



ABSTRACT FORM

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Title of the contribution/Titolo del contributo	Building a Healthy Community in a City that Cares		
Objectives/Obiettivi	To illustrate the Habitat-Microareas Programme as a good practice for community wellbeing. The HM Project allows the production of bundles of innovative, integrated, place-tailored public services. The public services are designed and implemented by aggregation of local agents and knowledge, through participatory community building approaches.		

Contents-text/Contenuto-testo:
Max. 400 parole/words

The reform of mental health in Trieste has permeated all health care, particularly the system of territorial health.

Accessible health services, income security, decent living/working conditions, the development of social and human capital are universal conditions for promoting healthier, more equitable and prosperous societies. However, inefficiency and/or social exclusion problems are context dependent and require interventions, which are tailored to the characteristics and needs of different places. Therefore, a sustainable development policy aiming to provide opportunities for all – with access to basic services, housing, energy, transportation etc. – requires place-based long-term strategies.

The “Habitat-Microareas Programme” (HM) has been running in Trieste since 2006, implemented

by Local Health Authority of Trieste (ASUITs), local Municipalities of Trieste and Muggia, and the Public Housing Agency. These are a relevant example of integrated action to improve health and living conditions in a vulnerable urban neighborhood. Microareas are aggregated territories (quarters, districts or group of houses) incardinated in the four Health Districts of the Public Health Authority , with between 500 and 2500 inhabitants and most of the houses are public housing. Currently in Trieste there are sixteen Microareas. Each Microarea has a coordinator, identified as Community Health Manager with a specific Job Description.

The HM Project allows the production of bundles of innovative, integrated, place-tailored public services. The public services are designed and implemented by aggregation of local agents and knowledge, through participatory community building approaches.

The HM Programme is targeted to the local community as whole; a community that lives in a quantitatively defined socio-demographic contexts, territorially delimited, in which all the resident population is proactively involved and not only the population that presents specific social and health problems. In this perspective, the HM objectives concern a complexity of issues related to both the organization and supply of services, and more generally, to the activation of processes of empowerment and inclusion, which affect both the individual and the community.

Overall, the approach adopted aims to develop the Community, enhancing the local welfare boosting the synergies between the services request and the public and/or private resources available at micro level.

The outputs demonstrate that the programme has activated positive relations that can better address the social, relational and residential issues that could jeopardize health. It has generated health-producing social capital. The more social capital is generated, the better problems can be resolved, and therefore less undesirable effects such as inappropriate hospitalizations can be expected.