concrete perspectives to address them. The first part will focus on identifying the participants‘ representations of the methodological difficulties of PHIR. The second part will be an interactive presentation of 12 minutes, the last 2-3 minutes will be devoted to final questions.

Abstract citation ID: ckac129.075
Intervention research in health promotion: transferability issues, from project to structuring
Florence Cousson-Gélie

The work carried out in intervention research has revealed the complexity of health interventions, particularly in health promotion. Even if these interventions are in themselves complex systems interacting with their context or ‘intervention systems’, PHIR is making considerable progress in understanding the mechanisms thus revealed, a key element for their transferability, which is an essential issue in public health. Transferability assesses the extent to which the outcome of a successful intervention, evaluated in one context, can be achieved in another context. It is through the concrete example of the interventional research that has made it possible to evaluate the transferability of the project ‘P2P, peer action for the prevention of smoking among high school students in vocational training’, that the issues presented in the two previous presentations will be analyzed. Using the example of this transferability study, which aimed to assess whether the P2P programme developed and conducted in the south of France is transferable to other regions and under what conditions, participants will be invited to analyse the conditions of this implementation. Thus, the question of the reproducibility of the effectiveness results with a similar population but in a different geographical context, implying differences in the functioning of the intervening structures and the high schools involved, but also in the characteristics of the high school students targeted, will be examined. After the presentation of the project and its transferability in different spaces, an interactive debate will be organised on the challenges of transferability.

2.E. Workshop: The city of proximity: Accessible, Inclusive, Sustainable, Healthy and Salutogenic

Abstract citation ID: ckac129.076
Organised by: EUPHA-URB, EUPHA-ENV
Chair persons: Stefano Capolongo (EUPHA-URB), Marija Jevtic (EUPHA-ENV)
Contact: andrea.rebecchi@polimi.it

According to the “Urban Health Rome Declaration” at European meeting “G7 Health” that defines the strategic aspects and actions to improve Urban, Environmental and Public Mental Health into the cities, and referring to the Agenda 2030 in which the 11th SDG argue about “Sustainable Cities and Communities. Make cities and human settlements inclusive, safe, resilient and sustainable”, one of the most expressive syntheses of the challenging relationship between urban planning and Public Health is stated by WHO (2016): “Health is the precondition of urban sustainable development and the first priority for urban planners”. Referring to the Healthy Cities & Urban Health definitions, we can consider Public Health not merely as a aspect of individual health protection and promotion, but a collective condition, strongly influenced by the environmental context and by the strategies implemented by local Governments. The “Health in All Policies” strategy, clearly underlines how health depends by the quality of outdoor and indoor living environments. In this scenario, healthy living and the requirements for healthy places, infrastructure for the public good and Public Health, cycling, walking, disintegrating the role of polluting traffic from the urban environments, social vulnerability and equality are just a few aspects in complex puzzle when designing the urban spaces for healthy, active, walkable cities. The lockdown due to the pandemic has prevented travels, forcing many people to work at home and reducing the possibility of accessing services in the territory. This condition has further highlighted the importance of urban living areas capable of satisfying basic needs within a reasonably easy range of accessibility. The concept of the “15 minutes city” is a useful vision to represent the city of proximity, where it is possible to meet the needs for sustainable, fair, quality, and healthy living. This dimension of proximity can be central to formulating strategies to improve the quality of urban life. A place of proximity, therefore not only defined based on the physical characteristics and people’s uses, but also based on the data collected from a public health perspective in which it is also possible to try to test different types of information and build the conditions to suggest suitable policies and projects. Aim of the Workshop - organized by the two EUPHA Section URB+ENV - it would like to be to build the capacity and knowledge between participants about the main topics and urban features capable to have relevant Urban Public and Environmental Health outcomes. Additional scope is to collected case studies and research experiences considered virtuous at the international level, analyzed in detail to highlight the main urban and architectural features of those healthy experiences and the related health outcomes, such as sedentary lifestyle reduction, increase of the attractiveness of places, reduction of air and noise pollution.

Key messages:

• Cities for people, promoting Urban Public Health, Environmental Health and active mobility, require optimization of public spaces for citizens and their activities.
• Case studies and research experiences to highlight the main urban and architectural features of those healthy experiences and the related health outcomes, such as sedentary lifestyle reduction.

Abstract citation ID: ckac129.077
Introducing walkable cities as a Public Health intervention
Vlatka Matkovic

V Matkovic1, M Jevtic2,3, MP Kusturica2, C Bouland4, M Jukovic5, D Stojevic6
1Health & Environment Alliance, Belgium
2Faculty of Medicine, University of Novi Sad, Novi Sad, Serbia
3Institute of Public Health of Vojvodina, Novi Sad, Serbia
4School of Public Health, Université Libre de Bruxelles, Brussels, Belgium
5Clinical Center of Vojvodina, Centre for Radiology, Novi Sad, Serbia
6Institute of Lowland Forestry & Environment, University of Novi Sad, Novi Sad, Serbia
Contact: vlatka@env-health.org

According to the “Urban Health Rome Declaration” at European meeting “G7 Health” that defines the strategic aspects and actions to improve Urban, Environmental and Public Mental Health into the cities, and referring to the Agenda 2030 in which the 11th SDG argue about “Sustainable Cities and Communities. Make cities and human settlements inclusive, safe, resilient and sustainable”, one of the most expressive syntheses of the challenging relationship between urban planning and Public Health is stated by WHO (2016): “Health is the precondition of urban sustainable development and the first priority for urban planners”. Referring to the Healthy Cities & Urban Health definitions, we can consider Public Health not merely as an aspect of individual health protection and promotion, but a collective condition, strongly influenced by the environmental context and by the strategies implemented by local Governments. The “Health in All Policies” strategy, clearly underlines how health depends by the quality of outdoor and indoor living environments. In this scenario, healthy living and the requirements for healthy places, infrastructure for the public good and Public Health, cycling, walking, disintegrating the role of polluting traffic from the urban environments, social vulnerability and equality are just a few aspects in complex puzzle when designing the urban spaces for healthy, active, walkable cities. The lockdown due to the pandemic has prevented travels, forcing many people to work at home and reducing the possibility of accessing services in the territory. This condition has further highlighted the importance of urban living areas capable of satisfying basic needs within a reasonably easy range of accessibility. The concept of the “15 minutes city” is a useful vision to represent the city of proximity, where it is possible to meet the needs for sustainable, fair, quality, and healthy living. This dimension of proximity can be central to formulating strategies to improve the quality of urban life. A place of proximity, therefore not only defined based on the physical characteristics and people’s uses, but also based on the data collected from a public health perspective in which it is also possible to try to test different types of information and build the conditions to suggest suitable policies and projects. Aim of the Workshop - organized by the two EUPHA Section URB+ENV - it would like to be to build the capacity and knowledge between participants about the main topics and urban features capable to have relevant Urban Public and Environmental Health outcomes. Additional scope is to collected case studies and research experiences considered virtuous at the international level, analyzed in detail to highlight the main urban and architectural features of those healthy experiences and the related health outcomes, such as sedentary lifestyle reduction, increase of the attractiveness of places, reduction of air and noise pollution.

Key messages:

• Cities for people, promoting Urban Public Health, Environmental Health and active mobility, require optimization of public spaces for citizens and their activities.
• Case studies and research experiences to highlight the main urban and architectural features of those healthy experiences and the related health outcomes, such as sedentary lifestyle reduction.
COVID-19 pandemic yet again showed that health crises and epidemics are introducing urban planning as a public health response. Globally, we saw a renewed interest in urban environment and healthy living and the changes in urban environments which can make for a healthier living. Even before the pandemic, various urban concepts and models that take as basis a health-oriented, holistic approach are being implemented in many cities. To name a few: car-free centres or neighbourhoods, the so-called ‘Superblocks’, neighbourhoods with low-speed traffic, walkable and cyclable cities aiming at all amenities being easy reach so-called ‘15 Minutes city’. COVID-19 crisis only accelerated many of these initiatives and brought them to global level need and attention. Such interventions are being introduced to demotivate the use of polluting cars, to ease up and to promote healthy and active transportation such as walking and cycling. As a consequence, those interventions not only are hoped to lead to an increase in physical activity, but also better air quality, reduction of noise. Cities have accelerated urban transformations of the space for active transportation such as the introduction of more cycling lanes in their networks, transforming ‘car’ streets to mix use streets, etc. Particularly during the pandemic, the streets that were previously dominated by car use, parking lots, parking spaces, and car lanes have shifted their focus to the pedestrians, healthy and active mobility. Though, not so optimistic continuation of the speed of the changes in urban planning are seen at the end of the pandemic. It is still clear that spaces for people, spaces promoting mental health such as green spaces, green islands, green pedestrian streets and healthy mobility, are missing. Lockdown measures of reducing the car traffic and increasing the walkable spaces for citizens were primarily imposed to save public health but had one important co-benefit - improved air quality in many areas.

Abstract citation ID: cakc129.078
(Re)thinking the city of proximity for Salutogenic purposes
Andrea Rebecchi
A Rebecchi1, F Crespi2, S Capolongo2
1Department of Architecture, Built Environment, Politecnico di Milano, Milan, Italy
2School of Architecture Planning Construction Engineering, Politecnico di Milano, Milan, Italy
Contact: andrea.rebecchi@polimi.it

As centres of population and human activities, nowadays urban environments are simultaneously the main cause of and solution to a growing number of health-related challenges. In this setting, COVID-19 pandemic has helped reiterate this and serves as a wake-up call and an opportunity to rethink the way we approach cities. Aim of this paper is to research what today seems the most promising urban model for long-term individual and global resilience: the ‘city of proximity’, namely about inclusive walkable and cycling environments where people can access all basic destinations within reason- able times and distances from home. Therefore, urban proximity dimension, methodological approach and urban features and functions become the main subject of a quanti- qualitative matrix of comparison of five international case studies centred on the topic, by which it is possible to set out general criteria for such model, along with a methodology to measure all cities in its respect. As a result, residential density, functional mix, pedestrian surface, cycle routes, public transport stops, green areas, schools, cultural facilities, sport facilities, retail services and urban gardens make up the fix components of a comprehensive set of 11-n urban features, whose occurrence is investigated through GIS-based analysis within designated distance ranges, creating a comprehensive assessment framework that is adjustable to all urban contexts worldwide. In the end, the application of such framework to the city of Milan finally helps to validate its effectiveness in providing a picture of city-wide accessibility to proximity services, and in highlighting the value of integrated analysis in view of shaping public policies and informed planning choices which put health and sustainability at the centre.

Abstract citation ID: cakc129.079
The city of proximity (accessible, inclusive, sustainable, healthy & salutogenic): the case of Brussels Bourse, Grand-Place station
Marija Jevtic
G Mlic1, C Micic1, G Jevtic1,2,2,2
1Faculty of Medicine, University of Novi Sad, Novi Sad, Serbia
2School of Public Health, Universite Libre de Bruxelles, Brussels, Belgium
Contact: marija.jevtic@uns.ac.rs

The ecological dimension is expressed, among other things, in the matter of movement and the process of appropriation of local spaces. The creation of public space is oriented towards centralising and bringing exchanges closer together. It is a recognition of the ways of life of the individual who has become aware of the other essentials for human well-being. How does the proximity of multimodality and culture strengthen the urbanity? And how does it influence urban intensity, livability, health & the salutogenic approach of public space? The study investigates the quality of public mobility spaces through design, multimodality and sustainable planning by surveying the case of Bourse-Grand-Place station in Brussels. This transformation project is the subject of an empirical method using the material of recent research on urban design and professional practice. Falling within the scope of the “Cities for People” vision of the future, the design of this project integrates socio-cultural activities around the idea of “Station for People”. A concept based on universal accessibility ensures that all individuals can access it. Thereafter, an evolving social economy programme promoted cycling through equipment, maintenance, recycling, training, innovation and the encouragement of cycling culture. The breakthrough of the innovative multimodal design process based on multidisciplinarity could become a helpful urban strategy, oriented toward making proximate neighbourhoods both residentially and practically attractive. The present article carries out an enquiry of how design and urban activities take part in strategies to improve the quality of the public spaces. It reveals some hints that could help urban practitioners when making decisions regarding the quality of an urban place and ‘living together’ oriented developments. With a contribution to climate change issues, this article demonstrates how urban design can contribute to the quality of life of users and citizens.

Abstract citation ID: cakc129.080
Environmental health perception by Brussels inhabitants: comparison between a top-down raising awareness and citizen science
Pascale Incourt
P Incourt1, L Herbrich1, C Bouland2
1School of Public Health, Universite Libre de Bruxelles, Brussels, Belgium
Contact: Pascaline.Incourt@ulb.be

The effects of the environment on health are well documented and prove to be a real public health problem. It is therefore essential to raise public awareness of these issues to induce preventive and protective behaviours. We focused on two methods: passive information transmission (top-down approach) and citizen science (bottom-up approach). The study aims to compare both approaches while raising awareness among Brussels citizens. We created two groups: a traditional awareness group, receiving infographics by email,
and a citizen science group, carrying out immersive activities with researchers. All enrolled participants filled out a questionnaire before and after. The "top-down" group (n = 137) received 3 infographics. The citizen science participants deep-dived into the environmental health body of knowledge, carried out individual measurements of air quality and noise pollution along a city walk and analysed, together, the results in groups to design actions. The citizen science sessions were finalised by a focus group. All sessions enjoyed and developed knowledge and awareness of environmental health. Accompanying citizens in developing knowledge was beneficial and required for environmental health empowerment. It showed the added value of citizen science in raising curiosity, creativity, and capacity building. The participants showed different socioeconomic statuses and demonstrated an appetite for understanding the exposures measured during the walks. Our results integrate several SDGs among those SDG4 and SDG3, since by raising awareness of participants, we enabled them to improve their capacities in becoming actors in their health. The risk of developing health problems related to the environment is higher in lower socioeconomic groups, due to a greater vulnerability and the inequitable environment distribution between neighbourhoods. Pro-environmental behaviour fosters reduced exposure for now and future generations.

2.F. Skills building seminar: Health Data Pipelines: moving away from Excel to scalable, insightful and future-proof infostructure

Abstract citation ID: ckac129.081
Organised by: EUPHA-DH
Chair persons: Stefan Buttigieg (EUPHA-DH), Juan Rachadell (Portugal)
Contact: info@stefanbuttigieg.com

Public Health Data Pipelines are critical in the implementation of scalable Digital Public Health projects as part of the reporting, evaluation and monitoring aspects of any public health intervention. The WHO Europe Programme of Work covering the period 2020 to 2025 puts an emphasis on "developing big-data capacity in surveillance, modelling and policy monitoring". This workshop will provide an initial insight into the world of Health Data Pipelines and will give you the necessary ingredients to get closer to establishing processes and systems that provide you the right information at the right time and context.

Key messages:
- Data Linking is critical in the transition between legacy systems and data sets based on decades old technology to reliable and robust information infrastructure (infostructure).
- Kicking off the necessary internal discussions to consolidate data and processes into health data pipelines do not require advanced technical knowledge.

Abstract citation ID: ckac129.082
From Personal to Public Health - building Health Data Pipelines
Stefan Buttigieg
S Buttigieg1,2
1EUPHA-DH
2Digital Health Malta, Msida, Malta
Contact: info@stefanbuttigieg.com

The creation of future proof infostructures requires a number of efforts on different levels within a health organisation. One important thing that we need to be genuinely realise and grow aware of is that there is an inherent need to move away from Excel Spreadsheets, Access Databases and legacy data tools (including paper) towards interoperable information systems that are focused on high-quality data coordination mechanisms, robust processes and documentation and most of all design of data flows that enable sustainable data collection and analysis. This hands-on session will inform users on the following elements:
- Doing a thorough situation analysis of your current data situation
- Design your health data pipeline - paper and imagination required
- Resources to help you design the ideal infostructure
- Setting your next steps forward
- Being aware of your organisational culture to ensure maximum success

Abstract citation ID: ckac129.083
Data protection and fairness by design
Juan Rachadell
J Rachadell1,2,3
1Public Health Unit, ACES Lisboa Ocidental e Oeiras, Lisbon, Portugal
2Institute for Evidence Based Health, Lisbon, Portugal
3EUPHA-DH
Contact: juan.rachadell@campus.ul.pt

Building a health data pipeline is an opportunity not only to review the efficiency of data flows and organisational processes but also to guarantee that the resulting data system incorporates data protection and fairness principles by design. This session will cover some key aspects of data protection and the principles of data fairness and ethics: Transparency, simplicity and fairness
The importance of a diverse team with diverse expertise Keeping the business objectives in mind and purpose limitation Compliance with data protection directives (GDPR)