Centre in 2012. The facilities have remained the same ('Andrija Štampar' School of Public Health, Zagreb Medical School), and so have the cooperators – administrative secretary, journalist, translator, auxiliary workers, consultants, book-keeping service, and web masters.

In 2012, ***two Reporting Assemblies of the Croatian Healthy Cities Network*** were held. One was held in Zagreb, February 16, and another in Tuheljske Toplice, during the Network business meeting, October 27.

b) Regular annual Network activities bring together and connect cities and counties which are Network members, facilitate sharing of experiences, knowledge, ideas and activities, enhance cooperation and enable education and the giving (and the taking) of practical help and support to carry out activities on the local level.

Various regular Network activities have been carried out in 2012: there was 16th Health Fair in Vinkovci in April; the Healthy Cities Day was celebrated on May 20; courses of the 19th Motovun Summer School of Health Improvement were held (June-July – Grožnjan, Motovun, Labin, Poreč), and the 17th Network Business Meeting organised in Tuheljske Toplice in October.

The 16th Health Fair was held in Vinkovci, April 20-22, on the premises of 'Lenije' Sports and Recreation Centre and the Faculty of Agriculture, once again under the auspices of the Ministry of Health and Social Welfare of the Republic of Croatia. The Fair was organised by the City of Vinkovci, Vukovar-Srijem County and the Croatian Healthy Cities Network; this year's partners were two hotels in Vukovar, the Slavonija and the Gem. The Fair was traditionally organised in two parts – the one, comprising the fair segment, and the other, educational segment. In the fair part, which proved to be the most interesting for visitors, over 200 exhibitors were presented. In the educational part, three forums, the first Vinkovci Days of Psychiatry were held, as well as a symposium on palliative care, professional training for nurses, physiotherapists, forestry engineers, engineers of other professions, etc. There were also forums and round tables for parents, children, teachers, and around twenty workshops. Furthermore, there was a number of dancing, sporting, culinary, scientific and other manifestations. The 16th Health Fair was very well coordinated and led by our 'first urban planner lady' Mandica Sanković M.S., and attracted a large number of visitors.

May 20, **the Healthy Cities Day**, was celebrated for the 10th time through various activities: promotion in the media, press conferences, cultural activities, music, theatre, or art workshops, blood pressure measurement and blood and sugar taking for public, themed meetings of the Youth City Councils and reception at the Mayor's office for outstanding volunteers.

As part of **the 19th Motovun Summer School of Health Improvement**, which took place from 26 June to 7 July in Grožnjan, Motovun, Poreč, and Labin, 5 workshops and courses were held for over 250 participants from Croatia, Bosnia and Herzegovina, Serbia, Norway, and Italy.

The first course of the 19th Motovun School of Health Improvement was entitled '**Health System and Health Policy**'. The topics which dominated the workshop were 'What is hidden in Croatian health?', and are related to the reality of the 21st century – informatisation, and the problems of managing the health system. This year's workshop was organised as a partnership project, which include Croatian Public Health Association, Croatian Association for Health Care Improvement, Motovun Summer School of Health Improvement, Croatian Medical Chamber (through regular activities of the Committee for Other Medical Activities), the Istria County and PIN for Health. From June 26 to 28, a series of professional workshops were held addressing management, data, and informatisation of Croatian health. There were over 90 participants, representatives of health providers, employers, local and state government, health chambers, business sector in health, and patients' associations. Recent events in health were discussed, as well as informatisation, which is being carried out as key activity introducing changes. There was a special part of the program, which introduced the strategy of health informatisation in Croatia. The workshop participants were, among others, Vice Minister of Health, Marijan Cesarik M.Sc., Director of the Croatian Health Insurance

Institute, Siniša Varga, Prim.Dr., Chair of the Committee for Other Medical Activities within the Croatian Medical Chamber, Katarina Sekelj Kauzlarić, Prim.Dr., and Head of the Health Department of the Istria County, Sonja Grozić Živolić, prof. This year, the course was again organised and coordinated by Aleksandar Džakula, D.Sc.

The Second course of the 19th Motovun Summer School of Health Improvement was held in Grožnjan, June 27-29. It was a **Media and Health** course entitled 'National Strategy of Health 2012-2020'. The course was organised by 'Andrija Štampar' School of Public Health of Zagreb Medical School, the Croatian Healthy Cities Network, and Croatian Journalists' Association – department of journalists covering medicine and health care. It was led by Mario Harapin M.D., from Croatian Radio, D.Sc. Ognjen Brborović M.D., and Tea Vukušić-Rukavina M.D. from 'Andrija Štampar' School of Public Health. The main topic of the course, which gathered 190 participants, was national health strategy 2012-2020, which was prepared in full by the Ministry of Health and cooperating institutions, and to which the first day of the course was dedicated. The Minister of Health, prof. Rajko Ostojić D.Sc. and other Ministry officials presented the draft of the national health strategy for the first time. The presentation was followed by discussion (during the round table) with representatives of all relevant health institutes (Croatian Health Insurance Institute, Croatian medical Chamber, Croatian Medical Union, Croatian Medical Association, Medical School of Zagreb University, etc.). The Minister of Science, Education and Sport, Željko Jovanović D.Sc. opened the second course day, giving the presentation on the need to introduce health education into primary education; furthermore, during the break the participants could try unique, healthy meals from Koprivnica primary schools. What followed were two workshops; one on communication for health practitioners, and another on reporting on mental illnesses for journalists. At the end of the course, an innovative exercise of cooperation and team work was held, which underlined the need for communication and understanding.

The Healthy City of Poreč, in cooperation with the Healthy City of Vinkovci and the Croatian Healthy Cities Network, organised a seminar addressing **healthy urban planning**. During the two days, June 28 and 29, various representatives and professionals gathered in Poreč: representatives of Croatian healthy cities, representatives of public utilities and urban planning from Istrian cities, representatives of Istria County, technical engineers of Istria County (whose obligation is to attend professional training), and representatives of associations of the disabled from Vinkovci and Poreč, as well as Association of Municipalities and Cities of Serbia. This year's topic was accessibility of urban spaces and ensuring basic right to movement to all citizens. Mrs. Sanković coordinated a very interesting round table entitled 'How to gain optimum accessibility?'. The participants of the round table were engineers, investors, representatives of Istrian cities and representatives of associations of the disabled from Poreč and Vinkovci. In the discussion, there were many examples of inaccessibility from daily life the participants were faced with in their roles of professionals, representatives of relevant city departments, or as disabled people. The key issue raised was the following: Why don't professionals, especially urban planners and designers, implement the existing, well-written Croatian regulations contributing to accessibility? The problem is seen as a vicious circle: disabled people rarely go out and find it hard to socialise with their fellow citizens because of poor accessibility to the parts of the town they live in, which in its turn results in the fact that neither the experts nor other citizens are aware of how large a group they are, or what problems they are facing. It was also stated that this kind of training, in which urban planners meet with representatives of disabled people contribute to raising

awareness and unconditional respecting of the rules of profession. In the end, Mrs. Sanković stressed the enormous responsibility that lies on technical engineers as profession, and said: “Investors can afford to be an ignorant party, and can ask us to do the undoable! At the same time, investors have enormous trust in us, they give us money to design in accordance with the rules of profession. We are the ones who know, we have been taught on the principles of designing, and respecting accessibility in building and public spaces. All we have to do is implement our knowledge, as well as moral and ethical principles of our profession, because the quality of many lives depends on us, and so does the health of many.”

The healthy city of Poreč organised for the second time in a row the course entitled **Children's Film and Video Making in Function of Public Health**. This year's course lasted from July 1-5, with closing presentation of children's film and video making on the last day of the course. The guiding idea of the program segment of the Summer School of Health is to provide children opportunity to express themselves through short and impressive film making dealing with psychosocial and preventive topics, and sending strong messages, to young people primarily, but also to adults, on the meaning of healthy life choices. Children from across Croatia and Poreč participated in the course, with support of the Croatian Film Association, the City of Poreč, Istria County, and under the auspices of the Croatian Healthy Cities Network. For five days, professional leaders-volunteers worked with children, among whom cameramen, journalists, and teachers for all over Croatia, and were all coordinated by the project leader and originator, Mr. Duško Popović, who is a long-standing journalist of the Croatian healthy Cities Network. On July 5, impressive films were shown at ***closing presentation***: there were earlier works of children's film festivals on topics designed by children from Zadar, Zaprrešić, Šibenik, Šenkovec, Fužine, Virje, and Zagreb, which served to send a message to their peers and adults on preventing peer violence, the importance of accepting the children with special needs by healthy children, the warmth and the beauty of accepting the elderly and the unable by children and young people in their own community, the difficulties of children separated from their families and life in children's homes, and other important topics which elevate children's growth and development, influence the formation of their attitudes and strengthen sensibility to help members of their community.

The last of this year's courses was jubilant **15th School of Democracy**. It was traditionally held in 'Mate Blažina' Secondary School in Labin, from July 5 to 7, and led by Mr. Čedomir Ružić, prof., and Mr. Egil Ovind Ovesen, under the auspices of the Croatian Healthy Cities Network, Istria County, and the City of Labin. Two workshops were held: the first, was a planned 'local self-government' game led by the trainer of the Friedrich Ebert Foundation from Zagreb, where the participants simulated a session of the city council of an imaginary city of Radograd, and played the role of city representatives, thus simulating the process of decision making on the level of their local community; and the second, addressing volunteering, entitled 'Advantages and Opportunities of International Volunteering', led by an AIESEC representative – Rijeka, and a representative of Alfa Albona, youth association from Labin. Participants of the course were around 70 students from Pula, Rijeka, Čakovec, Slatina, Labin, Sandnes, and Padua, with their leaders and mentors. During the course, the students presented a number of good practice examples from their communities in Croatia, Norway, and Italy, such as activities at school (students' councils), in the cities (city youth councils, youth assemblies), or in the counties (county youth councils). With mutual help and the help provided by future partners, these projects will be elevated to European level through the Youth Democracy Project and E-Democracy Campus.

The 17th Business Meeting of the Croatian Healthy Cities Network was held in Tuheljske Toplice, October 25 to 27. The central topic of the meeting was **cooperation**. Presentations of national and European strategy of health (and health care) development served as an introduction to a workshop the goal of which was to define mechanisms of cooperation (vertically and horizontally), which could enable implementation of the above strategies. Furthermore, great models of good practice were presented by the hosts, Krapina-Zagorje County, related to their selected public health priorities, such as Youth Centre, program of prevention of youth addiction, prevention of obesity in children, community nursing in Krapina-Zagorje County, control of health safety of drinking water, non-institutional care for the elderly, unable, and mentally-ill (Lobor-town) and others. A field visit to a newly-built General Hospital of Zabok was memorable, and so was a visit to Krapina Neanderthal Museum. Also, as part of the business meeting, the Network Reporting Assembly was held, and there was a themed meeting of cities and counties entitled 'Investment in early development – importance of pre-school education'.

In 2012, no new issues of *the Epoch of Health* were published, but **password-protected Network web page was put in place for member cities/counties**. The protected part of the web has three-level users: presiding committee, and counties and cities which were given passwords to gain access.

c) Program Partnership

After ten years of implementation, a time has come to wind up and close the 'Management and Administration for Health (healthy counties)' program. Five to nine years have passed since the design of the first county health profiles and strategic frameworks of county health plans adopted by county assemblies, and a time has come to close the circle – evaluate what has been implemented locally, design new health profiles, participative selection of new county priorities, and the design of new health plans, with the assistance of new legislative framework, and new forces of the Council for Health. The skills which the health teams were trained in through two education module sets (300 hours of training in total) should help county teams to demonstrate that planning for health has become a routine, and that they are capable of implementing the activities independently, without the support of mentors from academic community. The mentors' obligation is to carry out evaluation on the national level. The 'Management and Administration for Health (healthy counties)' program started in spring 2002 as a partnership project of the Ministry of Health, Ministry of Labour and Social Welfare, counties, and 'Andrija Štampar' School of Public Health of Zagreb Medical School. Its aim was to assist bodies of local government and self-government in the process of health and social welfare decentralisation. The evaluation will help us establish how successful we were. In order to sum up program achievements, measuring instruments were developed, and two circles of evaluation carried out - individual and team. Team evaluation was carried out through four regional single-day evaluation workshops. The workshop for five county health teams from Slavonija (Vukovar-Srijem, Osijek-Baranja, Brod-Posavina, Požega-Slvonija, Virovitica-Podravina) was held in Vinkovci, November 5, 2012. Evaluation workshop for Dalmatia health teams (Dubrovnik-Neretva, Split-Dalmatia, Šibenik-Knin, Zadar) was held in Biograd, on November 15, 2012; furthermore, the workshop for county health teams from Western Croatia (Istria, Primorje-Gorani, Lika-Senj) was held in Opatija, on November 22 2012. Final evaluation workshop for county health teams from Northern and Central Croatia

(Međimurje, Varaždin, Krapina-Zagorje, Bjelovar-Bilogora, Koprivnica-Križevci, Karlovac, Sisak-Moslavina, Zagreb) was held in Zagreb, at 'Andrija Štampar' School of Public Health, on November 2012. Out of the twenty counties which were invited, thirteen joined the evaluation process. Results are being processed and will be available at the end of April, so that the evaluation conference can be held before or during Motovun Summer School. At the conference it will be decided if evaluation will formally close the program. However, even if it should be so, gathering of counties within the Healthy Cities Network will continue related to the topics of mutual interest.

Four joint workshops were held within the Healthy Counties Program: on April 3 in Zagreb, during the Week of Prevention, entitled 'Managing Preventing Activities'; in April in Vinkovci, during the Health Fair (palliative care), in June at the Medical Ethics Centre, Zagreb Medical School, as counselling provided to counties on the topic 'What kind of palliative care do we need in Croatia'; and in October, during the business meeting (evaluation of achievements of the Healthy Counties program).

Individual visits and mentoring were organised with the counties in program partnership: Istria, Primorje-Gorani, and the City of Zagreb. **Final examination** for county teams which finished 2nd set module education was held in Zagreb, at 'Andrija Štampar' School of Public Health on May 3.

d) Other Network Activities

The central topic of activities undertaken by Croatian healthy cities in 2012 was **strengthening social networks and social support**, and promotion of volunteering (emphasizing family and health). The most important activity was thus the carrying out of **action research 'Needs assessment of single-parent families in Croatian healthy cities'**. Two reasons guided the onset of this research. The first is opening possibility to for designing and implementing concretely and locally the programs to address the needs and improve quality of life of parents and children from single-parent families. The other is strengthening local self-government capacity (the form of training) through joint carrying out of action research based on the learning by doing model.

In 2011, four introductory themed meetings/workshops were held: Vinkovci (April), Zagreb (May), Motovun (July), Rab (October); furthermore, the project applied for funding by Croatian Scientific Foundation and European Committee FP7. The 2011 research results provided insight into present status through reports by participating cities (description of present situation and trends, existing programs aimed at single-parent families), and review of published researches and interventions (reference search in Croatia and worldwide).

Although funding had not been granted, we still continued activities in 2012. The first meeting of research group was held within the Healthy Cities and Counties Forum in Vinkovci, April 20. Academic notions on the importance of early development and possibilities of intervention were presented, as well as systematic overview of scientific research published in Croatia and worldwide related to needs of single-parent families. Introductory workshop for members of research teams was held at the beginning of May in Zagreb, at 'Andrija Štampar' School of Public Health. Workshop participants were representatives of Dubrovnik, Poreč, Rijeka, Labin, and Zagreb. The aim was to answer how

the field part of the research should be carried out in our cities. Because of the costs of travelling, it had been agreed that city research coordinators and only a few members of local research teams should attend meetings. They are then to deliver information to wider city research team, which should include representatives of the following institutions: city departments (health, social welfare, education), family centre and social welfare centre, health centre (community nurses, paediatricians, family medicine specialists), public health institute (school medicine specialists, psychologists, social pedagogues) and interested non-governmental associations. Through work in small groups, we got answers to three key issues related to sample stratification, ways of finding target respondents and the content (questions) of interview. We agreed on the following research goals: to find out reality of problems single-parent families are facing, to establish what causes their problems and select possible interventions to introduce change and enable solving problems of single-parent families in target communities. The research will use standardised interviews. All the questions asked in the interview are the same with all interviewers, they are asked in the same orders, and conform to research goals. We will use the strategy of deliberate sampling of information-rich respondents, with the only limit being the age of a child (under 7), and the age of a mother/father (under 35). The ways of finding target respondents requires cooperation of health system (with help from paediatricians, community nurses), kindergartens, and centres for social welfare (the process of conciliation preceding divorce). The basis for interview will be several groups of questions relating to parent characteristics, support they get in child care, health and quality of life, spending time with children and needs. The method of gathering information is guided interview which will be recorded and copied for analysis, and it will be carried out by trained community nurses (in their respective areas of work).

The following training workshop for interviewers entitled 'Standardised Interviews' took place on December 3 and 4 at 'Andrija Štampar' School of Public Health in Zagreb. Local research teams should have been formed by the time workshop took place. In summer, the research applied to Ethical Committee for approval, which it was granted by autumn. Also, informed consent forms were adopted, which are to be signed by research participants. Questions for standardised interview were agreed in this workshop, and so was the order in which they will be asked. The categories agreed among researchers are the following: social status (questions on income, housing, and illnesses), quality of life (questions on diet, and spending free time), help with care and upbringing (questions on the other parent, family relations, using health services and services of local self-government), programs of social and psychological-pedagogical support for improving quality of life, maturity and level of information parents have on their rights, existence of violence (psychical and physical), social stigmatisation. Interviewers were instructed to strictly stick to the questions, whereas they were given some freedom in asking additional questions. They were also advised to work in interviewing pairs, so that there would be one interviewer and one observer. At the end of the workshop, it has been agreed how field part of the research should be carried out. All respondents should be asked written consent – initials would suffice (in order to remain anonymous), both for interview and its recording. Respondents will be given a code (to protect personal data), and after transcription, sound recording will be deleted. Interviews should be carried out by the end of February 2013; we should have first results by the end of May, when the following workshop will be held to discuss results and look at possible interventions. Joint interventions are then expected to start by the end of autumn.

In accordance with the adopted Program of Activities of the Presiding Committee,

representatives of the cities and counties which constitute the Committee have begun to take over more important, larger obligations in carrying out regular Network activities. Vinkovci is completely independent in organisation of Health Fair, and so are Istria County, Poreč and Labin in organising Motovun Summer School; furthermore, Vinkovci and Poreč lead themed group Healthy Urban Planning (training for urban planners and other engineering professions participating in urban space design). By translating key documents of EU WHO created in the process of the Health 2020 design and devising (evidence-based) guidelines, representatives of Vinkovci and Poreč will prepare materials which could be used by urban planners of all other Croatian cities. In accordance to the planned *decentralisation*, the support centre will continue to keep its coordination role to some extent (especially related to horizontal and vertical networking), but will largely reduce its executive role.

Cooperation with Association of Cities and Association of Counties continued, and cooperation with the Croatian Public Health Institute was intensified. *Cooperation with bodies of government administration* continued, especially with the Ministry of Health, through auspices of the 16th Health Fair and the 19th Motovun Summer School, and through financial support (amounting to kn 50,000.000) for the needs of themed gathering of Network Counties. Network members participated in the design of national strategies: 'National Strategy of Health Development 2012-2020' and 'Strategic Plan of Public Health Development 2012-2015'. In spring 2012, Selma was nominated by Minister Ostojić, and took the position of national health coordinator in Southern and Eastern Europe Health Network, which gathers high (ministerial) level of decision makers of ten countries in the region (Bosnia and Herzegovina, Serbia, Montenegro, Kosovo, Albania, Bulgaria, Romania, Moldova, Israel). This opens a whole new dimension of cooperation with neighbouring countries related to (our possibilities of) providing support to our neighbours to develop Healthy Cities project and carry out accreditation process. In mid December, in the meeting of Public Health Association, Medical Chamber of Croatia, Aco was elected president.

New members. In 2011, no new members joined the Network.

2. Local Level

In Zagreb, a series of workshops was held with a wider project team, the aim of which was to train the team for implementation of Health Plan for the 5th phase of the European Healthy City project. In 4 half-day workshops, the following topics were addressed: 1) change management (cycle of change, seven steps in the process of change planning), 2) creating alliances (networking and connecting skills, managing networks and inter-organizational relations), 3) leading the process of change (recognising and overcoming resistance and obstacles, solving problems, predicting outcomes, communication and motivation), and 4) mapping the way out (panning and carrying out change, establishing ways to monitor improvements, implementation control, monitoring and evaluation of results). Through 'homework' (work in themed groups between educational workshops), the wider team of the Zagreb-healthy city project designed an inventory of available resources in implementation of Health Plan, Plan for Partnership Development, Plan of Institutionalised change (how to 'fixate' change?), and Plan for Implementation of Health Plan.

Locally, the World Health Day dedicated to the elderly was celebrated especially well in the cities. Health team of Istria County carried out independent evaluation, and chose new health priorities for their county at a consensus conference.

3. International Level

Through activities of the Croatian Healthy Cities Network (visits, participation in meetings and conferences), excellent ***cooperation continued with both European Office of the World Health Organisation*** and other national healthy cities networks, especially from Israel and Norway.

From March 21 to 23, Croatian Healthy Cities Network ***hosted fourth education and coordination meeting of politicians and coordinators of European national healthy cities networks*** in Dubrovnik (Babin Kuk, the La Croma Hotel). In the meeting there were around thirty representatives of fourteen national healthy cities networks (Israel, Turkey, Greece, Bosnia and Herzegovina, Croatia, Italy, France, Great Britain, Germany, Czech Republic, Denmark, Norway, Sweden, Finland, and Baltic Healthy Cities Centre). Workshops designed to enable the sharing of experiences were very interesting and dynamic, presenting examples of developing partnership for health from Israel, Greece, Norway, Turkey, Sweden, Italy, Finland, Czech Republic, and the City of Zagreb. Workshops aimed at gaining new knowledge were also excellent: a) developing e-module for distance learning for healthy cities by prof. Evelynne de Leeuw, and b) implementing research results of the 'early childhood and education' group, gained during the design of Health Strategy 2020 EU Who by prof. Edward Melhuish. All presentations, along with the report from the Dubrovnik meeting, can be accessed at the password-protected part of the Network web pages. Although it wasn't common in our meetings so far, we allowed participants of the 'domestic' Healthy Cities Network to participate, so that half of the participants were from Croatia (the cities of Dubrovnik, Poreč, and Zagreb, and the counties of Istria, Promorje-Gorani, Zagreb, and Support Centre). Apart from participating in the 'European' part of the programme, on Friday, March 23, we held two separate meetings. One was with Mrs. Dalić from the Ministry of Labour and Pension System, who provided us with vital information on the plans the Ministry has related to encouraging employment of hard-to-employ individuals, and planning resources for local labour market. The other meeting had to do with carrying out Network activities: Health Fair in Vinkovci, 19th Motovun Summer School of Health Improvement and Business Meeting.

From June 14 to 16, the annual business and technical ***conference of the European Healthy Cities Network*** and the Network of National Healthy Cities of the European Office of the WHO was held in St. Petersburg, Russian Federation. The central topic of the conference was 'Health and well-being: from early childhood to healthy ageing'. From the opening ceremony at the famous Mariinski Palace, to beautiful field visits to Petersburg sights, to closing dinner at the Neva Prospectus, within former horse stables of the Romanovs, everything bore the stamp of tsar Russia nostalgia. Life of the citizens in Petersburg looks much humble than the beautiful 'curtains' of the old town. Shops are full of everything, which wasn't always the case; however, prices are high, and income low. The conference schedule was the same as in previous years – morning plenaries and round tables, followed by work in parallel themed groups (healthy urban planning, diet and physical activity, investment in early development, active ageing, health-promoting environment, building community resistance and other). There were around 400 conference participants, healthy cities and national networks coordinators and politicians, representatives of the World Health Organisation, eminent

lecturers and experts from universities throughout Europe, 100 of whom were from Russia (which is important for promoting healthy cities movement in the country). All participants are aware of economic crisis in the majority of European countries; however, regardless of that (or better still, because of that) they remain dedicated to designing programs for disease prevention and health conservation on national and local levels, leading to more well-being for citizens of all countries in the region. In order to achieve the goals of the Health 2020 Strategy, a good managerial mechanism is needed, which will be able to start changes for the better. The conclusion of the conference could be summed up as follows: what is the difference between 'a healthy city' and 'a city'? A healthy city thinks differently. It considers what it can do better for every citizen, how to implement programs to improve quality of life, how to invest in health and improve preconditions for health. Benefits of investment in health can be calculated, and it was at this very conference that the cities throughout Europe presented results of investment in health. Proposal was made for the following regular business and technical conference to be held in Izmir, Turkey, whereas Vienna and Brussels were proposed as hosts of the closing conference for the 5th phase in 2014.

Cooperation within the **South-eastern Europe Health Network (SEEHN)** opens up new possibilities of networking Croatian Healthy Cities Network with the countries in the region (Bosnia and Herzegovina, Montenegro, Macedonia, Kosovo, Albania, Bulgaria, Romania, Moldova, Israel). Although this initiative brings together primarily the high (ministerial) decision making level of the 10 countries in the region, it also provides possibilities for sharing experiences and enables easier joint applying for funding; furthermore it creates possibilities for partnership networking with important EU associations and institutions (for example, network of health-promoting hospitals, EuroHealthNet with long-standing lobbying experience, IOM, Hope, etc.). Each country in the region is responsible for activities of (its themed) regional health development centre (Croatia is responsible for transplantation) and its work is of vital importance in knowledge dissemination (for example, Bosnia and Herzegovina – mental health, Albania – contagious diseases, Serbia – quality and accreditation in health, Moldova – human resources in health, Macedonia – strengthening public health system, etc.). Three meetings were held in 2012 (in Brussels, Zagreb and Tel Aviv), and addressed structural preconditions for Network activities from 2012 to 2015: by appointing new members of Executive Committee, founding Network Secretariat in Skopje, strengthening the role of development centres, defining cooperation with partners – international networks and organisations, as well as agreeing on SEEHN activities in 2013, during Moldova and Montenegro presidency.

Cooperation with the Centre for Disease Control and Prevention, SMDP Programme, Global Health Department (Atlanta, USA) has been going on since 2001. Since 2002, the very beginning of the Healthy Counties Project, CDC has been partner institution in program implementation.

To celebrate the 20th anniversary of the SMDP Programme, Global Health Department, Centre for Disease Control and Prevention, Atlanta USA, our **'Management and Administration for Health' (Healthy Counties)** program was awarded 'The Global Health Program of Distinction Award' on January 13, 2013.

The program implementation has been supported by several ministries in the past twelve years, as well as local county government level. The program is a model of good practice – cooperation of academic community, local and national government. It is an example of how academic notions can be applied to daily life, and implement into government and

administration for health on local and national level. In 2006, the program had already been awarded the award for excellence by the Global Health Department, Centre for Disease Control and Prevention, Atlanta USA. However, the present award overcomes all previously received ones (for successful county project and project in total) because it is based on judgement of the Global Health Department and awarded to 'exceptional programs which have improved local capacity of management and administration for health, thus leading to better health results'.

Report written by:

Assistant Professor Selma Šogorić D.Sc, National Coordinator
of the Croatian Healthy Cities Network
with the seat at Andrija Štampar School of Public Health

Medical School, Zagreb University

Rockefellerova 4

10000 Zagreb

Tel: 01/ 45 90 132, fax: 01/46 84 213

mob: 098 387788

E-mail address ssogoric@snz.hr

Web page www.zdravi-gradovi.com.hr

Report on implemented program partnership between the Croatian Healthy Cities Network and Healthy Counties in 2012

The following activities are included in the report:

1. Education, themed, and coordination meetings of project leaders – four meetings (April – Zagreb, April – Vinkovci, June – Zagreb, October – Tuheljske Toplice)
2. Themed conferences, workshops, discussions and consultations
 - a) The prevention week: 'Managing preventive activities' (April – Zagreb)
 - b) 'Palliative care' symposium (April – Vinkovci)
 - c) Professional consulting for counties: 'What kind of palliative care do we need in Croatia' (June – Zagreb)
 - d) Themed discussion on 'Achievements evaluation of the Healthy Counties project in Croatia' (October – Tuheljske Toplice)
3. Evaluation workshops – four regional evaluation workshops with members of the health team from Slavonia (November – Vinkovci), Dalmatia (November – Biograd na moru), Western Croatia (November – Opatija), and Northern and Central Croatia (December – Zagreb)
4. Training workshops – four training workshops for extended team of Zagreb – Healthy City project (May – September 2012)
5. Individual visits and mentoring provided to counties in program partnership: Istria, Primorje – Gorani, and the City of Zagreb
6. Final exam for county teams who finished education of 2nd set of modules, May, Zagreb