出國報告(出國類別:考察)

108 年考察訪問西太平洋健康城市 聯盟模範城市韓國

服務機關:桃園市政府衛生局

姓名職稱:蘇柏文副局長、游庶鑫股長、劉子瑜衛生稽查員

派赴國家:韓國首爾市

出國期間:108年9月22日至9月26日

報告日期:108年12月13日

桃園市政府及所屬各機關出國報告提要

出國報告名稱:108年考察訪問西太平洋健康城市聯盟模範城市韓國

頁數_161_ 含附件:■是□否

出國計畫主辦機關/聯絡人/電話/E-mail

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出國類別: ■1.考察 □2.進修 □3.研究 □4.實習 □5.其他

出國期間:108年9月22日至9月26日 出國地區:韓國首爾市

報告日期:108年12月13日

關鍵詞:健康城市、高齡友善城市、西太平洋健康城市聯盟

内容摘要:

西太平洋健康城市聯盟(AFHC)透過每 2 年舉辦之國際研討會,提供各國互相交流之機會,第7屆西太平洋健康城市聯盟會員大會於2016年於韓國召開,且韓國為西太平洋健康城市聯盟之模範會員國,今(108)年也由韓國擔任西太平洋健康城市聯盟指導委員會之主席會員國,鑑於韓國為臺灣鄰近的亞洲國家,近年積極推動健康城市且頗具成效,社區內高齡服務型機構亦發展蓬勃。

此次由台灣健康城市聯盟率領本府與臺北市政府、基隆市政府及臺南市政府共4個縣市前往韓國,透過此次考察活動拜會西太平洋健康城市聯盟指導委員會之主席城市江東區、韓國健康城市聯盟主席城市鐘路區,並與延世大學及首爾市老人福利中心進行交流,瞭解韓國在健康城市及高齡友善城市推動上之政策,以及公私部門之合作模式,亦藉由西太平洋健康城市聯盟國際論壇,與西太平洋健康城市聯盟各會員國之貴賓交流各自推動健康城市之經驗,並為明年度即將召開之西太平洋健康城市聯盟會員大會開啟友誼的開端。

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壹、目的

桃園市府團隊積極推動長者健康促進與打造健康宜居的城市,期使桃園成為一個親老、敬老的高齡友善城市。為推動健康城市業務、高齡友善服務模式及衛生福利等相關政策方針,桃園市政府衛生局代表本市於9月22日至26日參訪西太平洋健康城市聯盟(Alliance for Healthy Cities, AFHC)之模範會員國一韓國,互相分享推動健康城市的過程,將健康理念落實於城市各項的規劃,由政府部門結合民間組織及社區民眾,共同參與社會及落實行動。

此行亦拜會韓國首爾市之政府單位(包含江東區市政廳、鐘路區市政廳)、 學術單位(延世大學)、政府委辦單位(首爾老人健康福利中心)及高齡服務機 構等,該國近年積極發展高齡者活躍老化及友善設施,並推動健康生活、健康環 境、高齡友善城市、女性友善城市、兒童友善城市及社會關懷互助等相關措施, 期打造永續之健康及高齡友善城市,提供市民宜居樂活之生活型態及生活環境, 發揚在地老化、活躍老化的精神,鼓勵長輩多參與社會活動,更致力於協助長者 於社會上繼續發揮其能力,藉長者自身進行工作及經驗傳承,提升自我價值並成 為推動社會成長之助力。

韓國近年於高齡友善及健康城市推動政策上已累積不少經驗,建立良好的產官學合作模式,高齡友善服務機構硬體及軟體之發展亦趨成熟,值得本市參考及借鏡其推動高齡友善及健康城市之政策,不斷推動各種創新多元的健康及高齡友善政策,讓桃園在老化的浪潮來襲前能有所因應,打造健康安全及高齡友善城市,提升市民對城市之幸福感。

貳、 過程

一、每日行程

時間	9/22(日)	9/23(一)	9/24(二)	9/25(三)	9/26(四)
	自際發仁川機	用餐	用餐	用餐	用餐
8:00-12:00		參訪江東 區高齡友 善及無菸 公共環境	觀摩鐘路	拜會首爾老 人福利基金 會	
12:00-13:00		用餐	用餐	用餐	
13:00-17:00		拜區觀區台觀養觀居中會政江人院高度下江人院高服高服東線一個一個<	交流		
17:00-	17:00 抵達首爾 仁川機場	用餐	用餐		17:00 抵達桃園國 際機場

二、 參訪行程概述

(一)第1天:108年9月22日(星期日)

前往桃園機場搭機,於韓國當地時間下午5時抵達韓國仁川機場,搭乘接駁巴士,約7時30分抵達下榻飯店九樹飯店2號店。

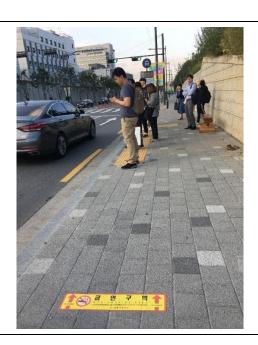
(二)第2天:108年9月23日(星期一)

- 1. 參訪江東區高齡友善及無菸公共環境:
 - (1)實際走訪江東區周邊,觀摩健康環境、高齡友善環境及無菸公共環境營造情形,可發現路邊高起的人行道,其入口處或四周轉彎處皆以平緩且寬敞的無障礙坡道解決高低差問題,特別的是,除了注重人口處及轉彎處外,同一條人行道若距離很長,每隔一段距離皆會再設置緩坡,讓路途有離開人行道需求的民眾可方便使用,是高齡及無障礙環境推動不錯的例子;此外,走訪街區時常可見地面上、機構門口、店家門口及公園入口處附近的禁菸標誌,值得一提的是,行程中的一處公車站牌,在距離牌前 10 公尺的地面上明顯地標示了「禁止吸菸,違規者罰款 10 萬韓元」的說明,不禁令人聯想本市今(108)年度 5 月剛公告的公車候車亭禁菸政策,有異曲同工之妙,同樣地為居民營造健康無菸的環境而努力。

(2)參訪剪影



街道旁店家前標示為禁菸區域



公車站牌前 10 公尺內禁止吸菸,違規者罰款 10 萬韓元



區內設有供民眾運動之器材及腳踏車



人行道設置緩坡消除高低落差

2. 參訪江東區市政廳

(3)由李正勳廳長(Lee Jung-Hun),同時也是西太平洋健康城市聯盟會長接待大家。市政廳由科長向大家報告江東區的高齡友善福利政策,江東區在推動長者相關政策上是以孝道為宗旨,廳長表示只要大家把長者都當成家中的長輩一樣愛護、疼惜、照顧,而且心裡想著現在服務長者等於是在服務未來的自己,這樣在推動業務上會更有同理心。江東區發展「幸福者同行事業」,由 18 個機構,1,200多名工作人員投入獨居長者聚集在一起提供他們運動、手作等課程,使獨居長者凝聚成互助、快樂的團體,也可預防憂鬱及自殺發生。此外也會定期拜訪百歲以上長者及為他們慶生,2019年至今就舉辦了49次慶生會。此外也在小區胡同巷弄內營造舒適友善的休息空間(如靠背椅、遮雨棚等),增加長者與鄰里街坊互動動力。

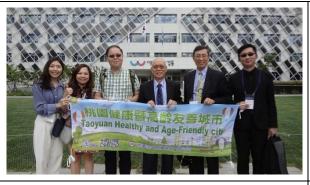
(4)參訪剪影



江東區市政廳外的候車亭結合太陽能發電 提供手機充電功能



江東區市政廳內樓梯扶手轉角處設計視障 者專用點字指示



本府團員與台灣健康城市聯盟洪德仁副理 事長、郭憲文秘書長合影



江東區市政廳外提供多座友善休憩座位



桃園市政府衛生局蘇柏文副局長代表致贈禮品予江東區市政廳李廳長



本次各縣市參訪團員於市政廳會議室內合影



市政廳外牆佈滿太陽能板提供電力



廳外無障礙坡道方便輪椅、嬰兒推車通行

- 3. 參訪江東老人福利院 (Gangdong Senior Welfare Center)
 - (1)江東老人福利院於 2003 年成立,在江東 25 個小區都有設站,工作人員共 103 位,配置護理師、物理治療師、營養師各 1 位。主要係安排不同的活動以帶動長者的積極性,目前已成立 59 個社團。60歲以上的長者皆可以使用這邊的設施,每天約 1,350 人次使用,以75歲以上居民佔最多數(78%),此外也與中學配合由學生提供服務,增加跨世代的交流。另外也有提供健康餐盒送餐到府服務(3,500 韓元/每餐),低收入戶者免費提供,以及接駁車服務,提供附近敬老院較不便行動的長者往返。

(2) 參訪剪影





各縣市參訪團員於江東老人福利院前合影

聽取江東老人福利院簡介簡報



入口設有 AED 裝置應變長者發生緊急狀況



中心設有撞球室供長者活動娛樂

4. 參訪高德養老院:

(1)高德養老院為綜合性長者服務機構,設有敬老堂(類似老人活動中心,舉辦活動供社區內長者參加)、福祉院(提供綜合性長者服務)、養老院(住民多為身體機能較好之長者)及療養院(住民身體狀況較差);機構內共有 28 名工作人員,94 位住民,住民平均年齡為 85歲,2 人一間,裡面設備齊全,另配置餐廳及物理治療室,也有安排中醫不定期至此看診,機構內住民多為身體較健康之長者,若評估長者身體退化或疾病惡化會轉介至其他適合之單位接受治療。

(2)參訪剪影



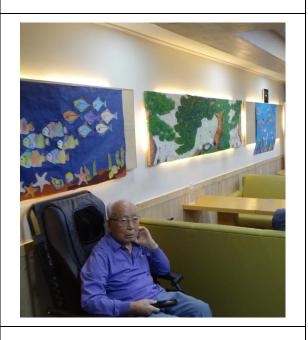


高德養老院門口

聽取高德養老院簡介簡報



長者使用儀器復健



牆面以院內長者畫作裝飾

- 5. 参訪高德居民服務中心(Godeok 1-dong community service center):
 - (1)居民服務中心功能類似本市區公所,此中心內設有百歲諮詢站,由衛生院管理,提供長者各種健康或照護相關諮詢,民眾可採預約方式或是直接到現場諮詢,諮詢站設有簡易測量設備,可協助量測民眾血壓、血脂、中性脂肪等,也有提供心理諮詢。每天會有一名護士進駐提供服務,另外也有物理治療師、營養師,採預約制不定期進駐,提供物理治療諮詢評估,若民眾有物理治療需求則協助提供附近醫院、診所資訊。

(2)參訪剪影



高德居民服務中心門口



服務中心門口人行道與車道設計成無段差方便身障者或長者通行



長者至百歲諮詢站洽詢



該中心布告欄張貼之戒菸海報

(三)第3天:108年9月24日(星期二)

1. 參訪鐘路區市政廳:

(1) 由金永鐘廳長(Kim Yong-Jong),同時也是現任韓國健康城市協會事務長接待大家,廳長表示鐘路區是以人為本的城市,目標為打造永續的健康城市,鐘路區自今(2019)年開始擔任韓國健康城市協會的議長城市,目前韓國共有98個會員城市,鐘路區正努力加強各會員城市間合作,拓展國際交流的機會,於今年3月參訪歐洲6個健康城市,7月接待蒙古訪問團;鐘路區因老年人口比例較高,設有許多老人綜合福利館,區內有60多個敬老堂,其中23個敬老堂以促進青年和長者交流為特色。

- (2) 由健康城市科科長(現任韓國健康城市協會事務次長)介紹鐘路區健康城市及韓國健康城市協會,鐘路區已有625年的歷史,為交通樞紐中心,包含許多市政主要機關(如:青瓦臺),也擁有許多自然景觀,目標為打造永續性健康城市,包含健康安全城市、廉正城市、公民參與、藝文城市、福利關懷城市、教育夢想城市共6個城市願景,為達到健康城市目標,持續在「健康生活」、「健康環境」、「健康鄰居」3方面努力,2005年鐘路區制定了健康城市基本條例、加入韓國健康城市協會(KHCP)為健康城市奠定了重要的基礎,2015年加入西太平洋健康城市聯盟(AFHC),並與轄區內的大型醫院建立MOU,強化健康城市相關工作網絡,今(2019)年為促進永續性的健康城市,鐘路區市政廳設立了健康城市科;在這些努力下,鐘路區2016年被評為韓國健康城市指數最佳的城區,於2017年大韓民國健康城市獎項中獲得最優獎,2018年獲得大韓民國地方自治政策最優獎。
- (3) 鐘路區健康城市由 22 個部門實施 49 個相關工作項目,著力於「健康生活」、「健康環境」、「健康鄰居」三大領域推動政策:
 - A. 「健康生活」:為了改善民眾身體健康及生活型態,打造健康 徒步步道,同時設有精神健康及失智安心管理中心,另外,為 培養兒童從小建立運動習慣,政府盡力支援學校的運動項目, 加強學生的體能及肌力訓練,同時藉運動過程中獲得知識,更 大力推動如足球等學生們較喜愛的運動項目,獲得學生好評。
 - B. 「健康環境」:旨在打造無汙染的鐘路區,以共同成長的安全 鐘路為目標,推行屋頂清掃,靈活運用城市的土地從事農業活 動以改善城市土地浪費現象,值得一提的是,議長為了治理霧 霾,9年來持續推動道路噴水清掃作業,結果顯示,2017年首 都區霧霾測定結果當中,鐘路區的大氣狀態是最乾淨的。另一 項具代表性城市再生工程是水聲洞溪谷的重建工程,水聲洞 溪谷在朝鮮時代風景就非常優美,但自1970年代後,溪谷因 公寓建造被泥土覆蓋,大自然被破壞,因而逐漸消失,40年後 的今天,為了把溪谷的美麗重現於市民面前,政府拆除了廢棄 的房屋,努力以最大限度恢復當地往日風貌,建置出城市居民 的休憩空間。

- C. 「健康鄰居」:為了實現樂於分享的鐘路區的理念,打造一個 共同生活的共通體,鐘路區推行女性友善城市、兒童友善城市 及促進世代間交流的夢想幸福項目等方針。其中新村院項目 是改善弱勢居民生活條件及衛生環境的項目,包含房屋修繕、 搭建休閒娛樂設施、提供淋浴設施及廚房用品,並針對居民進 行能力強化培訓,營造多處公共工作場所,創造居民就業機會。 另一個體現兒童友善城市的代表性項目為山坡遊樂場,鐘路 區的昌信忠仁洞人口密集,但幾乎沒有兒童遊樂場,建造兒童 遊樂場是居民長久以來的願望,因此政府建立了山坡遊樂場, 希望兒童以山為友在此開心自由地玩耍,盡可能聽取當地居 民和兒童的意見,營造親近自然又有創意的空間,也因此在 2019 年韓國國土建設項目中獲得總統獎。
- (4) 韓國健康城市協會(KHCP)於 2006 年 9 月 14 日成立,以昌源市為代表(第 1、2 屆議長城市),原州市作為第 3、4 屆的議長城市,除經營協會外,也定期召開大會及各組織成員委員會,江東區於自2015 年至 2018 年擔任了 4 年的議長城市,而自今(2019)年起由鐘路區接任 KHCP 的議長城市。KHCP 目的是提高市民生活素養及健康水平、城市的平衡度,KHCP 會員城市遍及全國,2006 年創立時僅 14 個城市,至 2019 年 9 月已增至 109 個會員(包含 98 個城市及11 個學術機構),今年協會主要目標是達到永續的健康城市,將定期召開大會及舉辦大韓民國健康城市獎項選拔,加強會員城市培訓,開展政策方針領導力訓練,對於發展程度較低的地區推行健康城市領導力項目,今後目標是促進並持續發展,積極開發更好的健康城市政策,加強國內外的工作網絡,鞏固會員城市間的團結,使各會員城市皆能發展為健康城市。
- (5) 台灣健康城市聯盟郭憲文秘書長向鐘路區分享台灣健康城市推行 狀況,期透過此次雙方交流互相汲取永續推動健康城市的經驗,報 告內容包含闡述台灣推行健康城市的今昔差異,自過去以物質經 濟發展為主,到今日以永續發展為目標,自重視個人健康推行至現 今的全場域健康(即健康城市),從過去強調在地價值拓展至今日 永續發展的世界觀,另針對台灣健康城市聯盟組織架構及運作方 式進行說明,並以台南市為例簡單分享各縣市推動健康城市的做 法與成果。

(6) 參訪剪影



市政廳致贈慶熙宮舊照手絹予台灣健康城市聯盟代表團



桃園市政府衛生局蘇柏文副局長代表致贈 禮品予鐘路區市政廳長金永鐘



由台灣健康城市聯盟郭憲文秘書長向鐘路區分享台灣健康城市推行狀況



參訪團員在花草美化的市政廳門口留影



市政廳內廁所裝置無障礙扶手



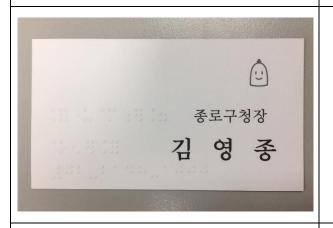
市政廳門口擺放明顯禁止使用一次性容器之看板



參觀建築物中利用菜園綠化城市的公園



公園內設置明顯禁菸標誌



鐘路區區長名片點字設計可見實踐友善城 市的小巧思



市政廳利用樓梯顯示消耗卡路里數鼓勵員 工多走樓梯



市政廳利用各層樓梯間牆面宣導健康促進 資訊(此圖為肥胖可能導致的疾病)



廁所前禁菸標誌

2. 鐘路區老人綜合福利館:

- (1) 由館長晶貫(住持)接待,機構服務內容包含提供多元健康促進設施及活動、獨居長者關懷、送餐服務及長者志工服務等,機構使用人口以女性居多(占62.4%),男性較少(占37.6%),使用者年齡在60歲至90歲以上不等,其中人數比例最高的為70-79歲(占42.3%),其次為80-89歲(占37.2%),而60-69歲及90歲以上所占比例差不多(約占10.2%)。
- (2)機構內提供許多長者健康促進設施及多項休閒與體能活動,配合保險補助,長者僅需負擔少許費用就可以參加多元課程,其中跆拳道結合舞蹈課程令人印象深刻,長輩們各個動作整齊、喊口號聲音宏亮,展現出長輩們好體能和活力;另一項特別的是館內圖書館設有心理諮商服務,在特定時段開放,採預約制,提供長者隱私的空間抒發心情,減少憂鬱情形發生。
- (3) 機構內有 3 處地方提供長者工作機會,長者可在陽光充足的頂樓製造大醬後販賣,另外館外路邊設有咖啡廳,讓長者當店員販賣咖啡茶點,而館內一樓的共餐餐廳,讓長者負責烹調、打菜及桌邊清潔服務等,長者工作賺取的薪資不但可供自身生活用,也可將部分回饋給機構營運,以提供更好的服務給市民,更能體現生命價值,這樣提供長者工作機會,不但讓長者經濟上自給自足,更能體現其生命價值。

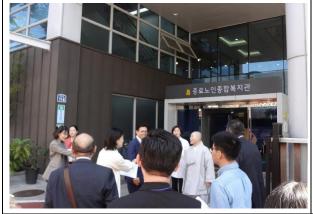
(7) 參訪剪影



晶貫館長贈禮予台灣健康城市聯盟代表團



台灣健康城市聯盟郭憲文秘書長代表致贈禮品予鐘路老人綜合福利館館長





機構外觀

館內大廳交誼廳可供長輩聊天交流





長者展現活力跆拳道表演

長者開心使用運動器材





圖書館心靈諮商

(圖片意義:心的疤痕也需要軟膏)

館內牆壁上館長和長輩們活動合影





釀造大醬的頂樓空間

長輩在館內販售自己釀造的大醬



長輩工作的咖啡廳人潮絡繹不絕



共餐餐廳內可見長輩認真工作的身影

3. 延世大學:

- (1) 台灣健康城市聯盟代表團自首爾特別市前往原州市延世大學,拜會 延世大學南銀佑教授,南教授曾於 2018 年 6 月 26 日來臺參加本市 舉辦之健康城市研討會,並擔任健康城市平行論壇講者,此次由我 們臺灣參訪團到韓國向南教授再次進行健康城市經驗交流。
- (2) 與延世大學的健康城市交流會中,首先由郭憲文秘書長簡報分享臺灣健康不平等的現況,接著由成功大學趙子元教授介紹臺灣高齡友善城市及社區;而延世大學南銀佑教授和我們分享的是名為「社會處方(Social Prescribing)」的健康城市項目,Social Prescribing源自於英國,期望盡量透過社會處方取代醫療處方,透過人與人之

間的互動,減少社會隔離的現象,主要透過志工和社區機構執行服務,提供多元的服務內容如:長者體能課程、健康飲食課程、烹飪課程、藝術課程、園藝課程、團體學習課程及志工服務等,延世大學在社區內做了一項有關社會處方的領航計畫,計畫目的是希望在無醫療處置的情形下降低社區長者憂鬱的情形,而主要介入方式是結合音樂、藝術及輕度體能的方式,讓長者在活動過程中回憶自己的人生故事,從而肯定自我人生價值。

(3) 參訪剪影



南銀佑教授贈禮予台灣健康城市聯盟代表團



桃園市政府衛生局蘇柏文副局長代表致贈 禮品予延世大學南銀佑教授



由台灣健康城市聯盟郭憲文秘書長向延世大學分享台灣健康不平等現況



由成功大學趙子元教授向延世大學分享臺灣高齡友善城市及社區





延世大學南銀佑教授分享社會處方項目

台灣健康城市聯盟代表團與延世大學合影

4. 原州市 Heung-Up 社區中心:

(1) 由延世大學南銀又教授帶領大家到原州市 Heung-Up 社區中心,此社區中心也是延世大學執行社會處方領航計畫的合作機構,在機構內親自看到老師帶領長輩們進行藝術回憶課程,透過圖畫與剪貼照片的方式回顧自己的人生;當機構長輩們為我們帶來迎賓舞蹈表演時,老師也請台灣健康城市聯盟代表團的大家拿著鼓棒一起隨音樂幫長輩們伴奏,表演結束後,更邀請大家手拉著手圍成一個圈一起跳韓國傳統民歌「阿里郎」,過程中深刻體驗到長輩在互動中的快樂,歡樂的氣氛真的有助於長輩忘卻憂鬱情緒,投入在和人互動的喜悅中,而這次體驗活動也讓大家體驗了代間互動的美好,觀摩結束前,長輩們分別為代表團的每一個人戴上他們自己做的手環,歡迎大家蒞臨,也為觀摩活動劃下完美句點。

(2) 參訪剪影



老師請長輩分享人生故事回憶錄



長輩為大家帶來歌唱舞蹈表演



團員開心替長輩表演打節拍伴奏

全體歡樂共舞阿里郎



戴上長輩自製手環開心留影



全體開心與長輩作品合影留念

(四)第4天:108年9月25日(星期三)

- 1. 首爾市老人福利中心:
 - (1) 由中心代表洪英俊先生接待大家,介紹中心是由首爾市政府提供財源之公共財團,核心業務是將首爾市民的財源有效運用於高齡友善服務,研究經費使用需求,並針對補助機構(如敬老堂)持續評估及監測,中心內設有50幾個工作部門,員工約有200多名,其中包含20多位博士及5位以上的律師。
 - (2) 首爾市自 2013 年 6 月成為 WHO GNAFCC (世界衛生組織高齡友善城市及社區網絡)的第 139 個會員,是韓國第一個加入 WHO GNAFCC 的城市,至 2019 年韓國已有 11 個城市加入,首爾市在推動高齡友善城市主要從高齡友善城市 8 大面向中挑出 6 個面向推動:

- A. 健康服務面向:建置完善的老人育養設施、病危健康管理體系, 積極擴建長期照顧服務機構,而預防老人孤獨死亡計畫是利用 資訊系統管理獨居老人健康。
- B. 友善環境面向:透過通用設計指引規劃老人設施,長者免費使用 地鐵服務,低收入戶長者住宅提供或租賃,街道上告示牌字體放 大,於餐桌旁設有方便放置拐杖處。
- C. 志願服務與就業面向:首爾市內 25 個自治區皆設有就業培訓輔 導中心,透過幫助長者找到專長或經驗,提高長者就業率。
- D. 休閒及文化面向:促進長者參與並融入社會活動,依在地特色建立休閒娛樂設施,如設立80幾個老人福祉館、播放舊時代電影的電影院、舉辦老人電影節及老人休閒運動競賽等。
- E. 敬老及跨代融合面向:編制敬孝手冊將敬老觀念納入青年基礎教育,為讓長者與社會接軌開辦資訊教學課程,設置敬老商家並貼上長長久久標誌代表,致力營造失智友善環境營造,在失智友善示範小區內將不同區的門口及道路漆上相同的顏色,方便失智長者辨識,避免迷失及方向混淆。
- F. 戰後嬰兒潮支持面向(創新):針對戰後嬰兒潮的中老年世代退 休後生活準備辦理訓練課程,支持再就業,強化其與社會的聯 擊,提供休閒或日常所需設施。
- (3)由亞洲大學廖宏恩副教授介紹台灣推動高齡友善八大面向的成果,在無障礙公共空間方面,以臺南市市政府交通局智慧車辨系統為例,分享首創身障車牌辨識優惠出入停車場免驗證之服務,另以本市桃園人行樂陶陶方案,介紹本市以人為本之公共建設服務;交通運輸方面,以嘉義縣政府改善偏鄉老人交通困境試辦計畫為例;住宅方面,介紹臺南平價住宅走入歷史,原地綠化城市再生;社會參與方面,分享臺北市樂齡巡迴運動指導團及苗栗縣祖孫共學活動;工作與志願服務方面,分享新北市全國首創佈老時間銀行,讓長輩藉由當志工提供服務存老本,未來可用於自身或家人;社區及健康服務方面,介紹臺中市幸福長照計畫及南投縣共餐服務。

(4) 參訪剪影



首爾市老人福利中心由洪英俊代表接待台灣健康城市聯盟參訪團



桃園市政府衛生局蘇柏文副局長代表致贈 禮品予洪英俊代表



首爾老人福利中心鄭博士介紹首爾市推動 高齡友善八大面向情形



由亞洲大學廖宏恩副教授向中心分享台灣高齡友善八大面向成果



台灣健康城市聯盟代表團與首爾老人福利中心合影



本府團員與鄭博士合影

2. 西太平洋健康城市聯盟(AFHC)國際論壇:

(1) Prof. Evelyne de Leeuw (澳洲新南威爾士大學教授):

分享主題為「Organizing Research for Healthy Cities」,介紹教授在健康城市方面之研究內容,分別以 research on research in research for 及 research with 這 4 種不同面向去探討與健康城市有關的不同議題,透過不同角度有不同結果。

(2) Dr. Agis Tsouros (世界衛生組織國際顧問):

分享主題為「The future directions of Healthy Cities in the 21th Century」,指出健康城市需透過階段性、持續性的政策努力,健康政策應針對各族群的民眾,需憑藉政府實踐政策領導力,同時社區積極參與也是重要的一環,政府需多傾聽民眾及利害關係人的建議,並透過健康外交拓展國際視野。

(3) Hwang Myung-sun (韓國健康城市聯盟副主席):

分享主題為「Healthy City Project in Nonsan-si」,介紹韓國忠清南道論山市推行健康城市方案推動情形,論山市的老年人口為24.3%,面臨孤獨、低教育程度、文化衝擊、生活品質降低及慢性疾病增加等社會問題,透過聽取民眾意見、居民間同苦共樂地互相扶持等,藉以打造更健康宜居的論山市。

(4) 洪德仁醫師(台灣健康城市聯盟副理事長):

分享主題為「Progress of Taipei Healthy City Towards SDGs」

,介紹臺北市依循永續發展目標(SDGs)推動健康城市之成果,提及臺北市目前面臨的健康問題,為推動健康城市,改善健康問題,透過22項 SDGs 指標、15項高齡友善指標及18項安全社區指標來擬訂策略改善。

(5) 李正勳區長(首爾市江東區區長):

分享主題為「Progress of Gangdong Healthy City Towards SDGs」,介紹首爾市江東區透過加強國際網絡合作、營造健康完善的物理環境、打造無歧視的健康環境、致力營造樂活生活及設置健康城市相關基金會等,將健康融入江東區各項政策,推動健康城市之成果。

(6) 參訪剪影



本府團員參加西太平洋健康城市聯盟國際論壇



世界衛生組織國際顧問 Dr. Agis Tsouros 進行簡報分享



台灣健康城市聯盟副理事長洪德仁醫師 進行簡報分享



討論會由洪德仁醫師代表台灣健康城市聯盟發言及回應

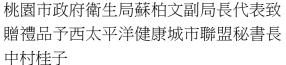


國際論壇會場



台灣健康城市聯盟參訪團與香港健康城市李大拔教授合影







本府團員與韓國健康城市協會事務次長合影

(五)第5天:108年9月26日(星期四)

前往首爾仁川機場搭機,於臺灣當地時間下午5時抵達桃園國際機場。

參、心得及建議

一、 觀察韓國高齡化現況反思:

韓國近年少子高齡化、疾病型態的改變、生活文化變化、朝建置社區整合性照護體系發展,以上恰與臺灣長照服務發展情形相似,例如住宿式長照機構的使用情形增加、民間企業的參與、專業人員意識的改變及國民負擔的增加等,都是將來我們可能面臨的問題;此次參訪發現韓國高齡服務機構和我們臺灣一樣,皆有單一機構提供多元服務項目的實例,反觀臺灣高齡服務機構提供長者就業機會的情形較少見,而促進長者再就業,回歸社會繼續奉獻、傳承經驗,可讓長者達到實現自我價值,同時也可解決長者生活及經濟上之負擔,正是我們一直以來推動高齡友善城市八大面向中「工作及志願服務」最希望達到的目的,本市在未來推動高齡服務機構或其他相關活動時,可思考結合長者資源,規劃長者再就業或輔導長者擔任志工,提升長者自我認同,創造社會價值。

二、 長者資源整合:

在韓國各區設置的百歲諮詢站功能類似健康諮詢及資源整合站,雖然 我們衛生所有提供各項健康諮詢,衛生局長期照護科的照管專員也會 針對有需求個案進行評估及資源轉介,醫療院所也會提供出院準備資 源,但似乎缺乏整合的單一窗口;另外江東區在推動長者相關政策上以 孝道為宗旨,跟我們孟子所說「老吾老以及人之老」意涵相同,因應整 個臺灣高齡化的趨勢,發展高齡友善及相關照護政策是刻不容緩的事。

三、 健康促進環境營造:

鐘路區市政廳除藉樓梯面顯示走樓梯消耗之卡路里數以增加員工走樓梯的機會,再加上利用樓梯間牆面宣導各式健康資訊,可讓健康資訊透過重覆上下樓梯時,無形中灌輸到員工腦中,對於促使員工採取健康的行為具加成作用,可更全面提升員工身體健康,值得參考。

四、韓國戒菸環境觀察:

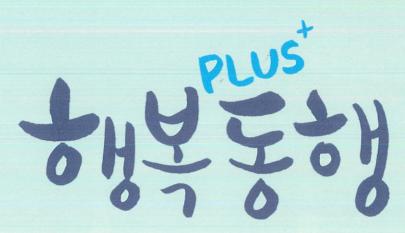
走在韓國路上不難發現地面上、店家門口、公園入口處及公車站牌附近的禁菸標誌,本市亦在今(108)年5月1日起公告公車站候車亭全面禁菸,宣導期6個月,並自108年11月1日起針對違規吸菸者開罰,未來將持續拓展禁菸場域,營造健康無菸的環境;另外在韓國行程中仍有觀察到一群民眾在禁菸區域,甚至是禁菸立牌旁吸菸,可發現不管在韓國還是臺灣推動禁菸都不是件容易的事,也促使我們思考如何規劃有效的菸害防制策略,以維護市民的健康。

肆、附件

- 一、江東區老人綜合福利院簡介
- 二、高德養老院簡介
- 三、高德居民服務中心百歲諮詢站簡介
- 四、鐘路區老人綜合福利院簡介
- 五、延世大學交流簡報
- 六、西太平洋健康城市聯盟國際論壇簡報

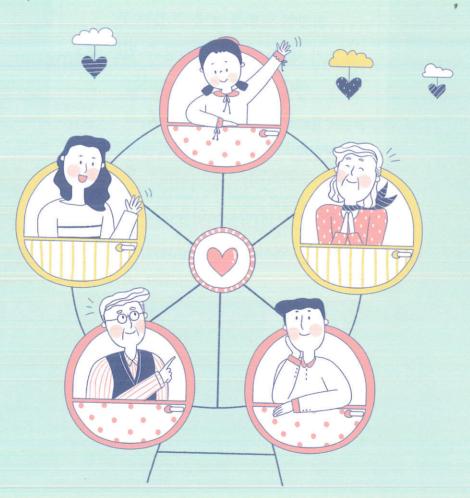


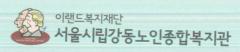
QR코드를 스캔하시면 본 복지관의 홈페이지로 이동합니다.

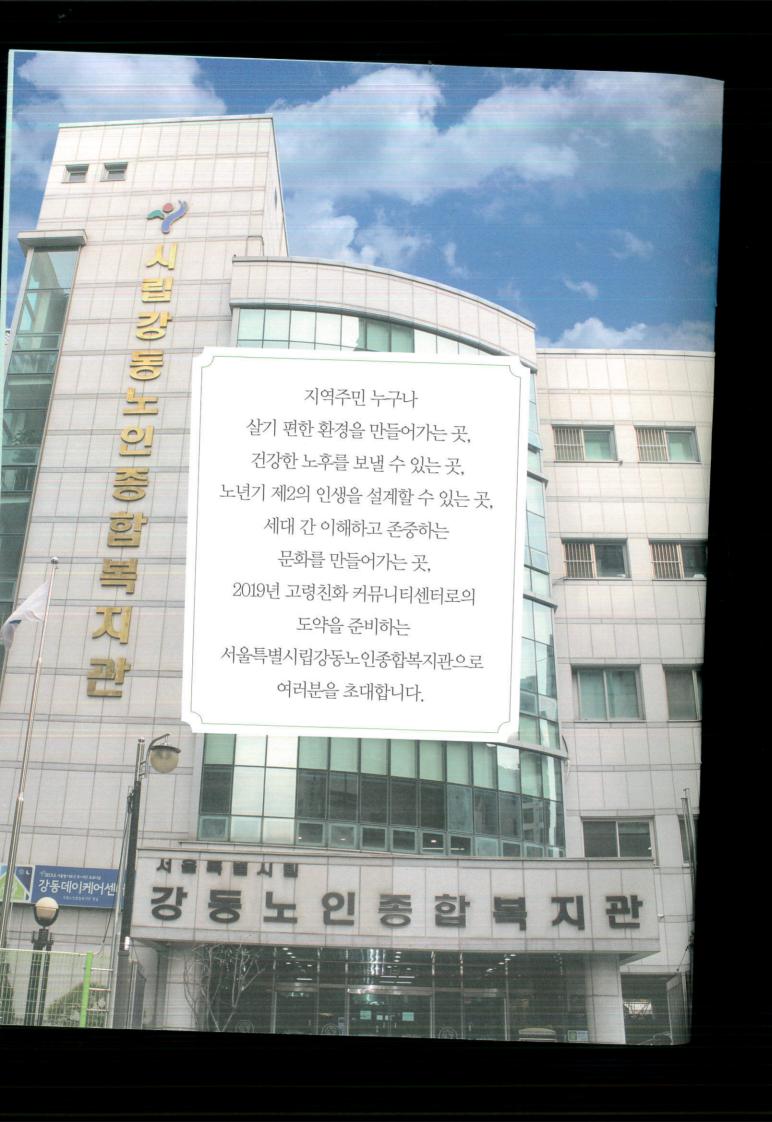


세대가 공존하는 고령친화 지역사회를 만듭니다.















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행복한 동행 vol.44

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Aging in place를 위해 복지관이 함께 합니다!

aging in place _ 노인이 자신이 살아온 집이나 지역사회에서 벗어나지 않고 여생을 보내는 것

커뮤니티케어, 돌봄 SOS 센터 등 최근 우리나라는 돌봄의 국가 책임에 대한 정책들이 시작되고 있습니다. 우리 복 지관도 작년 고객조사를 통해 정서, 건강문제에서 취약한 지역 내 어르신을 위한 지원체계의 필요성을 더욱 강하게 체감하고 지역사회 통합 돌봄, 건강돌봄 사각지대 지원, 그리고 고위험군 독거어르신 지원을 통해 촘촘한 사회적 돌 봄망을 구축하고 있습니다.

사례관리팀 강규혜 팀장

마음 돌봄

행복을 만드는 아름다운 동행

우울, 자살 등의 위험에 노출된 독거어르신을 대 상으로 동 단위 16개 마을공동체를 구성(동 주민 센터, 보건소, 종교단체 등 협조)하여 사회적 지지 체계를 형성함으로 어르신의 우울감과 자살생각 을 낮추는데 기여하고 있습니다.

독거노인 친구만들기사업

강동구 독거어르신에게 믿고 의지할 수 있는 친구를 만들어주고, 우울증 경감과 고독사 및 자살예 방을 위한 상호돌봄체계를 구축하기 위해 독거노 인친구만들기사업을 시작하였습니다. 은둔형 어르신을 발굴하고 우울증 치료지원, 개별사례관리, 집단활동 프로그램, 자조모임 등을 제공함으로 어르신이 지역에서 안전하고 건강하게 생활할 수 있도록 지원하고 있습니다.







시니어건강충전교실

신체체력검사를 통해 선정된 허약 또는 전허약군 어르신을 대상으로 적절한 영양관리, 재활운동 등 포괄적 건강위험요인 관리를 통해 참여자의 운동 영역(근육량, 악력), 건강영역(인지기능, 우울감), 영양영역(영양위험도) 세 가지 영역에서 모두 긍 정적인 변화를 발견하는 성과를 보였습니다.



맞춤형 영양관리 식사배달사업

'서울시 저소득 어르신 식사배달 시범사업'의 일환으로 지역 내 식생활이 불안정한 어르신 45명에게 고혈압, 당뇨, 섭식 및 신장기능 등 노인성 질환을 중심으로 한 건강과 영양상태를 분석하고 영양사와 사회복지사의 체계적 모니터링 및 맞춤형 식사배달을 통해 건강증진을 도모하고 있습니다.



가득찬(饌) 밥상

서울시노인종합복지관협회와 사회복지법인 동행 복지재단 연계 지원으로 건강한 식생활 유지가 어 려운 저소득 독거어르신 30명을 대상으로 노인 영 양 적합식단으로 구성된 밑반찬 정기 지원을 통해 영양상태를 개선하고, '오붓한 겸상' 프로그램을 통 해 월 1회 식사공동체 형성으로 사회관계망을 유 지하도록 돕고 있습니다.



독거노인 현황 전수조사

2/18~3/18 한 달 간, 강동구 거주 만 65세 이상 독 거어르신 8,579명을 대상으로 실제 독거 유무와 생활실태(주거환경, 사회관계, 건강상태) 등을 조 사하였습니다. 이 중 독거어르신 돌봄 지원 서비스 가 필요한 1,200명을 선정하여 안전확인, 생활교 육, 서비스 연계로 사회적 돌봄 안전망을 구축하고 있습니다.

참여

관계할 參 같이할 與 _ 어떤 일에 관계하여 같이함

55세 이상 고령자 66%, "일하기를 원한다." 어르신 10명중 8명, "1개 이상의 사회활동에 참여하고 있다." , <2018 통계청, 고령자통계>

통계청(2019)에서 조사한 대한민국의 기대수명은 82.7세로 2009년 처음 80세를 넘은 이후 지속적으로 증가하면서 정년 이후 또는 노인세대로 진입 이후의 삶이 점차 중요해지고 있습니다.

"내가 노인이 되면 무슨 일을 해야 할까?"



우리 복지관은 어르신의 새로운 삶, 멋진 인생 2막을 위한 다양한 사회참여 활동을 지원하고 있습니다.

고령자취업알선사업



"취업의 문을 열어드립니다!"

우리 복지관 취업알선사업에서는 55세 이상 취업을 희망하는 서울시민 누구나 무료로 일자리를 알선하고 있습니다. 취업 상담부터 알선까지, 그리고 취업 이후의 사후관리를 통해 6월까지 총 169명의 어르신이 취업에 성공하여 새로운 인생2막을 열고 있습니다.

노인사회활동지원사업



"열정을 가지고 활동하면서 삶의 활력도 생겼어요."

2019년 2월부터 노인사회활동지원사업 총 8개 사업단, 620명의 어르신이 각자의 자리에서 열심히 활동하고 있습니다. 독거어르 신 안부확인, 도시락 배달부터 지역내 공공시설봉사, 전통 등공예 활동까지 다양한 공익활동에 참여하면서 지역사회 도움의 손길 로 기여하고 있습니다.

시시콜콜 시니어봉사단





"무엇이든 알려드립니다!"

시시콜콜 봉사단은 지역사회 정보에 취약한 어르신의 복지정보 접근성 향상을 위해 다양한 활동을 하고 있습니다. 정확한 복지정보를 지역주민에게 전달할 수 있도록 월1회 전문교육을 진행하고 있으며, 대학생 현장매니저와 함께 지역사회 곳곳을 찾아가 복지정보를 전달하고, 필요한 서비스를 연계하고 있습니다. 이외에도 각자의 경험과 재능을 지역사회에 나누기 위해 풍선아트부터 문화공연까지 총 15개의 봉사대로 이루어진 위캔시니어봉사단을 운영하고 있습니다.

지역사회에서 자원봉사활동부터 경제활동까지 다양한 모습으로 활약하고 있는 어르신들을 응원합니다. 우리 복지관은 어르신이 건강하고 활기찬 노후를 보낼 수 있는 지역사회를 만들기 위해 노력하겠습니다.

세대 간 함께하는 **공감** 만들기

글 지역협력팀 이상윤 팀장 지역상담팀 김시온 사회복지사

세대교류 협약식

지역사회 청소년과 어르신들과 의 관계를 지속하고 협력을 강화 하기 위해 2019년 4월 29일 한 영고등학교와 세대교류를 위한 협약을 체결하였습니다. 고령친 화 지역사회 조성을 위해 진행한 이번 협약을 통해 앞으로도 함께 변화를 이끌어 갈 모습을 기대합 니다.



우리 복지관은 다양한 세대통합 사업을 수행하고 있습니다.

먼저 지역주민이 노년에 대해 올바르게 이해할 수 있도록 도움으로써 고령친화 지역사회 조성의 발판을 만드는 세대공감학교를 운영 중에 있습니다. 세대공감학교는 고령사회와 노화, 어르신의 특성에 대해 이해하고, 노인의 사회적 역할, 지역사회의 변화를 위한 노력에 대해 깊이 있게 논의하는 시간들로 구성되어 있습니다. 2019년 총 8기의 프로그램이 운영되었고, 227명의 지역주민이 참여하였으며 133명이 수료하였습니다. 수료한 일부 주민은 꾸준하게 어르신과 함께 소통하고 돕는 활동을 복지관과 함께하고 있습니다.





또한 어르신과 지역주민이 함께 <강동마을소식> 신문을 발간하고 있습니다. 올해로 10번째 발간되는 마을신문은 지역 내 어르신과 청소년이 교류하고, 소통하며 소소하고 따뜻한 마을의 이야기를 담아내고 있습니다. 2019년 3월 오리엔테이션을 시작으로 상반기에는 신문에 담아낼 이야기를 논의하는 목차회의와 자조모임, 노년에 대한 올바른 이해를 돕는 세대공감학교를 진행하였습니다. 현재는 이를 바탕으로 하여 고령친화 지역사회를 만들기 위한 유니버셜 디자인 적용하기, 세대공감을 위한 소통 등을 주제로 한 취재가 이루어지고 있습니다. 세대가 공존하는 고령친화 지역사회를 만들기 위해 어르신과 지역주민이 함께 만드는 강동마을소식. 올해하반기에 나올 강동마을소식에는 어떠한 이야기들이 담겨있을지 기대가 됩니다.









나눔 NEWS

택집의 특별한 감사 나눔

우리 강동구 어르신들을 위해 2013년도부터 지금까지 나눔으로 동행하고 있는 특별한 떡집 두 곳이 있습니다. 그 주인공은 바로 길동에 위치한 '형제떡집'과 암사시장에 위치한 '명문떡집'입니다. 이 두 곳의 사장님은 남매입니다. 남동생의 나눔이 누나에게까지 흘러 함께 나눔에 동참하고 있습니다. 형제떡집의 동생사장님은 "작은 나눔이지만 기쁘고 맛있게 드셔주셔서 너무 뿌듯하고 감사하다. 지금 경기가 어려워 많이 지원하지 못하고 있지만, 잘 되면 그만큼 더 나누고 싶다."고 하셨고, 명문떡집의 누나사장님은 "동생의 권유로 나눔을 시작하게 되었는데, 나누면 나눌수록 뿌듯하고 행복하다. 앞으로 더 나누고 싶다. 마음 같아서는 시장에 있는 모든 가게에게 참여하자고 독려하고 싶지만, 어려운 상황을 알기에 그렇게 못하는 것이 너무 안타깝다."라며 마음의 소리를 나누어주셨습니다. 함께 걷고 계신 나눔가게 사장님들의 귀한 나눔에 진심으로 감사드리며, 앞으로의 아름다운 시간도 함께 기대해봅니다. 감사합니다.

지역협력팀 박한울 사회복지사

나눔가게 동참 업체 43개 업체

낙원떡집, 신선설농탕(길동점), 케익하우스 이삭, 큰마루, 파리바케트(암사양지점), 그린반찬, 형제떡집, 명문떡집, 지도리치킨, 59쌀피자(굽은다리역점), 제일떡집, 치킨마루(강일점), 나주곰탕, 파지스쿨(명일점), 유경정육점, 빠네렌토, 놀부부대찌개(고덕역점), 찬Plus카페, 신촌설렁탕(명일점), 김가네(고덕점), 만나김밥, 라베이크, 종로떡집, 홍짜장명일점), 민속떡집, 지혜네 반찬, 방가네 남원추어탕, 전주한식부페, 농우축산, 크린토피아(명일LG점), 따뜻한 밥상, 행복반찬, 정춘자왕코다리찜, 지현이네 반찬, 수아영, 청년식탁, 민속김밥, 양자강, 한꼬집, 신의주찹쌀순대(고덕역점), 고향집 손칼국수, 서울 마남죽, 돈가



사진으로 보는 현장 NEWS



2019년 경로당 협약식 및 상반기 임원진 간담회



우리동네 같이 배움터 봉사단체 연합발대식



제16회 강동카네이션 축제



사랑의 도시락을 전하는 어떤버스



행복건기 후마네트 운동교실



분노조절집단상담프로그램 '사.이.다(사랑과 이해로 다정하게)'



배재중학교와 함께하는 어썸학교



여름맞이 단오축제



인지건강프로그램 '아주 특별한 미술수업'



지역사회 노인학대예방 및 인권증진 캠페인



제이케이미래(주)와 함께하는 어르신이 안전한 주거환경 조성사업 지원



찾아가는 운영간담회 '스포츠센터 편'



시립강동노인복지관 데이케어센터 식물매개 프로그램 '소소한 일상'



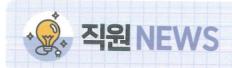
강동치매요양원 효사랑감사나눔축제



복지관 및 데이케어센터 1, 2분기 운영위원회



요양원 1, 2분기 운영위원회



2019년 상반기 신입 직원

강동노인종합복지관의 새로운 가족이 되신 직원들을 모두 환영합니다.

- 1. 김현철(복지과장)
- 2. 강진주(돌봄서비스관리자)
- 3. 이은주(돌봄서비스관리자)
- 4. 손주현(맞춤복지사례관리자)
- 5. 이은정(독거노인친구만들기 사회복지사)
- 6. 이정표(노인일자리 전담인력)
- 7. 최준현(노인일자리 전담인력)
- 8. 김은영(노인일자리 전담인력)
- 9. 박지영(노인일자리 전담인력)
- 10. 곽채은(저소득맞춤형식사배달사업 영양사)

수상을 축하합니다

어르신이 행복한 세상을 만들기 위해 세상의 빛과 소금된 사명을 감당 한 직원의 수상을 축하합니다.

강동구청장상 - 어르신 복지 증진	김은지 사회복지사
강동구청장상 - 어르신 복지 증진	최정지 생활관리사
강동구청장상 - 어르신 복지 증진	임금란 생활관리사
강동구청장상 - 어르신 복지 증진	장순자 조리보조원
강동구청장상 - 노인인권보호 기여	김주희 사회복지사
	강동구청장상 - 어르신 복지 증진 강동구청장상 - 어르신 복지 증진 강동구청장상 - 어르신 복지 증진



2019년 이랜드 비영리법인 출정식

2019년 1월 3일(목) 마포노인종합복지관 대강당에서 이랜드복지재단 및 서울지역 산하 복지관 연합 출정식이 진행되었습니다. 승진식 및 2018년 우수직원에 대한 포상과 2019년 경영계획을 공유하며 기관 전 직원 모두가 함께 한해를 출발하는 시간이 되었습니다.

우수직원 김현정 대리, 김주희 사회복지사

우수지식상 박선자 대리, 이상윤 대리, 김주희 사회복지사

승진자 전성민 대리

헌신직원 이민영대리



2019년 이랜드복지재단 우수직원 해외연수

2019년 5월 27일(월)~30일(목)(3박4일간), 이랜드복지재단 우수직원 해 외연수가 진행되었습니다. 우리 복지관 김현정 대리, 김주희 사회복지 사가 참석하여 쉼과 재충전의 시간을 보내고, 중국 CSR현장방문을 통 하여 중국내 장학사업에 대해 살펴볼 수 있는 기회가 되었습니다.





직원 MT

2019년 6월 18일(화)과 26일(수) 양일간, 가평 쁘띠프랑스로 직원 MT를 다녀왔습니다. 이번 MT는 이랜드복지재단에서 2018년 노인복지 관 평가 준비로 수고한 직원들을 격려하기 위 해 지원되었습니다. 업무에서 벗어나 자연 속 에서 동료 간에 서로를 좀 더 알아가며 친목을 다지고, 재충전을 하는 시간이 되었습니다.

우리복지관 TF팀을 소개합니다!

직원역량강화팀

하고 있습니다. 직원역량강화를 통해 복지관이 지역사회



유튜브팀



운영을 담당하고 있습니다. 우리 복지관 유튜브 채널은 세대 간 이해하고 공감할 수 있는 다양한 컨텐츠를 통해 영상촬영 및 편집까지 각자의 역량에 따른 역할 분담으 및 소품을 담당하는 솔애눈 등 팀원들 각자의 별칭을 지 어 활동하고 있습니다. 유튜브채널 [양갱티비]를 매개로 대중이 공감하고 소통할 수 있는 컨텐츠를 통해 지속적으



자원봉사자 / 후원자

아름다운 손길

자원봉사자(2019 상반기)

기업 및 단체

E-Well서포터즈 11기 LG전자 Life Good 봉사단 MBK장학재단 대학생봉사단 SK. Sunny 봉사단 WECAN시니어봉사단 강동고등학교 강동구도시관리공단 강동구새마을부녀회 강동구소방서 성내의용소방대 강동온누리교회 고덕동 성당 고덕중학교 광문고등학교 국민연금공단 강동송파지사 국민연금공단 장애심사센터 국민체육진흥공단 금비봉사 단 길동성당 나눔의묵상회 대한적십자봉사회 강동지구협의회 동북고등학교 동신중학 교 맘애포터 가족봉사단 명일여고봉사단 누리 명일여자고등학교 '누리' 미래에셋생명 배재중학교 3학년 뷰파인더로 비라본 따뜻한 세상 사랑나눔협회 사랑제일교회 삼성물 산 시스템그룹 상일여자고등학교 색소폰연주동아리 샤프론 프론티어 강동지구 서울영 동교회 서울이랜드FC 서울컨벤션고등학교 성덕고등학교 신한생명 어떤버스프로젝트 우리은행 정보보호부 웃자배기봉사단 은평교회 이랜드그룹 임직원 이마트 명일점 이 마트 본점 전인기독학교 청정원주부봉사단 서울동부팀 틈새봉사단 풋사과봉사단 학원 연합회 송파지회 한국체육대학교 한영고등학교 한영외고 세빛또래봉사단 한영중학교 한울림라이온스클럽

후원자(2019 상반기)

기업 및 단체

(사)나눔축산운동본부 (주)다담푸드 (주)쿠드신선설농탕 (주)국민은행고덕역지점 (주)이랜드리테일 CGV천호 강동경찰서 강동구 강동전통식연구회 대상주식회사 대한예수교 장로회다운교회 독거노인종합지원센터 동행복지재단 라벨라오페라단 명일여고누리봉사단 미래에셋생명 배움터지역아동센터 배재중학교 사랑나눔협회 사회복지공동모금회 삼성물산 상일동주민센터 서울교통공사 서울시노인종합복지관협회 서울시사회복지관협회 서울영동교회 성내종합사회복지관 신한생명 아이들과미래 에스원강동지사 오금고등학교 오빌교회 온누리약국복지회 올치과 이랜드복지재단 이랜드월드 이랜드재단 이랜드클리닉 인천국제공항공사 제이케이미라주식회사 조은마디병원 좋은나무교회 주거복지재단 주식회사뉴본월드 주식회사청일 ㈜알진인터내셔날 참좋은약국천주교서울대교구길동성당 치쿠시교가쿠엔대학 코원에너지서비스 파나소닉코리아주식회사 페이펄문구센터 프로스테믹스 하나이비인후과 하이트진로 한국노인종합복지관협회 한국마사회강동지사 한국전력공사 한국주택금융공사 한국체육대학교 한영외국어고등학교 해마로푸드서비스(주) 해피빈

나눔가게

59쌀피자굽은다리역점 고향집칼국수 국민일보 그린반찬 김가네김밥고덕점 나주곰탕 낙원떡집 놀부부대찌개 농우축산 돈가 동아일보 따뜻한밥상 라베이크 만나김밥 명문 떡집 민속김밥 민속옛떡 방가네남원추어탕 빼네렌토 서울마님죽 수아영 신선설농탕길 동점 신의주찹쌀순대고덕역점 신촌설렁탕명일점 명성안경원 양자강 원주추어탕 유경 정육점 케익이삭 전주한식부페 정춘자왕코다리능이오리백숙 제일떡집 조선일보 종로 떡집 중앙일보 지도리치킨 지현이네반찬 지혜네반찬 찬마迟반찬카페 청년식탁 축산나라 크린토피아명일LG점 큰마루 파리바게트고덕역점 파리바게트암사양지점 피자스쿨 고덕점 한꼬집 한우촌돼지마을 행복반찬 형제떡집 흥짜장

개인



2019년 자원봉사자 신규등록현황

총인원	1월	2월	3월	4월	5월	6월
874명	128명	68명	173명	169명	194명	142명

자원봉사자 활동현황



분야별 자원봉사자 활동 현황



생활지원 (경로식당, 이미용서비스) 3,250건



지역사회대상 봉사활동 (경로당, 캠페인, 행사지원 등) 1,430건



교육지원 및 전문활동 1,815건



단순업무보조 및 환경개선 364건



정서지원 47건

YouTube

강동노인종합복지관 유튜브채널 양갱EIII

우리 복지관 어르신과 직원이 함께 만들어나가는 세대공감 방송! 다양한 세대가 공감할 수 있는 내용으로 매주 영상이 게시될 예정이오니, 즐겁게 시청해주세요~



구독과 좋아요 많은 시청 바랍니다.

☑ 영상시청 방법

유튜브 검색창에서 양갱티비 검색

양갱티비 채널클릭



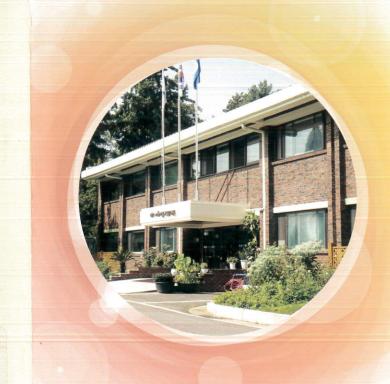
양갱티비

채널 입장 후 영상 시청



우리가 반드는 사람이 얼구나의

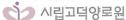
시립고덕양로윈



서울가톨릭사회복지회



******서울특별시립



운영법인 소개

시립고덕양로원은 사회복지법인 서울가톨릭사회복지회가 서울시로 부터 위탁받아 운영하는 어르신 생 활시설입니다.

사회복지법인 서울가톨릭사회복지회

서울가톨릭사회복지회는 한국카리타스의 일원으로 서울 내 가톨릭사회복지활동을 대표하고 국내 가톨릭사회복지활동 을 총괄합니다. 또한 전국 차원의 조정과 협의를 통해 해외 원조, 대북지원사업을 수행하고 있습니다.

서울가톨릭사회복지회에는 약 270여개의 사회복지 단체가 등록되어 있으며, 서울지역 내 230여개 본당과 연계하여 사회복지활동을 하고 있습니다.

카리타스란?



카리타스(CARITAS)는 '사랑, 애덕, 자선' 이라는 뜻의 라틴어로, 하느님과 이웃에 대한 사랑을 의미합니다. 또한 가난하고 고통받고 소외된 이들을 위한 가톨릭교 회의 공식 사랑실천 가구 이름이기도 합니다.

Mission

우리는 어르신의 편안하고 행복한 노후를 응원합니다!

Vision

우리는 2021년까지 99% 어르신이 만족하는 행복한 보금자리를 만든다.

Core Value









시설개요

○ 설립주체 서울특별시

○설립일자 1969.6.4.

○ 운영법인 사회복지법인 서울가톨릭사회복지회

○ 소 재 지 서울시 강동구 고덕로 199 (고덕1동 317-23)

원 124명

모 대지 21,804m²

건물 3.573m² (본관 2,513m²/별관 및 기타 1,059m²)

시설안내

1층 원장실, 상담실, 사무실, 회의실

2층 생활복지실, 의무실, 물리치료실, 체력단련실, 식당, 목욕실, 마음의쉼터, 사랑방, 생활실

3층 생활실, 사무실, 이 · 미용실, 목욕실, 쉼터

1층 다용도실, 체력단련실, 당구장, 모래놀이실, 프로그램실, 도서실, 세탁실

2층 강당, 자원봉사자실





01 통합사례관리

초기사정, 욕구사정, 사례회의

02 일상생활지원

위생관리, 시장보기, 어르신 생활나눔회의

03 기능회복 프로그램

치매예방, 재활서비스

04 사회서비스

나들이, 여가지원, 종교활동, 절기행사, 동아리자치활동(도서, 게이트볼, 당구, 숲뜰사랑, 뜨개질, 환자방문, 연령회, 전례단), 상담프로그램(초기,중기,심화,모래놀이), 가족지원프로그램









05 입소어르신 권리강화

만족도 조사, 어르신 간담회, 대표 어르신 회의

06 식사서비스

급식관리, 환경위생관리

07 지역사회자원 개발

후원자 · 자원봉사자 개발 및 관리사업, 지역연계사업(지역주민 초청)

08 건강지원

건강관리, 건강증진, 질병예방, 호스피스, 간호 및 기타 관리, 물리치료





입소안내

구분	입소대상	입소절차	구비서류	입소비용
무료입소	서울시 거주 65세 이상『국민기초 생활수급권자』로 일상생활이 가능 하신 분	거주지 동 주민센터에 시설 입소신청 →거주자관할구청 접수 →강동구청 접수 -양로원 입소의뢰 공문접수 입소면담 실시 입소판정 회의 입소여부 확정	 수급권자 증명서 가족관계증명서 주민등록등본 건강진단서 (보건소) 	무료
실비입소	서울시 거주 65세 이상 「도시근로자 평균소득이하』로 일상생활이 가능 하신 분	구비서류 준비양로원에 입소면담 신청입소면담 실시입소판정 회의강동구청 심사입소여부 확정	· 건강보험납부확인서 (건강보험공단) · 소득금액증명원 (세무서) · 가족관계증명서 · 주민등록등본 · 건강진단서 (보건소)	· 월 449,300원 (2016년기준) · 보증금 (월입소비용 1년분)

입소상담 문의: 02)441~8886~7 (내선번호 1번)

찾아오시는 길



🚽 지하철

5호선 상일동행 명일역 3번 출구, 고덕역1,2번 출구 (배재고등학교 정문방향으로 10분거리)

四 버스

지선(녹색)버스 3412번 서울장애인종합복지관 하차 간선(파랑)버스

340번 서울장애인종합복지관 하차 공항버스(인천공항) 6300번 배재중고등학교 하차

자가용 이용

올림픽대로 암사선사유적지 방면으로 진출 ▶ 명일 사거리 방향으로 직진



후원 안내

- 정 기 후 원 매월 정기적으로 일정금액을 후원
- ■일 시 후 원 비정기적으로 일정금액을 후원
- 물 품 후 원 생활용품, 식품(어르신 간식) 등 다양한 물품을 후원
- 기업 · 단체후원 기업이나 단체의 상황에 맞는 다양한 형태의 후원
- 타 양로원 직접 납부

THE 자동이체 및 온라인 송금 시



우리은행 164-05-013830 국민은행 085-01-0344-781 예금주 시립고덕양로원

※기부하신 후원금·품에 대해서는 세액공제용 기부금영수증을 발급해드립니다.

자원봉사 안내

- ▶ 력 봉 사 어르신 숙소, 시설 내·외부 청소, 동산 환경 정비, 주방봉사, 행사 지원 등
- 의 료 봉 사 한방진료, 의료관련 서비스 등
- 🥊 공 연 봉 사 악기연주, 사물놀이, 난타, 춤, 합창단 등
- 프로그램봉사 여가프로그램 진행 및 보조(포크댄스, 노래교실, 요가 등), 정기 이미용 봉사(커트, 파마, 염색)

후원금 · 품 영수증, 자원봉사 관련 문의는 02)441-8886~7 행정관리팀(내선번호 1번)으로 전화주시기 바랍니다.

대사증후군이란?

복부 주위에 지방이 붙은 내장지방형 복부비만과고혈압,고혈당,지질이상 같은 생활습관병의위험인자를 같이 가지고 있는 상태를 말합니다. 대사증후군이 있을 경우에는 동맥경화를 진행시키고,최종적으로는 뇌경색이나 심근경색과 같은생명과 관련된 심뇌혈관질환의 발병위험도가급격히 증가됩니다.

대사증후군 로 프로젝트

5가지 즐거운 건강체

★ 대사증후군 진단기준

허리둘레

남자: 90cm이상, 여자: 85cm이상

혈압

130/85mmHg 이상이거나 고혈압치료제 복용

공복혈당

100mg/dl 이상이거나 제2형 당뇨병 치료제 복용

HDL-콜레스테롤

남자 40mg/dl 미만, 여자 50mg/dl 미만이거나 치료제 복용

중성지방

150mg/dl 이상이거나 치료제 복용

(NCEP ATPIII 기준) 위 5가지 중 3가지 이상이면 대사증후군으로 진단

강동구보건소와 함께하는 즐거운 건강체크

대상 20세이상성인

- ▶ 내용 대사증후군관리, 고혈압·당뇨병·이상지질혈증 등 예방관리
- 건강측정: 허리둘레, 혈압, 혈당, 중성지방, 좋은콜레스테롤(HDL), 체성분 등
- 의사상담, 영양상담, 운동상담, 구강상담, 금연상담, 치매선별검사 등
- 운동교실, 영양교실 운영
 - ※ 검사하실 분은 12시간 이상 금식
- ※ 질환별견 시 가까운 병·의원으로 연계

국민건강보험공단에서 실시하는 건강검진에는 대사증후군검사가 포함되어 있습니다. 결과지를 가져오시면 별도의 검사 없이 대사 증후군건강상담 및 관리를 받을 수 있습니다.

- ▶ **시 간** 월~금요일 오전 9시 ~ 오후 5시
- ▶장소

건강100세 상담센터	주소	전화번호
천호1동 주민센터 내	구천면로42길 59 (천호동)	☎02-3425-7699
천호2동 주민센터 내	올림픽로 698 (천호동)	☎02-3425-7716
천호3동 주민센터 내	진황도로23길 7 (천호동)	☎02-3425-7748
성내2동 주민센터 내	풍성로37가길 62 (성내동)	☎02-3425-7809
성내3동 주민센터 내	강동대로53길 76 (성내동)	☎02-3425-7839
길 동 주민센터 내	명일로 299-1 (길동)	☎02-3425-7870
둔촌1동 주민센터 내	양재대로84길 31 (둔촌동)	☎02-3425-7899
둔촌2동 주민센터 내	천호대로186길 7 (둔촌동)	☎02-3425-7939
암사1동 주민센터 내	올림픽로98가길 57 (암사동)	☎02-3425-7599
암사2동 주민센터 내	상암로3길 28 (암사동)	☎02-3425-7636
암사3동 주민센터 내	고덕로 137 (암사동)	☎02-3425-7659
명일1동 주민센터 내	양재대로138길 37 (명일동)	☎02-3425-7489
명일2동 주민센터 내	상암로 260 (명일동)	☎02-3425-7509
고덕1동 주민센터 내	양재대로156길 123 (고덕동)	☎02-3425-7539
고덕2동 주민센터 내	아리수로78길 42-12 (고덕동)	☎02-3425-7569
상 일 동 주민센터 내	고덕로80길 111 (상일동)	☎02-3425-7459



★ 혈압, 혈당, 고지혈증 무료측정안내

장소: 고덕1동 주민 센터(동사무소)

대상: 강동구 주민 **2**0세 이상 무료 혈압, 혈당측정: 매일 9시-5시

고지혈증측정: 측정전날 밤 9시부터 금식

강동구보건소

다음날 아침 9시~오전중 방문 ** 체지방측정: 매일 오후 식이상담, 운동처방 실시함. 강동구보건소에서 파견근무함 문의전화: 3425-7539

시리즈 2

「대사증후군 알기」



대사증후군 관리는 생활습관개선부터

바다위에 3개의 빙산이 떠있는 것처럼 보이지만 사실은 빙산이 해면밑에서 붙어 있으며 꼭대기만이 바다위에 나타나 보입니다. 대사증후군은 마치 이러한 상태입니다. 약으로 치료해서 각각의 정상을 깎아 내리는 것보다 근본적인 해결을 위해 생활습관개선을 하는 것이 중요 합니다.



생활습관을 개선하자

균형잡힌 식생활 규칙적인 신체활동 절주·금연 스트레스 관리

생활습관고치기





- 수면은 5시간으로 수면부족이 계속되고 있다
- 직장까지 도보로 10분정도 인데 자가용을 이용 한다
- ◎ 점심식사는 뷔페등으로 빨리 먹는다
- ◎ 휴일은 집에서 뒹굴뒹굴 논다
- ◎ 최근 살이 쪘어? 라고 들었으나 자신은 잘 모른다
- 귀가 후 심야방송 등을 연달아 보고 새벽 2시경에 취침 한다





개선된 하루

- 하루 7시간 정도의 수면을 취하자
- 가까운 곳은 걸어서 다니자
- 스트레스는 식욕중추를 자극하므로 스트레스가 쌓이지 않게 하자
- 빨리 먹는 습관을 고치자
- 휴일에나 업무 후에는 취미생활이나 운동을 하자
- 자신의 체중이나 허리둘레는 꼼꼼히 체크하자
- 규칙적이고 바른생활을 하자

대사증후군이 일어나는 구조

과식이나 운동부족 등 건강하지 못한 생활습관

내장지방의 축적

나쁜 생리활성물질의 분비증가 좋은 생리활성물질의 분비감소

고혈압

고혈당

이상지질

동맥경화

심장병, 뇌졸중, 당뇨병합병증 등 발병

생활기능의 저하, 와병, 사망



邮路老人福利院



运营现况

No.1 of the new elderly culture along with the local community



机关介绍



位置 钟路区 栗谷路 17路17-8

规模 地上5楼

位置钟路区统一路14路30

规模 地上5楼

本馆

面积 4,795,13m

在职人员 10,016人

在职人员 1,043 人

舞音中路子心

面积 767,95m

舞蹈音乐中心

群 田 子 中 六 中 心

• 地域组织 • 老人社会化

• 敬老餐厅

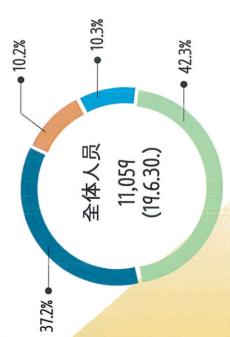
• 敬老餐厅

• 会计



年龄使用现状 性别使用现状





4,152 37.6% MEN

6,407

62.4% women

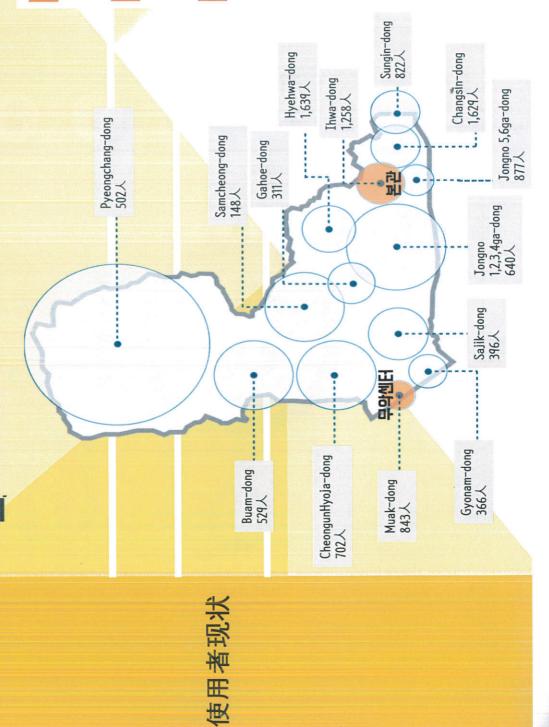
年龄使用现状

- 69 09
- 70 79
- 80 89
- Over 90

性别使用现状



Members by Dong(district of Jongno-gu) Users by Programs



中路

152,880 [首尔人口 1.5%]

干的名09

37,751 [老人人口比例 24.6%]

福利官会员

11,059 [60岁以上老人对比 28.7%]

- 敬老堂 61会所
- 送外卖 53人
- 単身老人 安全检查 534人
- 志愿者 17,422人
- 分享店 (Sharing Store) 17
- 协议机关 87

/ MISSION & VISION

和地方一起开展文化中心1

No. 1 of the New Elderly Culture along with the Local Community

An Open and Interactive Welfare Center



Hub of Senior Welfare Service Delivery System in the Local Community

2013 along with the local community" "No.1 of the new elderly culture 2009 2007 / History

0verview

∞

Appointed as the Institution that Provides Counselors who Support Senior Citizens who Lives Alone

Beautiful Neighbor, Seoul Stepping Stone Project, Main Center

Certified the Best Social Welfare Voluntary Work Center

Designated as the Online Education Center for Opening Business

Senior Band 'Sang-Sang(Imaginative) Band'

Received Certification of 'Social Welfare Center' by the Seoul Welfare Foundation Management

Foundation of a Theater Group 'Palaeteo(A Wash Place)'

Opening of a Plus Cafe(Senior Cafe) in Jongno-district Office 'An Alley with Commentators' received Commendation for the Best Program in Seoul

'An Alley with Stories' selected as Ministry of Health and Welfare

2015 along with the local community" "No.1 of the new elderly culture 2014 / History

Winning Bronze Prize, Chungho-Buddhist Cultural Event 'An Alley with Stories'

Sponsorship by Ministry of Health and Welfare 'Making Friends with Senior Citizens who Live Alone'

Opening an Annex, Muak Center

the Korean Horse Affairs Association Developing self-esteem, Academy of Humanities, 'Sanorameon(Somedays)'

Community Chest of Korea, Samsung Group, Support Project, Opening Byeol Byeol (Star Star Star) Library

Confident Senior, 'Bounce, Bounce' (Piccadilly Theater, ColaTek) Seoul Excellent Program 'City Farmer Volunteers'

Jongno-gu, 'Jongno&Jangguemee' Community Involvement Participative Budget The First Jongno Jang Festival(In Marronnier Park)

The First Seoul Senior Theater Festival, 'Youth, Again' Extension Groundbreaking Ceremony

History

"No.1 of the new elderly culture along with the local community"

2016

The Federation of Korean Cultural Center Project 'Jang Cafe Operation Project for Jongno Culture'

the Korean Horse Affairs Association 'Chan Chan Together Project, vibrant, hopeful and full' Opening of 'Senior 100 years old Healing Center'

Jongno-gu Community Center

The Federation of Korean Cultural Center Jang Cafe & Jang Experience Center

2017

Opening of 'Plus Cafe' in Marronnier Park

Opening of 'Plus Cafe' in Jongno Senior Welfare Center

the Project for Activation of the Senior Culture 'Hello, Dream'

the Project for Activation of the Senior Culture

The Second Seoul Senior Theater Festival, 'Remember, Youth'

along with the local community" "No.1 of the new elderly culture 2018 / History

The Federation of Korean Cultural Center
'Jang Cafe Operation Project'

the Project for 'Village Community'

Democracy Academy, 'Citizens, Talk about Democracy'

the Project for 'Confession for Happy Closing'

the Project for Activation of the Senior Culture
'Stage for Dream'







Korea - Taiwan

Healthy City Forum

Healthy City Research Center, Yonsei University - Alliance of Healthy Cities, Taiwan

September 24th (Tue), 2019 543 Baek-Un Hall, Mirae Campus, Yonsei University

Organization: Healthy City Research Center, Institute of Health and Welfare, Yonsei University Supported by LINC+ Wonju Industry-Academic Cooperation Foundation, Yonsei University





Korea - Taiwan Healthy City Forum



Healthy City Research Center, Yonsei University - Alliance of Healthy Cities, Taiwan

Objective of Forum

Healthy City Research Center of Yonsei University is aiming to contribute to improving health of the elderly in rural area by conducting community care research and establishing a network with community stakeholders. This forum is to share healthy city cases with Alliance for Healthy Cities, Taiwan to find a healthy city model. In particular, we would like to share information on social prescribing system, which is a new project model for health cities in the UK.

Introduction

- O Supported by LINC+ Wonju Industry-Academic Cooperation Foundation, Yonsei University
- Organization: Healthy City Research Center, Institute of Health and Welfare, Yonsei University
- O Date / Time: September 24th (Tue), 2019 / 15:30-20:00
- O Venue: 543 Baek-Un Hall, Mirae Campus, Yonsei University
- O Participants

Organization	Number of Participants
Alliance of Healthy Cities, Taiwan	2
Department of Health, Government of 4 Cities (Taoyuan, Tainan, Keelung, Taipei) in Taiwan	15
Healthy City Team of Wonju City Government	3
Administration and Welfare Center of Heung-up Myeon, Wonju City	7
Wonju Urban Regeneration Support Center	5
Healthy City Research Center, Yonsei University	10
Total	42

Program Schedule

Time	Program	Presenter	
	yeon Jo (Senior Researc		
15:30 - 15:35	Welcome Address	Director, Eun Woo Na	
13.30	welcome Address	(Yonsei Univ.)	
	Greeting	Vice President,	
15:20 15:40		Dr. Hung Te-Jen	
15:30 - 15:40		(Alliance for Healthy Cit	
		Taiwan)	
15:40 - 16:00	[Presentation 1] Health Inequalities in Taiwan	Prof. Kuo Hsien-Wen (Yangming Univ., Taiwa	
	[Presentation 2] Planning for Greying Cities:	Prof. Chao Tsu-Yuan	
16:00 - 16:20		(National Cheng Kung Ur	
	Age-friendly Cities and Communities in Taiwan	Taiwan)	
16:20 - 16:40	[Presentation 3] Healthy City Project by Social Prescribing	Prof. Eun Woo Nam (Yonsei Univ.)	
16:40 - 16:45	Commemorative Photo		
16:40 - 17:00	Move (Yonsei Univ Heung-Up Community Center)	All Participants	
17:00 - 18:00	Visit to Social Prescribing Program Site in Heung-Up Community Center, Wonju	Human Yonsei	
18:00 - 20:00	Dinner (Restaurant 'Toyo': Social Enterprise)	All Participants	

[Presentation 1]
Health Inequalities in Taiwan

Prof. Kuo Hsien-Wen (Yangming Univ., Taiwan)

Health inequalities in Taiwan

Kuo Hsien-Wen, Professor

National Yang-Ming University

Secretary- General in the Alliance for Healthy Cities, Taiwan





Authors

 The Institute is led by Professor Sir Michael Marmot and seeks to increase health equity through action on the social determinants of health, specifically in four areas: influencing global, national and local policies; advising on and learning from practice; building the evidence base; and capacity building.







2019/9/23

Significance of Health inequity Chiu ST (Director-General HPA)

- A. Evidence and transparency as the first step to accountability
- B. Reduction of inequality is both a domestic and a global goal
- C. Health & equity in all policies as a commitment from the top
- D. Health equity everywhere with the people and by the people

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Health inequalities in Taiwan (Korea 20190924)

Key statistics on Taiwan

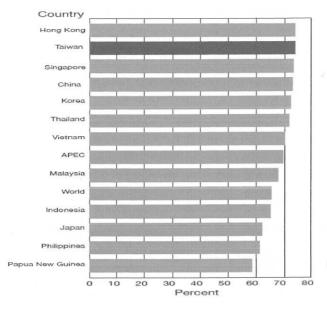
- A rapidly aging population
- A very low fertility rate 1.1 children per woman
- A relatively high ratio of boys to girls at birth
- Low infant mortality and high life expectancy, comparable to levels in Western Europe
- Women can expect to live six years longer than men
- A steep social gradient in life expectancy eight years' difference between the most and least deprived townships

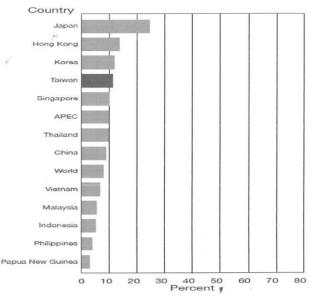
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Health inequalities in Taiwan (Korea 20190924

Figure A.1 Percentage of population aged 15 to 64, selected Asia-Pacific Economic Concention member economics, 2012

Figure A.2 Percentage of population aged 65 and over, selected Asia-Pacific Economics Cooperation member economies, 2012





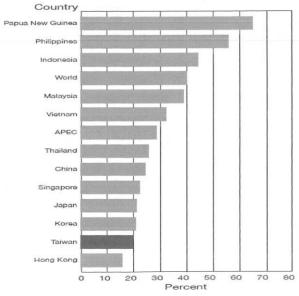
2019/9/23

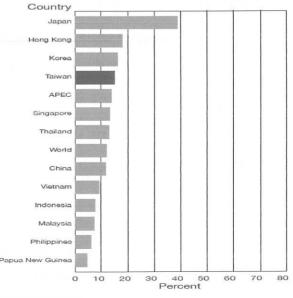
Health inequalities in Taiwan (Korea 20190924)

5

Figure A.3 Child dependency ratio: population aged under 15 as a percentage of population aged 15 to 64 selected Asia-Pacific Economic Cooperation member economies, 2012

Figure A.4 Elderly dependency ratio: population aged 65 and over as a percentage of population aged 15 to 64, selected Asia-Pacific Economic Cooperation member economies, 2012

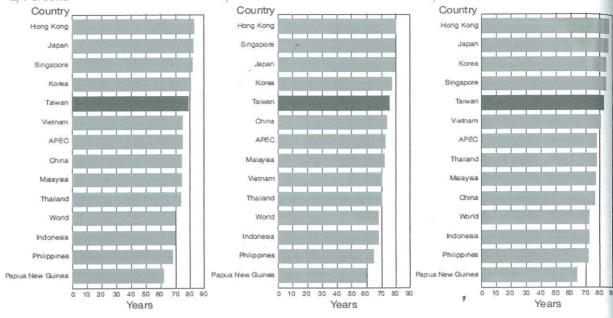




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Health inequalities in Taiwan (Korea 20190924)



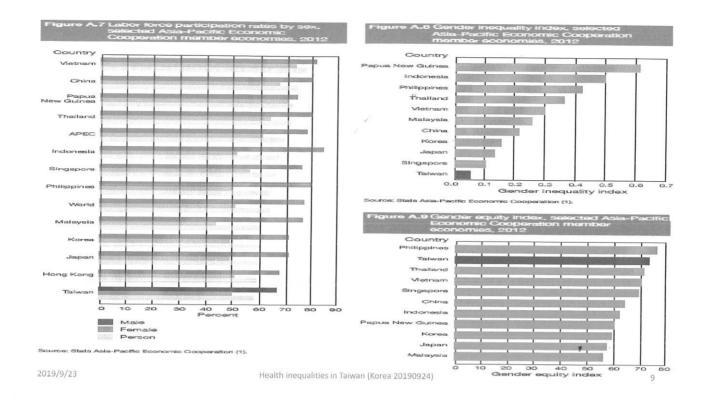


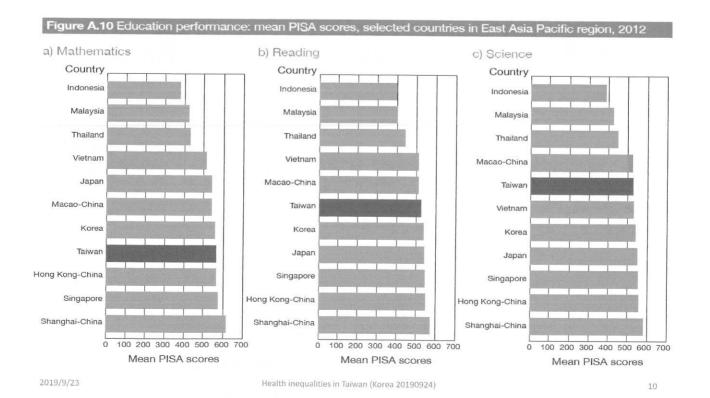
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Health inequalities in Taiwan (Korea 20190924)

- — A relatively low unemployment rate, but also relatively low labor force participation among men by international standards
- — Very good levels of educational performance, particularly in mathematics, compared with countries reported in the OECD's Programme for International Student Assessment (PISA)
- — Low levels of spending on health (0.2% GDP) and education (1.8%) by international standards, though comparatively more on social security and welfare (3.4%)
- Only 5% of achievement is considered lost due to gender inequality compared with a world average of 46%

2019/9/23





The social determinants of health

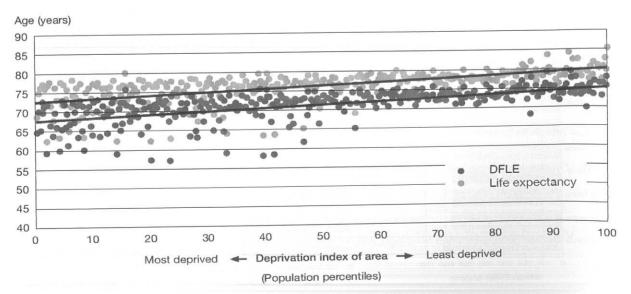
- These socioeconomic inequalities in health, at birth, at working age and at death are reflected in the causes recorded at death: cancer, circulatory diseases and suicide.
- There are also clear inequalities in health behaviors, which relate to poor health and higher risk of death – smoking, alcohol, obesity and drug use.



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Health inequalities in Taiwan (Korea 20190924)

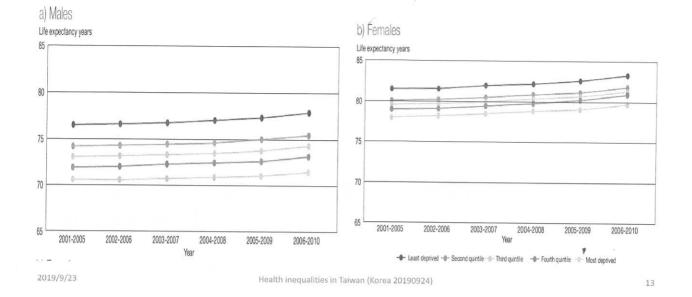
Figure 1 Life expectancy (LE) and disability-free life expectancy (DFLE) at birth, persons by deprivation index of area (township level), Taiwan, 2001–2010



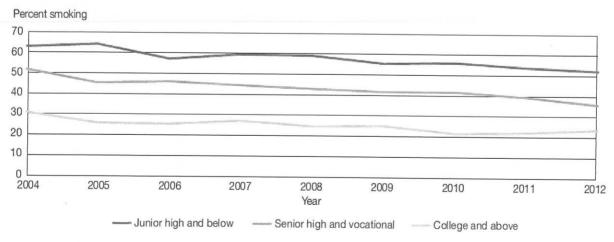
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Health inequalities in Taiwan (Korea 20190924)

Life expectancy at birth, by deprivation quintile, Taiwan, 2001-2010



Percentage of males born after 1955 who smoked by education, 2004–12

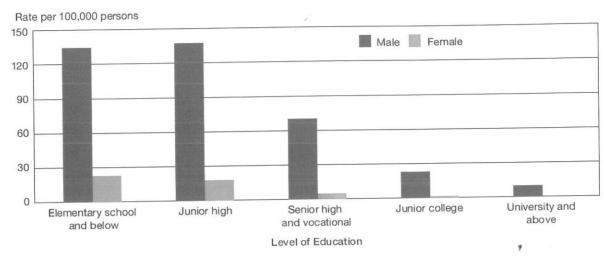


Source: Taiwan Adult Smoking Behavior Survey (2004–2012) by Health Promotion Administration, Ministry of Health and Welfare (5). Note: Definition of smoker: someone who has smoked more than 100 cigarettes (five packs) during their lifetime and smoked within the

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Health inequalities in Taiwan (Korea 20190924)

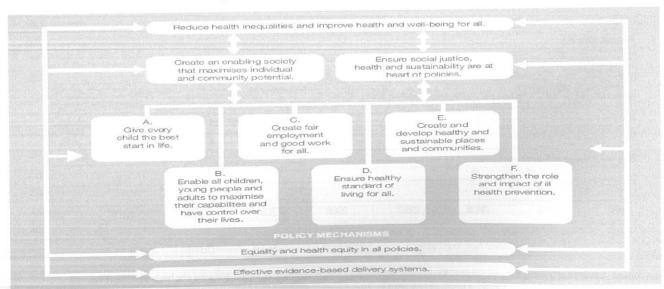
Age standardized alcohol-attributable hospital admission rates at ages 18 and over by level of education in Taiwan, 2011–12



Source: National Health Insurance Research Database, 2011–2012 (6). 2019/9/23 Health inequalities in Taiwan (Korea 20190924)

1

Conceptual policy framework

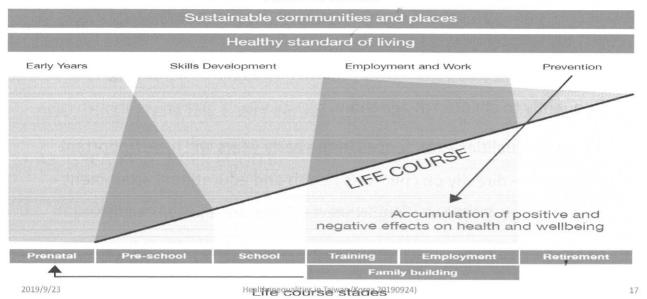


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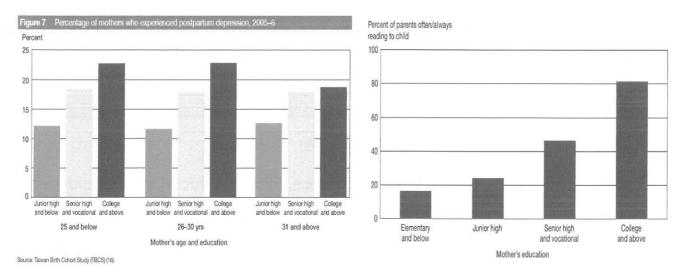
Health inequalities in Taiwan (Korea 20190924)

Action across the life course

Areas of Action



A GIVE EVERY CHILD THE BEST START IN LIFE



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Health inequalities in Taiwan (Korea 20190924)

1.8

Evidence

- A. In Taiwan there is a clear relationship between maternal education and low birth weight.
- B. There is also a sharp gradient by mother's education in reading frequently to children at age three.
- C. All the inequalities experienced in the early years will have important influences directly on children's health and educational attainment and which go on to have important ramifications throughout life.
- D. Gender inequities are evident from the start of life.

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Health inequalities in Taiwan (Korea 20190924)

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Existing policies in Taiwan

- A. Universal coverage of comprehensive preventive interventions: antenatal care visits, new-born screening for congenital metabolic disorders, infant stool color card, hearing screening, vaccination, seven well-child check-ups, and fluoride application to teeth
- B. Special program for disadvantaged groups: enrollment in the national health insurance, life skill education and guidance, and multilingual versions of child and maternal handbooks for foreign-born mothers

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Health inequalities in Taiwan (Korea 20190924)

Recommendations

- A1. REDUCE SOCIAL GRADIENTS IN ADVERSE BIRTH OUTCOMES
- A2. REDUCE SOCIAL GRADIENT IN OUTCOMES FOR MOTHERS AND BABIES

 AND CHILDREN IN THE EARLY YEARS
- A3. GREATER GENDER EQUITY
- 1. improving conditions to balance work and child rearing
- 2. greater support for new parents at community level and at work.

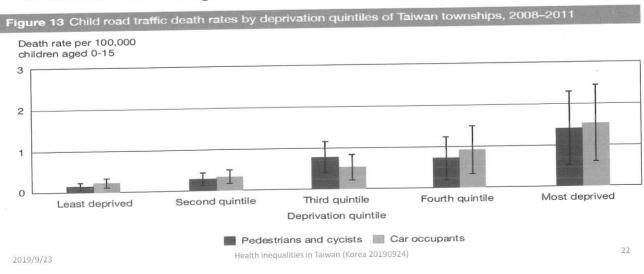
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E. CREATE AND DEVELOP HEALTHY AND SUSTAINABLE PLACES AND COMMUNITIES

• Evidence: The social gradient in places and communities



Existing policies in Taiwan

- Healthy City Project: integrates planning, transport, housing, environmental and health systems to address social determinants of health in each locality
- Healthy communities and health promoting settings: promote community participation and action; reduce social isolation.

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Health inequalities in Taiwan (Korea 20190924)

2

Recommendations (I)

- Focus more on deprived townships, as they are likely to reap the greatest benefit from interventions that provide a healthier and safer environment.
- Improvements are needed in levels of air quality, particularly where this is unequally distributed according to the social composition of areas.
- Ensure that all population groups, particularly those who are excluded (such as homeless people and refugees) or vulnerable (young and elderly), experience safe and healthy environmental conditions.

Health inequalities in Taiwan (Korea 20190924)

Recommendations (II)

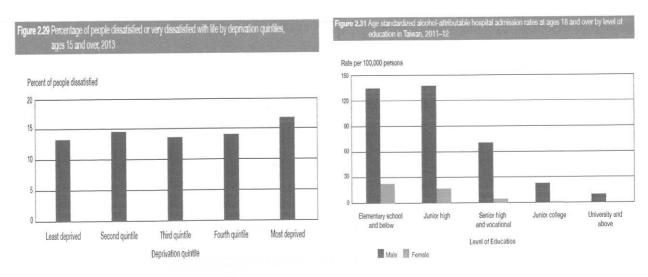
- All new policies should be subject to health equity and environmental impact assessment. The links between health, equity and environment need to be explicitly recognized in these assessments.
- Action should be taken to mitigate the impact of extreme natural events and climate change, based on both social need and geographic location of communities likely to be affected

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Health inequalities in Taiwan (Korea 20190924)

2

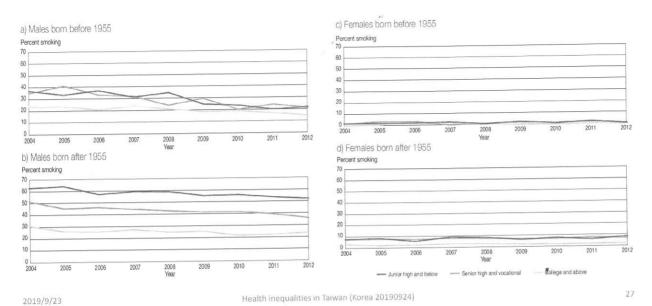
Summary of the analysis of health risks in Taiwan



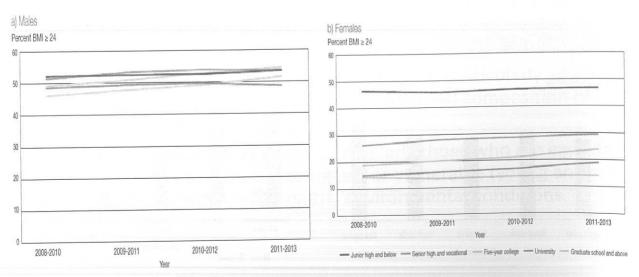
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Health inequalities in Taiwan (Korea 20190924)

Percentage of people smoking, by education and year of birth, 2004–12



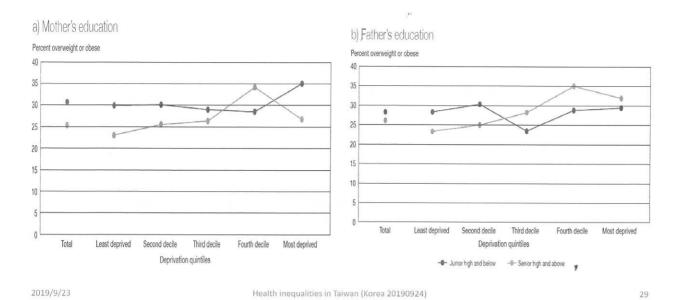
Prevalence of overweight or obesity at age 25-plus by education, 2008–2013



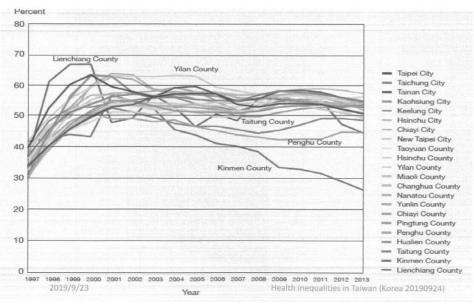
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Health inequalities in Taiwan (Korea 20190924)

Percent overweight or obese by parent's education and deprivation quintile for children aged under 12 years, 2009

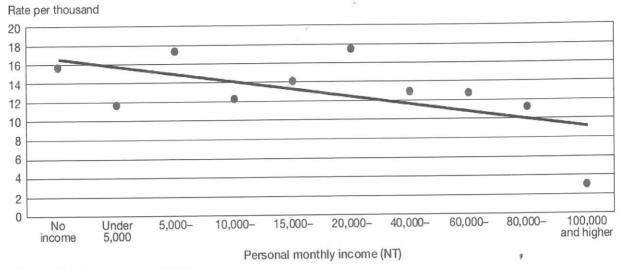


Cervical cancer screening rates in Taiwan, by city/county, 1997–2013



Case Study: Cervical cancer screening initiatives
Taiwanese government has undertaken a number of initiatives including vaccinations and screening for human papilloma virus (HPV), which can lead to cervical cancer.

Prevalence of problematic drug users aged 18–64 years by income level, 2009

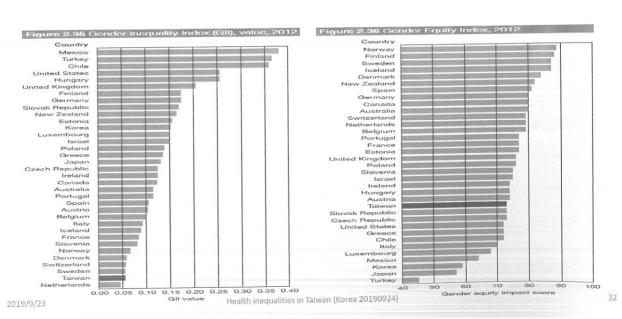


Source: National Health Interview Survey (2009) (34). 2019/9/23

Health inequalities in Taiwan (Korea 20190924)

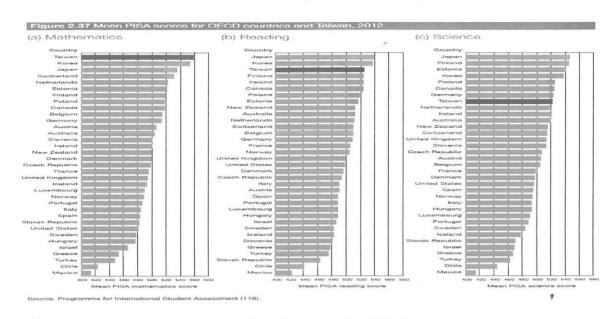
31

Comparisons with inequalities in OECD countries Gender



- 20 -

Academic performance

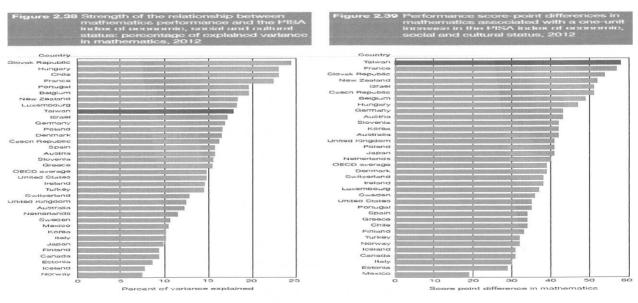


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Education inequalities



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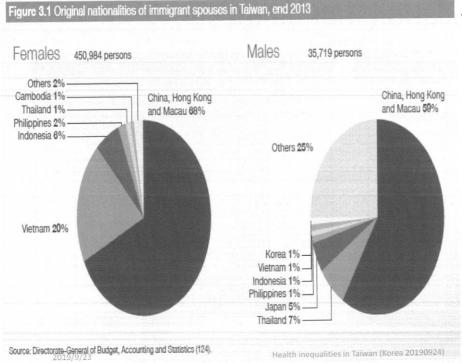
Health inequalities in Taiwan (Korea 20190924)

Case Study: Foreign wives' status and the role of immigration centers

2019/9/23

Health inequalities in Taiwan (Korea 20190924)





These are governing through:

- 1) collaboration
- 2) citizen engagement
- 3) a mix of regulation and persuasion
- 4) independent agencies and expert bodies
- 5) adaptive policies, resilient structures and foresight.

Evidence

- Impact on the health of foreign-born wives and their children
- 1. Foreign-born wives:
- (1) there is a direct effect through domestic violence.
- (2) The health is affected as a result of experiencing adverse social
- conditions, unemployment, poor housing and language barrier.
- 2. Children
- (1) accounted for 7% of the births in 2014.
- (2) Have a higher birth weight, with less pre-term
- (3) limited learning ability

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Health inequalities in Taiwan (Korea 20190924)

2

Intervention Role of immigration centers

- A. Action on broader social determinants of health: provide language learning, child rearing classes, access to services, counselling and legal aid etc.
- B. Action on healthcare determinants: Centers join with health station provided by maternal, prenatal, postnatal health care and reproductive health care cards etc.
- C. Further action which could be taken: Media campaign and review of the immigration laws, social support etc.

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Health inequalities in Taiwan (Korea 20190924)

Case Study: Age Friendly Cities - Chiayi City Pilot city

Table 3.2 Local issues requiring age-friendly interventions

Key Local Issues 1. Urban outdoor spaces are not friendly to older people 2. Most public spaces are suitable for younger users and seldom consider older people's needs, such as stairs, lighting and size of signage, etc. 3. Bad walking environment 4. Public facilities below expectations		
Affordability issues Lack of choices: most of older citizens stay with families Lack of supportive facilities: handrail, safety facilities, elevators	7	
	Urban outdoor spaces are not friendly to older people Most public spaces are suitable for younger users and seldom consider older peand size of signage, etc. Bad walking environment Public facilities below expectations Lack reliable public transportation service in rural areas Poor service in city areas Very high dependency on private vehicle and scooters Lack of various choices of transportation Affordability issues Lack of choices: most of older citizens stay with families	

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Health inequalities in Taiwan (Korea 20190924)

Intervention

Table 3.3 Age-friendly interventions

Domain	Intervention		
Outdoor spaces and public buildings	 Promoted 24 age-friendly shops, 12 age-friendly restaurants, 5 age-friendly hospitals, and 65 age-friendly pharmacies. Used the concept of Universal Design: promoting overhang and road leveling projects, expanding the Chiayi City Forest Park, building the Eastern District Sports Center, and promoting the renovation of community environments and old buildings. Adjusted the traffic signal at 20 spots by considering traffic flow. Installing emergency life-saving AEDs in the entire city. 		
Transportation	Promoted an Elderly Month. Issuing the Elderly Easy Card and Love Card and providing senior and handicap transportation discounts. Providing BRT low-floor buses and 'rehabuses' (paratransit service for people with disabilities).		
Housing	 Providing seniors with affordable houses in Evergreen Park. Setting up 138 Healthy Stations, where the elderly can get their blood pressure and waistlines checked. Installing fire alarms and enforcing building fire safety inspections. 		

Health inequalities in Taiwan (Korea 20190924)

Summary of health inequalities and social determinants of health in Taiwan

- 1. Infant mortality rates are higher in the most deprived quintiles than in the least deprived, both for pre- and full-term births.
- 2. There is a clear relationship between maternal education and:
- • low birth weight
- • post-partum depression
- · reading frequently to children at age three
- • teeth brushing at age three

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Health inequalities in Taiwan (Korea 20190924)

4

- 3. There is a strong relationship between family income and educational attainment at age eight, likely to lead to poorer life chances and poorer health outcomes in later life for children from poor families.
- 4. Those in lower status occupations are more likely to become unemployed than those in higher status occupations.
- 5. There are sharp gradients in mortality by level of education for those both in and out of employment.
- 6. People with limiting physical disabilities hearing, vision, mobility or communication problems – are less likely to be employed than those with more general health symptoms

2019/9/23

Health inequalities in Taiwan (Korea 20190924)

- 7. For men with long-standing illness, the proportion in employment is strongly related to their level of education
- 8. There are steep gradients in clinical risk factors such as hypertension, hyperlipidemia and hyperglycemia, by educational level
- 9. There are clear inequalities in both original and final income, with those in the lowest quintile of income having only a sixth of the final income of those in the highest income quintile
- 10. There is a steep gradient in road traffic death rates among children related to levels of township deprivation.

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Health inequalities in Taiwan (Korea 20190924)

4

Whole-of-government/whole-of-society approaches to health equity

- A. Whole of government approaches: Develop a clear strategy for action on the social determinants of health to reduce health inequalities, involving all sectors and action across government.
- B. Health equity in all policies: It aid in the development of new policies to ensure greater health equity.
- Inter-generational equity in all policies

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Health inequalities in Taiwan (Korea 20190924)

Summary of key actions required

- 1) Take action at every stage of life
- 2) Develop the good examples of action in Taiwan
- 3) Ensure effective social protection systems that reduce health inequalities
- 4) Tackle the drivers of exclusion and vulnerability
- 5) Governance system requirements
- 6) Strategic approach required
- A. Ambition, opportunities and potential barriers
- B. Leadership, champions and advocacy
- C. Levers and incentives
- D. Developing indicators, targets and review plans
- E. · Accountability and evaluation

2019/9/23

Health inequalities in Taiwan (Korea 20190924)

45

Summary of system requirements

- 1) All sectors of society and government must be involved in endeavors to reduce health inequalities in Taiwan.
- 2) Health systems' focus on prevention must be enhanced with an emphasis on social determinants.
- 3) An effective monitoring system must be implemented which focuses on social determinants and the social distribution of health outcomes.
- 4) The line of responsibility for reporting and accountability for action on health inequalities at local and national level must ultimately lead, through the Executive Yuan, to the Premier.

[Presentation 2]Planning for Greying Cities: Age-friendly Cities andCommunities in Taiwan

Prof. Chao Tsu-Yuan (National Cheng Kung Univ., Taiwan)

Planning for Greying Cities



AFSC Lab (Age-Friendly & Sustainable Cities Lab)

Leader: Dr. Tzuyuan Stessa Chao, Associate Professor

Full-time research assistants: 3

Education: PhD of Urban Planning (Built Environment)
University of Nottingham, School of Built Environment, UK
Master of City and Regional Planning
University of Pennsylvania, Graduate School of Fine Arts, USA

Teaching Topics: Practicum of urban planning , Urban and Regional Planning Law, Land Law, Plan Investment and Evaluation, Healthy City and Community Development

Research Fields: Urban Planning, Healthy Cities and Communities, Planning Laws and Property Right, Social Housing

Professional Experience: Ministry of Interior Regional Planning Committee Member Kaohsiung City, Chiayi County Urban Planning Committee Member Chiayi County Rural Land Development Committee Tainan City Urban Planning Committee Member The Executive Yuan Soil and Groundwater Remediation Fund Management Board Commissioner

Taiwan Healthy Cities Alliance Board Member, Executive

Member

2016 Taiwan Healthy Cities and Age-friendly Cities

Excellent Expert Award



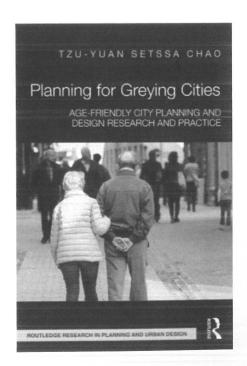


圆立成功大學

Latest Book Publication

Tzuyuan Stessa Chao 2017.12.06. Planning for Greying Cities, Age-friendly City Planning and Design Research and Practice. Routledge, New York, (ISBN 978-1-13-821607-5 Hardback)

Tzuyuan Stessa Chao 2019.05.14. Planning for Greying Cities, Age-friendly City Planning and Design Research and Practice. Routledge, New York, (ISBN 978-0-36-733190-0 Paperback)



Content

- · Global ageing trend and challenges
- Ageing Trend in Taiwan
- Age-friendly Cities and Communities in Taiwan
- * Proactive & Preventative planning in an ageing society

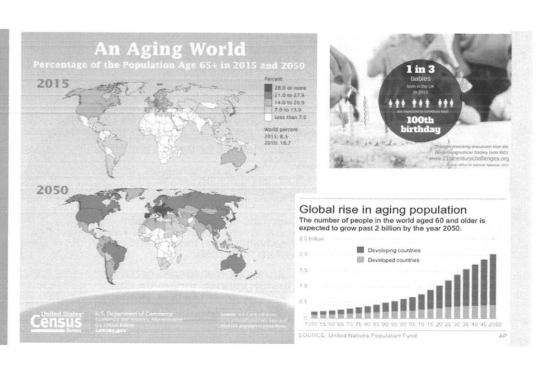
國立成功大學

Global Ageing Trend:

Longer life expectancy

Majority of the population

More resources needed for well-being



In the meantime: other emerging challenges

Urbanization Climate Change

<u>Urbanization:</u> While worldwide just over 55% of the population lives in cities right now, there will be over 70% by 2040.

THE GLOBAL CONTEXT

Cities today occupy approximately only 2% of the total land, however,



- Cities can be the source of solutions if well-planned and well-managed.
- TNUA presents a paradigm shift based on the science of cities and lays out standards and principles for the planning, construction, and development of urban areas along its 5 pillars of implementation, national urban policies, urban legislation and regulations, urban planning and design.....



資料來源: http://habitat3.org/the-new-urban-agenda

Ageing trend in Taiwan and challenges



- By 2060, 42% of total population will be older adult
- Great difference between Urban area and Rural area in terms of ageing trend and challenges
- By 2017, amount of older population aged over 65 exceed youngsters aged under 14 for the first time in the history.
- Increasing ageing people will increase the social-economic vulnerability. (FEMA, 2010)
- Over 70% of ageing population reside in rural communities in Taiwan. Disadvantages in medical and social welfare resources.
- Future key demands: urban infrastructures, inclusive physical environment, disaster resilient strategies.

Ageing Map
of Taiwan
Taipei City, New
Taichung City

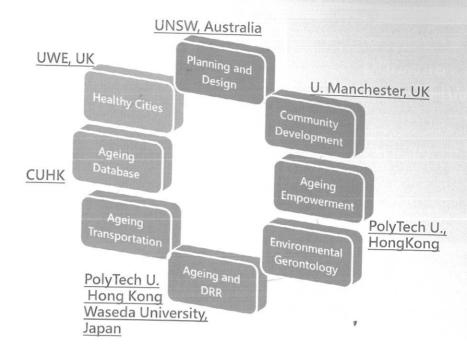
Tainan City
Kaohsiung City

Ageing Trend in Taiwan Source : National Development Council, 2010

医二式法大學

Dimensions of Planning for **Greying Cities:**

- 3. Seeking for Oriental friendly Cities



國立成功大學

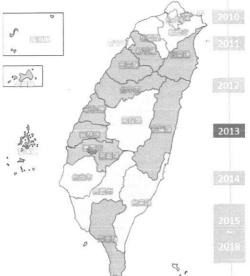
Urban Governance: Scale matters



Source: Chao, 2017

Practicing WHO Agefriendly Cities Program

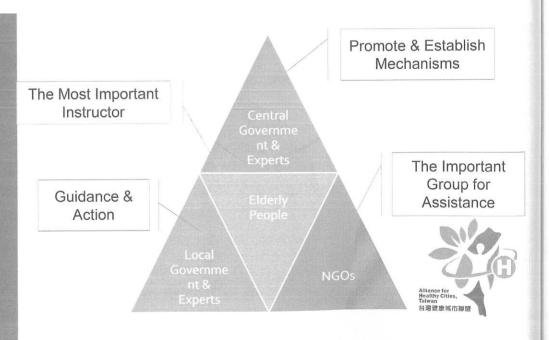
- Since 2010~
- Core concept: active ageing and ageing-in-place
- Annual Investigation of the ageing population
- Top-down approach Establishment of 30 national core Age-friendly Indicators
- Bottom-up approach: community action plans



- Taiwan Steps up · the first pilot project in Chiayi City
- Government subsidy 9 counties and cities to promotion Participate in the first international age-friendly cities conference which took place in Dublin, Ireland
- Government subsidy 20 counties and cities to
- promotion Held the 2012 APEC Asia-Pacific Conference on agefriendly cities and age-friendly economy
- All counties and cities in Taiwan Join the promotion. Coverage rate: 100%
- Participate in the 2nd International Age-Friendly Cities conference which took place in Quebec City
- All counties and cities in Taiwan continue to promotion. Held the 2014 APEC Asia-Pacific Conference on age-friendly cities and age-friendly economy
- All counties and cities in Taiwan continue to promotion.
- Organize Inter-ministerial promotion meeting Implementation the Age-friendly Environmental Monitoring program Satisfaction survey in Taiwan

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Establishing People **Participation**



医立规功大學

Action plans: Age-friendly Cities and Comminities in Taiwan





國立成功大學



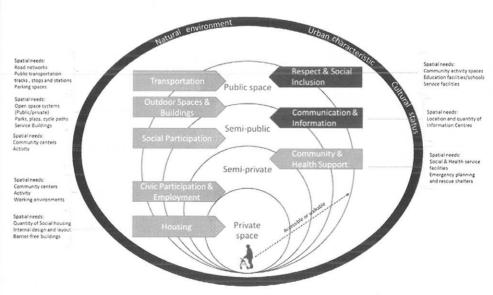
- · Three-tier, community-based system to promote
- · Expands service capabilities(people with dementia aged 50 or over)

2014 APEC Asia-Pacific Conference on Age-

friendly Cities and Age-friendly Economy

- · Easy-to-find, easy-to-access services
- · New subsidy system for more customized care plans

Proactive Urban Planning for Age-Friendly Cities and Communities

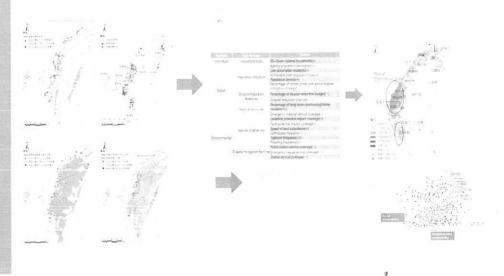


Source: Chao, 2017

Proactive planning and design

a. community-based disaster risk reduction (CBDRR) 2014–

b. People-environment fit (PE fit)



五二战万大學

Preventative planning and design

a. community-based disaster risk reduction (CBDRR)

b. People-environment fit (PE fit) Case Project: Nei-man Community, Community Disaster Risk Map by local elderly.

- · Only Bottom-up Approach will work.
- · The Three-E model:

Enhance the involvement of seniors in disaster management

Empower seniors to further understand their ability

Enable seniors to extend their social networks



Protactive planning and design

- a community-based disaster risk reduction (CBDRR)

Dementia-Friendly Communities

國立成功大學 / 規劃與設計學院 都市計劃學系 / 2018 都計系國際週系列活動 / iCities 2018

SDG KU 11

SDG 11 失智宜居社區規劃設計國際工作坊

SDG 11 International workshop on dementia-friendly community planning and design



指導老師 Instructor 超子元教授 Tzuyuan Stessa Chao 國立成功大學 National Cheng Kung University



参與學者 Participating professor/ 英國皇家規劃學會 Royal Town Planning Institute



參與學者 Participating professor/ 香港理工大學 The Hong Kong Polytechnic University



參與學者 Participating professor/ 國立交通大學 National Chiao Tung University

國立成功大學國際事務處 Office of International Affairs NCKU

👛 副立成功力學



主辦留位

L 150/4/5/24/6

2018.10.25 (Thur.) 07:30-17:30 @Chu-tien Commi

03:00-12:00 / Site investigation 13:30-16:00 / Group Discussion : site analysis local older people's dementia tendency community assets mapping

2018.10.26 (Fri.) 08:30-17:00 @C-HUB 2F cafe

2018.10.20 (Fr1.) 08:30-1700 @C-HUB AT CARE

09:00-12:00 / Group Discussion:
case studies, main issues and planning strategies
case studies, main issues and planning strategies
13:30-15:00 / Lecture : Healthy City and Dementia-friendly
Communities in the UK (Prof. Askow)
15:00-16:30 / Lecture : Person-Environment Fit theory and
Dementia-friendly Communities in Hong Kong (Prof. Sun)

2018.10.27 (Sat.) 08:30-17:00 @Dept. of Urban Planning 50306

09:00-12:00 / Group Works 13:30-17:00 / Dementia-friendly community planning and design concepts, initiatives

2018.10.28 (Sun.) 08:30-17:00 @Dept. of Urban Planning 50306

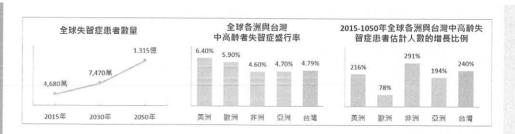
0.18.10.28 (Surt.) 08:00-17:00 (Biochton of Charles)
98:00-12:00 (Group Works
14:00-15:30 / Final presentation (Biopt. of Urban Planning 1F hall
16:00-17:00 / Lecture: From Idea to Market - A Case Study on the
Innovative Accessibility Services of Our CityLove
Social Enterprise Tailwan (Prof. Lin)

國立成功大學都市計劃學系 Department of Urban Planning NCKU UP 國立成功大學 都市計劃學系

全是政府

Dementia Friendly Community (DFC)

A dementia friendly community is one that cares about its neighbors one that listens to the feeling of its residents with dementia one that sees the signs one that understands the needs and one that acts.



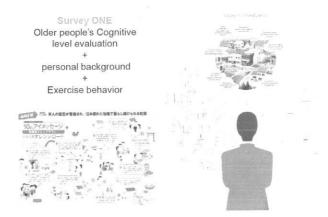
- A dementia friendly community is one that has looked at its shops, restaurants, markets, and streets through the eyes of a person with dementia; then does everything it can to make it a place where they can continue to live as independently as possible.
- When memory changes begin, many become more isolated, which frequently hastens the cognitive decline. A community that understands dementia will be one that supports and cares for its neighbors who are struggling to deal with loss of memories, loss of the ability to do routine activities, loss of jobs, loss of independence, and loss of self.

Proactive planning and design

- a. community-based disaster risk reduction (CBDRR)
- b. People-environment fit (PE fit)

Dementia-Friendly Communities

How do we work on this project?



Survey TWO Community Dementia Friendliness evaluation

Greating Deposition Friendly

Grown working Friendly

The control of the price of the control of

Proactive planning and design

- a community-based disaster risk reduction (CBDRR)
- b. People-environment fit (PE fit)

Dementia-Friendly Communities

SPMSQ

Interview

Stakeholders

Survey Structure

About people

Characteristic

About Building Environment

Che

Checklist



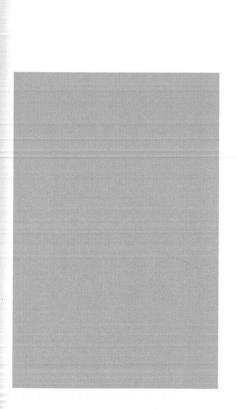
Proactive planning and design

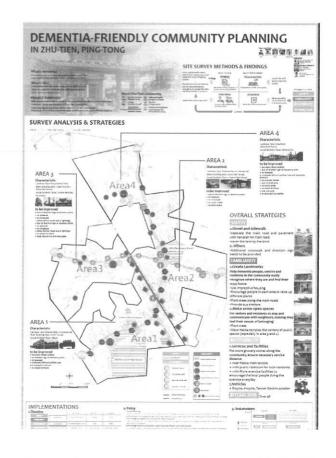
a. community-based disaster risk reduction (CBDRR)

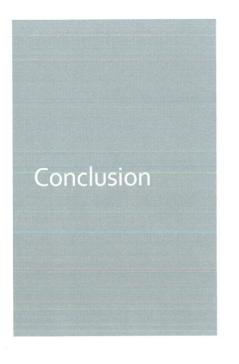
b. People-environment fit (PE fit)

Criteria	Checklist	Safety -Crosswalks	Familiarity I andmarks including historic and civic
Familiarity Likey	Overall Signs Overall Streets Sidewalks Signs Crosswalks Overall Streets Sidewalks	*Signs easily visible,in clear colour,without reflective coverings 標誌容易看見,顏色鮮鸝,沒有反光價蓋物。 *Sidewalks人行道 *Streets with adequate lightings,clearly marked and well-lit ground level changes,minimalized street clutter,hierarchically designed,quiet alternative routes 付遺有充足的照明,明顯標記和明亮的地面高度變化,最小化的街道混亂,分屬設計,安静的替代路線 *No structures that cast shadows in the community. *Obvious cues are positioned where sightlines end	buildings地標包括歷史和市政建築 -architectural features design are easily understood in variety styles建築 特徵設計易於理解
11 朱智宝朱达显	Street furniture 新聞報刊 阿萨丁特拉 成本製作	Accessibility *Services and facilities are within 5-10 minutes walking distance of housing 服務和設施距離住房5-10分鐘步行路程 *Public toilets are at ground level, clean,accessible公共同所位於地面,乾淨方便 *Entrances to buildings or public areas is visible and obvious. 建築物或公共區域的入口明顯	Interaction *clean, well-kept, and pleasant open spaces of activity 乾淨,保存完好,開放的活動空間 *Street furniture designed in a familiar way, obviously indicating its use as a resting place 以熟悉的方式設計的街道家具,顯然表明它用作休息場所

Final proposed planning policies







- Understanding and Involving older adults in everyway: when seeking better wellbeing for older urban dwellers, understanding the socio-economic and cultural contexts is extremely important
- More studies of how older adults interact with the environment and feedback to planning and design system.
- The Need for Oriental Diagram for Ageing City Planning and Deign: the drastic differences between Eastern and Western countries in terms of culture and attitudes towards the elderly, most case studies and theories developed from experiences in Western society are not compatible to the East. (Chao & Huang, 2016)

Thank you! Q & A

Tzu- Yuan Stessa Chao | tychao@mail.ncku.edu.tw Associate Professor, Department of Urban Planning Nation Cheng Kung University Taiwan



[Presentation 3]
Healthy City Project by
Social Prescribing

Prof. Eun Woo Nam
(Yonsei Univ.)

Healthy City Forum





Healthy City Project by Social Prescribing

사회적처방에 의한 건강도시사업

September 24th, 2019

Eun Woo Nam MPH, PhD

Professor, Dept. of Health Administration, Yonsei University

Director, Healthy City Research Center / Yonsei Global Health Center, Yonsei University

Contents (목차)

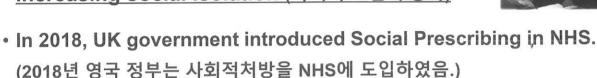
- I. Background (배경)
- II. Pilot Project in Community (사회적처방 시범사업)



I. Background (배경)

1. Social Prescribing in UK (영국의 사회적처방)

- Burden on NHS (NHS에의 부담)
 - 20% of patients consult GP for social problems
 - About 15% of GP visits for social welfare advice
 - 1/3 care time spent on non-clinical issues (진료시간의 1/3이 비의료적 문제를 다루는데 소요됨)
- Increasing social isolation (사회적 고립의 증가)







I. Background (배경)

2. Definition of Social Prescribing (사회적처방의 정의)

- Social prescribing is a means of enabling GPs, nurses and other primary care professionals to refer people to a range of <u>local, non-clinical services</u>. (사회적처방은 의사 등 의료인이 환자를 지역사회의 비의료적 서비스 제공기관에 연계해주는 수단이다.)
- Social prescribing schemes can involve a variety of activities which are typically provided by voluntary and community sector organizations. Examples include volunteering, arts activities, group learning, gardening, cooking class, healthy eating advice and a range of sports. (사회적처방에는 봉사활동, 음악 미술 등의 예술활동, 집단학습, 정원가꾸기, 요리교실, 건강한 식생활 교육 및 다양한 스포츠 활동 등이 포함된다.)

- Source: What is social prescribing – The Kings Fund (02 February 2017)

I. Background (배경)

3. Video: What is Social Prescribing? (2' 11")



- Source: Healthy London (https://www.youtube.com/watch?v=O9azfXNcqD8) 5

II. Pilot Project in Community (사회적처방 시범사업)

1. Introduction (개요)

- ☑ Title : Social Prescribing(SP) Pilot Project in Heung-up myeon (흥업 사회적처방 시범사업)
- ☑ Goal : To develop and implement a SP project with non-medical professionals aiming to decrease depression of senior citizens in Heung-up myeon (목표: 흥업면 거주 노인의 우울증 경감을 위한 비의료인을 통한 사회적처방 사업 개발 및 실시)
- ✓ Period: July 5th 26th, Aug 14th Sept 4th (8 weeks), one time a week
- ☑ Place: Community Senior Center(敬老堂), Community Welfare Center (주민복지관)
- ✓ Participants: 13 elderly people aged more than 65 years old
- ✓ Program: Music Storytelling program (70 minutes for one time)

II. Pilot Project in Community (사회적처방 시범사업)

☑ Project Team (2019) (프로젝트팀 조직도)



II. Pilot Project in Community (사회적처방 시범사업)

- 2. Music Storytelling Program by Human Yonsei (뮤직스토리텔링 프로그램: 휴먼연세 수행)
- Music Storytelling Program is an integrated program of arts activities including music, art and light physical activities which aims to recover self-respect by recalling one's life story.



II. Pilot Project in Community (사회적처방 시범사업)

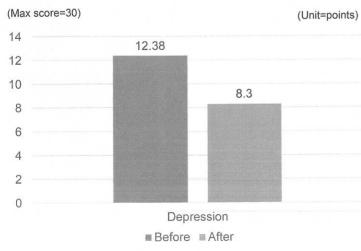
3. Research Results (연구결과)

- 1) Objective: To evaluate the effect of SP pilot project on decreasing depression of senior clients (연구목적: 어르신 우울증 경감에 대한 사회적처방 프로그램 효과평가)
- 2) Subjects: 13 senior clients (older than 65 years old) who participated total 4 times of program activities, July-Aug, 2019 (연구대상: 프로그램 4회 참여한 만 65세 이상 어르신 13명)
- 3) Method (연구방법)
 - Data collection : Depression of subjects were measured using **GDS-K** (Geriatric Depression Scale-Korean Version) as measuring tool, by **face-to-face interview**. (자료수집 : 한국형 노인우울척도를 사용한 1대1 면접 인터뷰 실시)
 - Statistical analysis: Wilcoxon signed-rank test using SPSS 21.0

II. Pilot Project in Community (사회적처방 시범사업)

3. Research Results (연구결과)

Comparing average depression score of clients Before-and-After program participation



- Depression of senior clients were declined after program participation and this was statistically significant(p<.05). (우울증 점수 12.38 → 8.30점으로 감소)
- Music Storytelling Program as a social prescription had an effect on depression.

II. Pilot Project in Community (사회적처방 시범사업)

4. Photos



Map of Heung-up myeon



Community Senior Center(敬老堂) in Heung-up

II. Pilot Project in Community (사회적처방 시범사업)

4. Photos











Thank you very much!

AFHC Healthy City International Forum

2019. **9**. **25**. (수) ~ **26**.(목)

강동아트센터 대극장



AFHC Healthy City International Forum

Theme: The Direction of Healthy Cities Due to Health Problems in the 21st Century

AFHC Healthy City International Forum (Day 1) Date: Wednesday, September 25, 2019

Time	Program	Presenter	Page no
12:00~12:45	Registration		
12:45~13:00	Pre-event performance	Gangdong-gu School Club (Korean Traditional Folk Band)	
13:00~13:20	OPENING CEREMONY (Opening Address, Welcoming Address, Congratulations)	Opening: Jung-Hun Lee, Chair of AFHC SC Welcome: Youngjong Kim, Chair of KHCP Congratulation: Prof. Keiko Nakamura, Director of AFHC Secretariat	
13:20~14:20	Special Lecture I "Organizing Research for Healthy Cities"	Prof. Evelyne de Leeuw, NSW University, Australia	, 13
14:20~15:20	Special Lecture II "The future directions of Healthy Cities in the 21 st Century."	Dr. Agis Tsouros, International Consultant, WHO Regional Committee for Europe	
15:20~15:40	Coffee Break		63460 1644 (mark) 3 vyrolet (a 1850 - 143) 3
Co-Chairs : Dr. F Prof. Go Kwangv	of Healthy Cities Towards SDGs I Riitta-Maija Hämäläinen, WHO WPRO wook, KHCP Academic Committee Chairperson		
15:40~15:50	Introduction		
15:50~16:20	Healthy City Project in Nonsan-si	Hwang Myung-sun, Vice Chair of KHCP	43
16:20~16:50	Progress of Taipei Healthy City Towards SDGs	Dr. Te Jen Hung, Vice President of AFHC Taiwan	65
16:50~17:20	Progress of Gangdong Healthy City Towards SDGs	Jung-Hun Lee, Mayor of Gangdong-gu	101
17:20~17:40	Panel Discussion		
17:40~18:30	Move to hotel and Check-in	*	
18:30~20:30	AFHC Members Cities Welcome Dinner	Grand Walkerhill Walker Hall	

Progress of Healthy Cities Towards SDGs I 지속가능발전목표(SDGs)를 향한 건강도시 발전 I

Progress of Taipei Healthy City Towards SDGs SDGs를 향한 타이베이 건강도시 발전

Dr.Te Jen Hung | 훙태전

Vice President of AFHC Taiwan 타이페이 건강도시증진협회 의장





Progress of Taipei Healthy City Towards SDGs

Taipei Healthy City Promotion Association
Taipei City



Te-jen Hung MD (洪德仁)

EDUCATION

MD., School of Medicine, Taipei Medical University, 1973-1980

MAM., Taipei National University of the Arts, 2003-2006

PRESENT APPOINTMENTS

Vice President, Alliance for Healthy Cities, Taiwan (2016-)

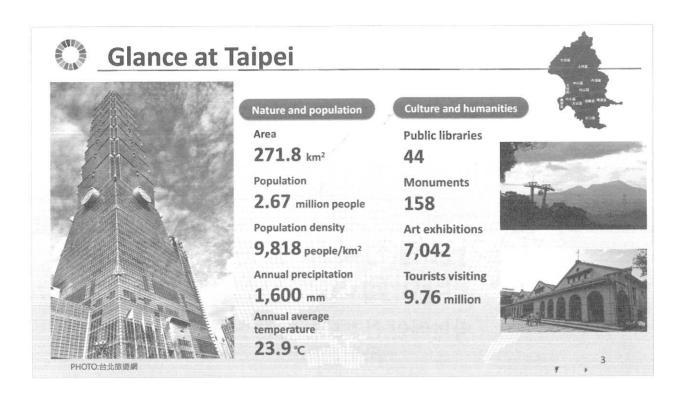
Standing Supervisor, Taipei Healthy City Promotion Association

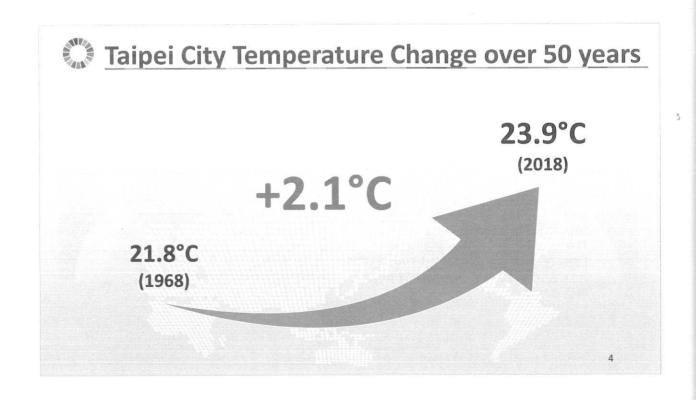
President, Taiwan Community Empowering Society (2018-2020)

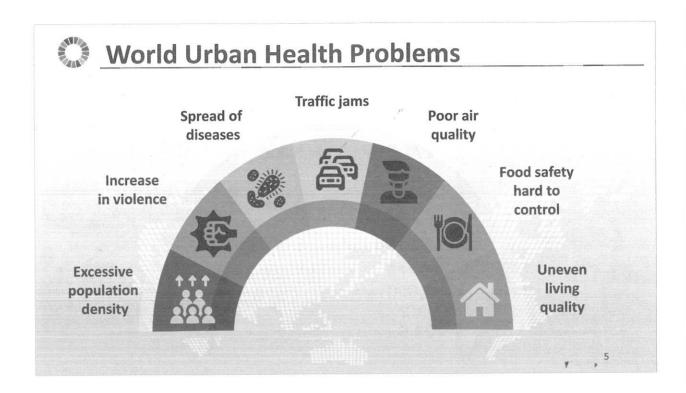
Vice President, SD Committee, Taipei City Government (2016-2021)

Otolaryngologist, Dr. Hung ENT Clinic (1986-) Member, Steering Committee, AFHC, WHO WPRO. (2018-2020)











Taiwan Alliance for Healthy Cities (2008-)



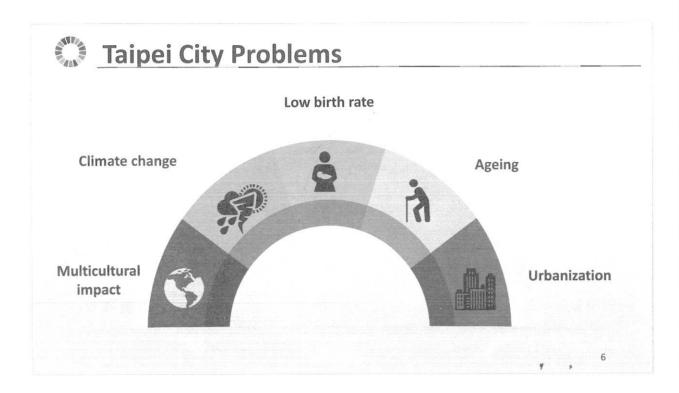
2003 International Healthy Cities Conference Belfast

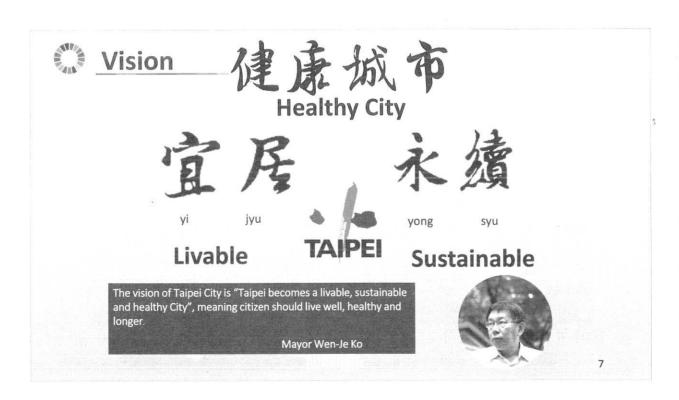


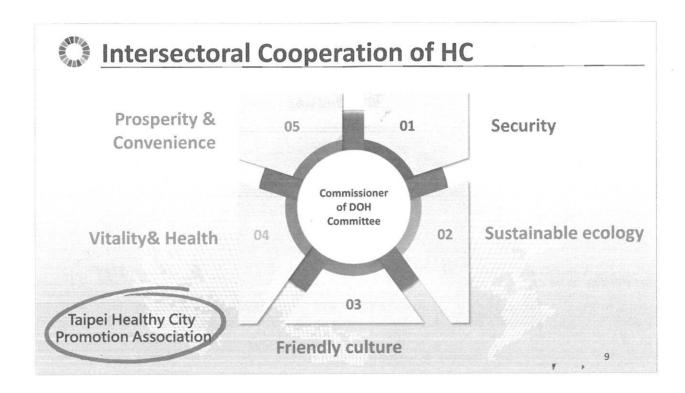
2003 International Healthy City
Conference Belfast

- Pilot proposal in Tainan City, 2003
- Taiwan Alliance for Healthy Cities was established in 2008
- Group members 46, Individual member 223, Totally 397









Taipei Healthy City Promotion Association



Joins the family of AFHC, 2016.



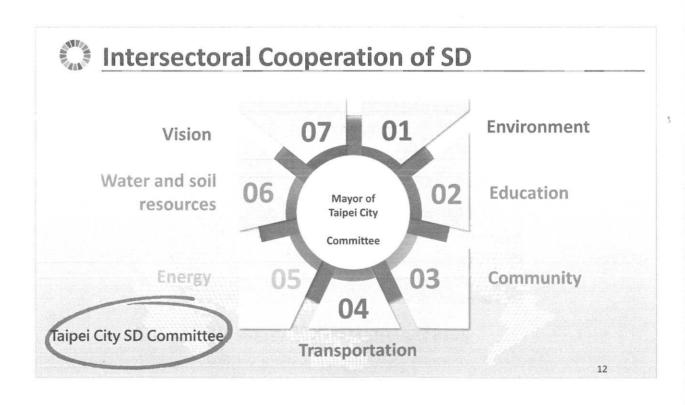
Taipei Healthy City Promotion Association

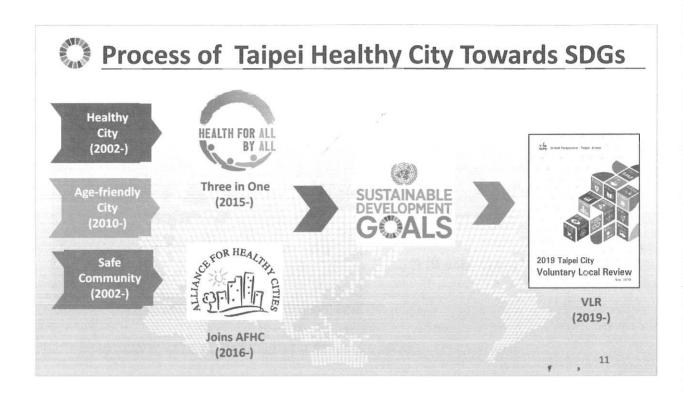


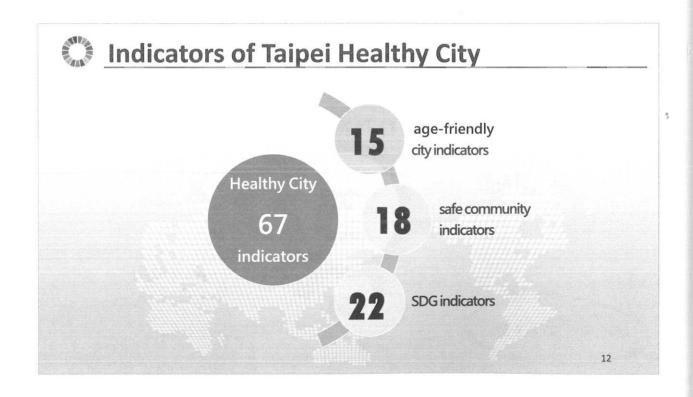
Members of Taipei Healthy City Promotion Association, Aug 16, 2019.



Members of AFHC visit Mayor Ko, Taipei City, Jun 27,2018.







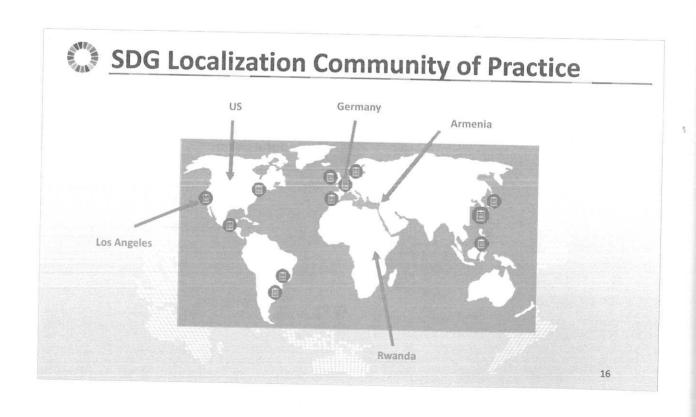


Voluntary Local Review(VLR) of SDG



Mayor Ko announced Taipei will present Voluntary Local Review(VLR) in New York this March. VLR has published Sept 5, 2019.

TAIPEI Global Perspective · Taipei Action 2019 Taipei City Voluntary Local Review





Prioritized Goals of Taipei City

















17



Reduce one third premature mortality from non-communicable diseases through prevention

2017 2018 2030 Immunization coverage rate(%) 38 40 54.25

Cancer screening coverage rate(%) 45.4 46.5 50.5





Substantially increase health financing and the recruitment, development, training and retention of the health workforce

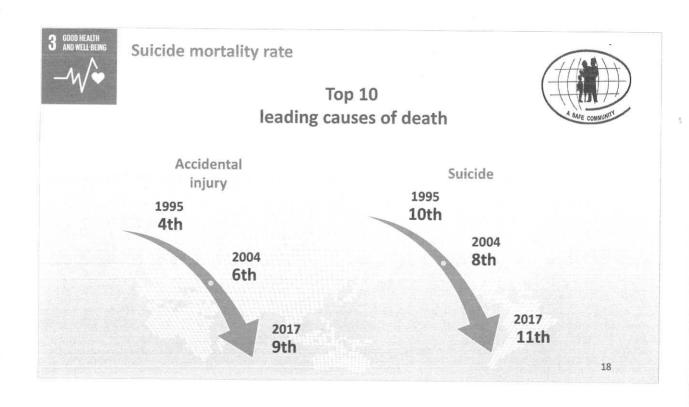


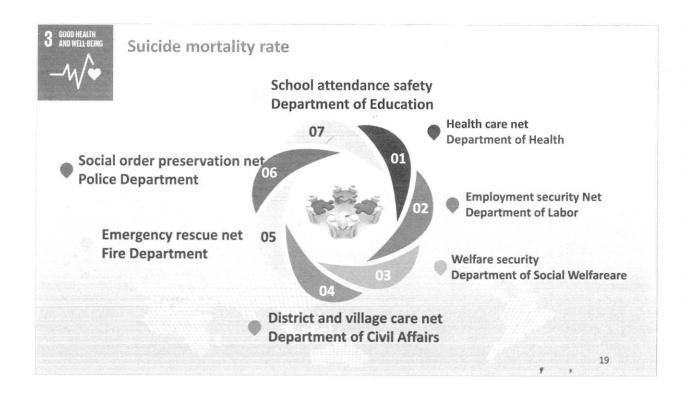
	2017	2018	2020
Physicians			
per 100,000			
population	546.4	546.6	526.8

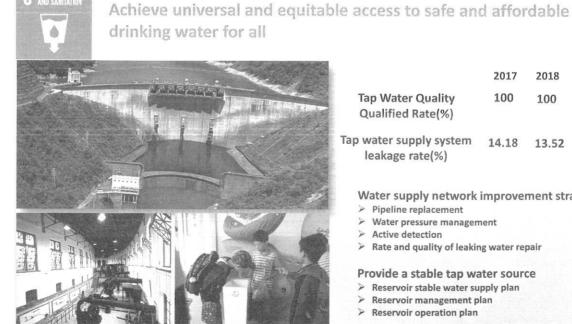
ISO 37120 Physicians per 100,000 population Indicator of urban health and progress, physicians per 100,000 population of Taipei City is higher than international cities such as Toronto, London, Dubai.

Source: Department of Budget, accounting and statistics, Taipei City Government

, 17







	2017	2018	2030
Tap Water Quality Qualified Rate(%)	100	100	100
Tap water supply system leakage rate(%)	14.18	13.52	10

Water supply network improvement strategy

- Pipeline replacement
- > Water pressure management
- > Active detection
- > Rate and quality of leaking water repair

Provide a stable tap water source

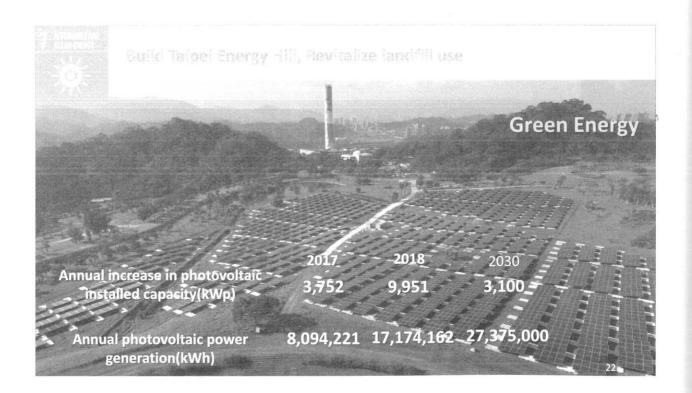
- > Reservoir stable water supply plan
- > Reservoir management plan
- > Reservoir operation plan



Halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse rate



	2017	2018	2030
River biochemical oxygen demand in line with water classification benchmark achievement rate (%)		93.05	95.0
Percentage of city population served by wastewater collection(%)	81.43	82.81	86.98



7 STEAM ENERGY

Ensure access to affordable, reliable, sustainable and modern energy

Energy Welfare Plan for Disadvantaged Families Energy Saving 2019(Target) 20,000 2,700 Cumulative Lights Households 4,700 Replacement **Lights Replacement** Households **Annual Electricity** Saves Bills Savings **Annual Electricity** 1,200 Savings NTD/Every 970,000kWh Million kWh Household



Provide access to safe, affordable, accessible and sustainable transport systems for all



TAIPEI METRO BUS

14 operators 290 routes 1.3 million passengers

etro sipei

117 stations 31.1 2.16 million passenge

bike

400 rental point 13,072 Z7
bikes million times

UBike

Annual public transport passengers per capita

(Number of public transport trips/city population)

Past 2018 2021

463.24 486.62

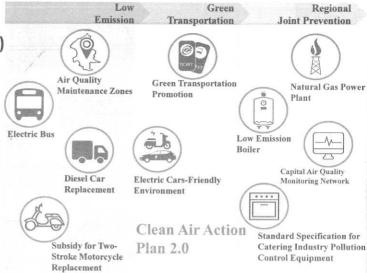


Reduce the adverse per capita environmental impact of city

Annual average of PM_{2.5} (µg/m³)

 2017
 2018
 2030

 15.3
 14.6
 10



27



Achieve the environmentally sound management of chemicals and all wastes throughout their life cycle





Substantially reduce waste generation through prevention, reduction, recycling and reuse

Cherish and Circular Economy

Overproduced Food Exchange Platform

Used Book Exchange Platform

Goods Bank Project

Free Meal Plan

Cooking and serving

Arrange cooking group and matched

social units to pickup these food



Invitation to promote Invite the vendors to participate

Food donation and collection Market vendors donate

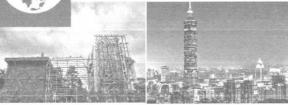
fresh foods

Target for 2022 accumulation

120,000 participated



Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters



Green Wall



Green Building



Taipei Energy Hill



Permeable Pavement

To tackle climate change, not only Mitigation but also Adaptation, and improve the urban resilience is needed.



Green Building



Rainwater Recycling



Green Roof



Ribbon Plant



Promoting A Garden City Policy

Garden City

So far, the area of the garden site area has exceeded $180,000\,\text{m}^2$, and the cultivation people over 160,000, expecting to build Taipei City as a garden city for green health, education and life



PHOTO:2019臺北顯景發展論

 $\textbf{Choose 12} \ \textbf{Natural ecological parks as demonstration sites } \textbf{for reducing}$ human disturbance and enhance urban biodiversity











Eco Park Press Conference



Roof space as a community farm

31



Founded to enhance civil consciousness and promote citizens' participation in public policies and public affairs

Environmental Education from Expert Teams

· Learn the effects caused by PM25 from medical group.c



Participatory Budgeting

There are 171 project from 2015

Support the Outside **Activities Away from**

li-Voting

• Transform a proposal, discussion into a

Taipei

· Practice with Tokyo, Seoul rescuing teams to sharing the experience.



Open Data

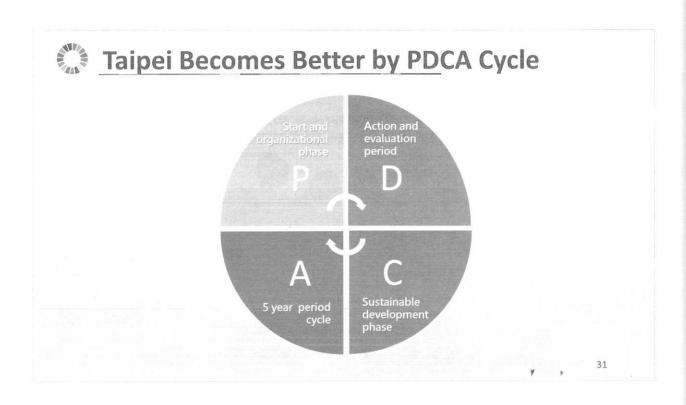


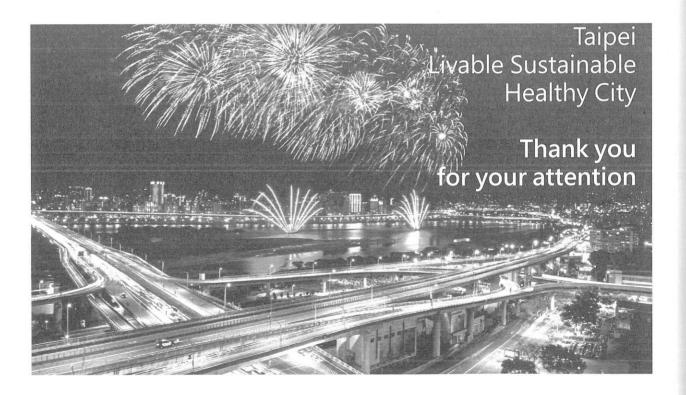
International **Partners**

- · GO SMART
- · ICLEI
- · Global Covenant of Mayors for Climate & Energy
- ·UCLG
- · UEA













Progress of Healthy Cities Towards SDGs

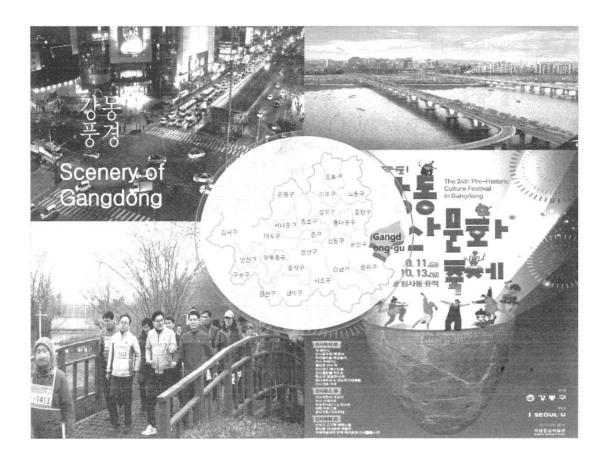
25th September 2019



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- 1. Progress in making Gangdong Healthy City
- 2. Vision and Goals in Gangdong Healthy City
- 3. Advancing Healthy City toward SDG Efforts to achieve SDG 3, 4, 10, 11, 15, 17
- 4. Outcome in pursuit of Healthy City
- 5. Declaration of Gandong Vision for Healthy City
- 6. Future Direction for Healthy City Gangdong



Progress in making Gangdong Healthy City

- Build foundation for healthy city
 Developed ordinance, budget and internal cooperation organization, made master plan, made criteria for local community a variety of members to participate
- Implement policies and various projects for excellent healthy city
 Developed guideline for healthy city design
 Developed Gandgong- gu healthy city index
- Participate actively in international organizations, foreign and domestic healthy city networks, and formed partnership

Leader in advancing healthy city home & abroad

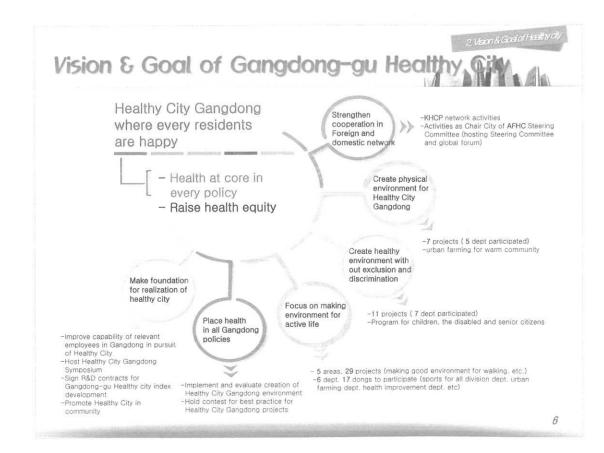


Chair City of AFHC Steering Committee (2019~2020)

- 5th & 6th Chair City of KHCP (2015~2018)
- Provided administrative supports for KHCP general & special meetings, shared healthy city best practices
 with foreign & domestic members
- · Joined 8th AFHC global conference, guided KHCP members (2018.Kuching)
- Presented Gangdong-gu practice as guest speaker at Taiwan Healthy Cities Partnership Global Conference (2018. Taiwan)
- Elected as Chair of 23rd AFHC Steering Committee (2018.10. Kuching, Malaysia)







3, Advancing Healthy City toward SDG10

Gangdong-gu Healthy City Index R&D PJT Contract,

- Objective: close gap in health inequality by comparison of healthy city index in 17 dongs and concentration of supports to vulnerable areas
- R&D period: 2019 Mar. ~ 2019 Aug. (6 months)
- Performed by: Soon Chung Hyang University, Academic-Industrial Cooperation Center (Head Prof. Eun Jung Kang)
- Main Content: Selection of Healthy City Index customized for Gangdong-gu
 Survey to citizens and employees for Healthy City Index

Utilization of healthy city index in future

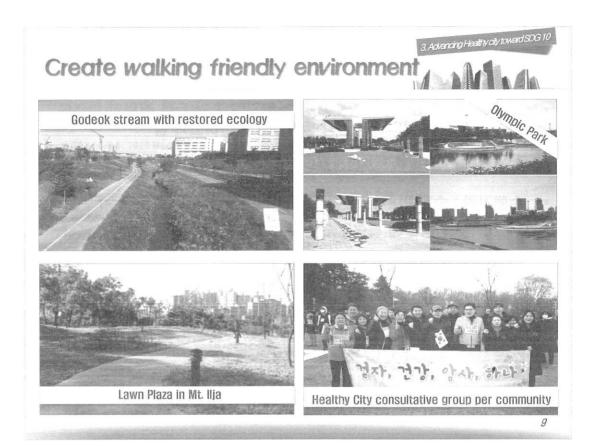
- Gangdong-gu Healthy City Index: 6 areas, 35 indices
 - 6 areas: Operation System, healthy city project, physical environment,
 Socio-economic environment, health behavior, health result
 - 35 indices: Awareness of healthy city, participation in healthy city project, environment incld. air quality, consideration for the weak, smoking rate, health related-quality of life and etc.

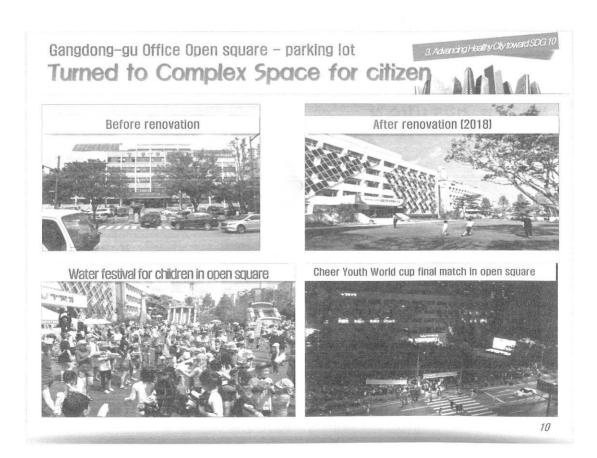
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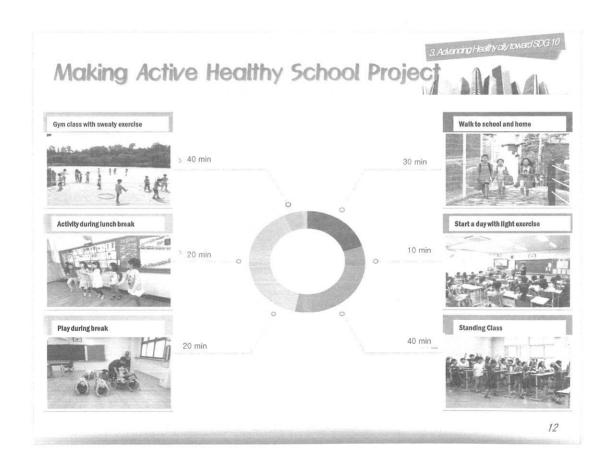
Outcome of Gangdong-gu Healthy City Index R&D Healthy City Index per lifezone Healthy City Index per lifezone B (exclusion of private sports facility, in respect of no. of parks) Healthy City Index per lifezone A

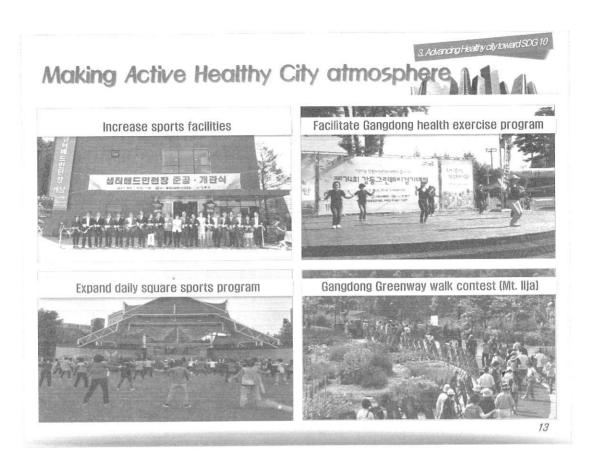
(in respect of private sports facility, ratio of parks area)

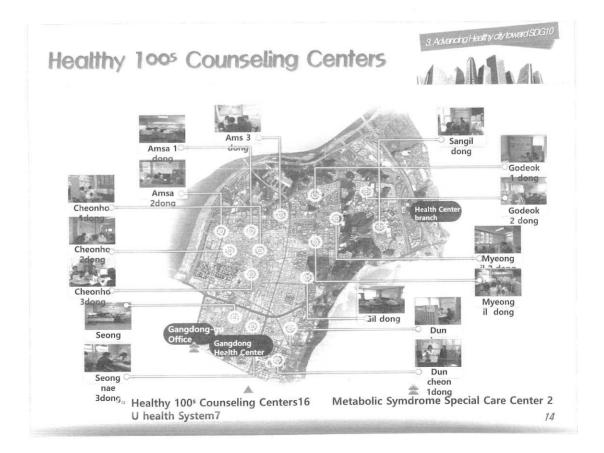




Investment for children Child Obesity prevention PJT Walk to school & home (86.2%) Start day with light exercise Don't eat only what you like Empty your own plate Standing class (min. 1 class session) Stretching all together Walk during break Activity during lunch break Physical Diet Activity habit Gym class with sweaty exercise Weight Support program Control Physical activity education Track and manage weight Nutrition information & Track and manage obese education children Wellness and diet consult 11







WHO Recognized Healthy 1005 Counseling Center

- WHO introduced Healthy Centenarian Consulting Center on its website
- it is highlighted as best practice for cooperation between public- private and community to improve accessibility to health & medical care service





16

Community-based NCD prevention in the Republic of Korea



Intersectoral action improves access to health services

Both the Mayer and the Public Health Director, of Gangdong District, played a key role in bringing togeth Public Health Centru, the Administration Management Bureau, Community Service Centres, the Plannin Economy Bureau, private health organizations, and communities in the Betslict. The process involved consultations with academic experts and working committee meetings with the public in each of the 18 communities led to the programmer's success.



nd academic experts that ultimately helped place health issues higher on the policy agenda in

Today, more than 65 000 people are enrolled in Healthy 100s Counselling Centres in Gangdong. F reported greater satisfaction with the quality of their health service and 32% of programme particlp showed improvements in hypertension and blood pressure, as well as weight loss within 6 months







Healing Program for the disabled person





17



a Advancing Healthy oily toward SDG 10

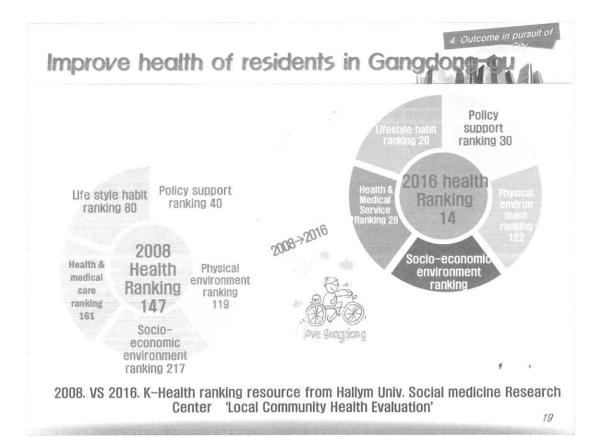
y Urbon Forming



- · Korea first urban farming complex community center
- ·Facility: multipurpose auditorium,
- Workshop for business startup, library for indigenous seeds
- ·Program: Farmers school like specialized urban farmer program



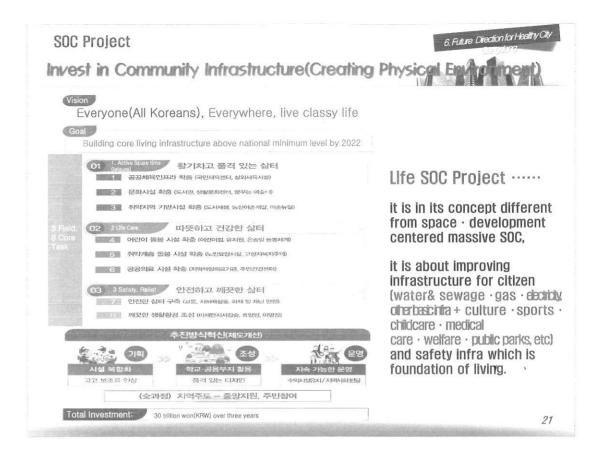
- · It is only one website in Seoul Metropolitancity
- · Provide various information about urban farming
- ·provide videos on urban farming on-line



Declaration of Gangdong Vision for Health



- It is based on Shanghai Agreement for Healthy City(2016) -
- 1. Gangdong-gu carries out places health at the core of all policies in order to improve health and quality of life of residents in Gangdong-gu.
- 2. Gangdong-gu continues to improve physical and social environment in city and increase community resources so to create healthy and inclusive urban environment.
- 3. Gangdong-gu provides best health and medical services and social welfare services to every residents regardless of sex, age, income, residence area and class so that they can enjoy health and happiness.
- 4. Gangdong-gu actively interacts and cooperate with WHO, AFH and KHCP to lead sustainable development of healthy city home and broad.





Health equity policy per Dong(Vilage)

6. Future Direction for Healthy City

- Will further enhance quality of life by life SOC (3 projects)
 - Development of old public offices in Cheonho 3 dong for compound Govt. budget: KRW 2,503 M, Gu-budget: KRW 3,668 M
 - Development of old public offices in Myeongil 1 dong Govt. budget: 1,083M, Gu-budget: KRW 22,180 M
 - Expand public Haegong Senior Citizen Center Govt. budget: 382M, Gu-budget:5,383M
- Target of life SOC Compound project: Placing min. 2 types of infra.
 Public library, little library, sports center, living culture center,

Daycare center (government, public), Citizen health center, together with Child Care center, Communal Child Care, Residential parking lot, family center





Special Lecture I 특강 I

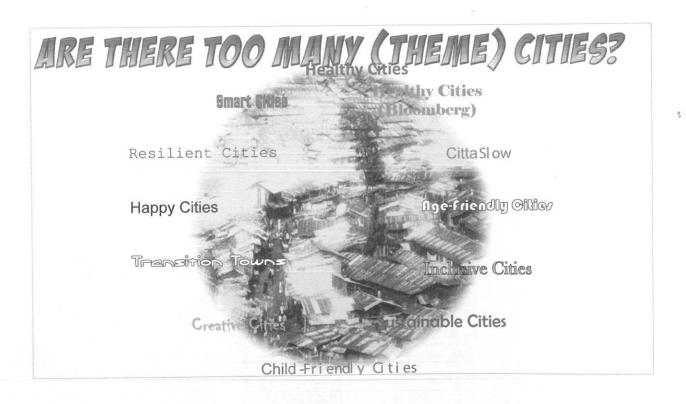
Organizing Research for Healthy Cities 건강도시 관련 연구 조직하기

Prof. Evelyne de Leeuw | 에블린 드 레우

NSW University, Australia 교수 | 호주 뉴사우스웨일즈(NSW) 대학 건강한 도시환경(HUE) 협력연구소장· 건강형평성 훈련, 연구 및 평가센터 (CHERE) 센터장







It depends...: what's 'health' & 'city'?

Health is a state of complete physical, mental, social and spiritual well-being and not merely the absence of disease or infirmity

WHO

Health is a state of optimum capacity for effective performance of valued tasks

Parsons

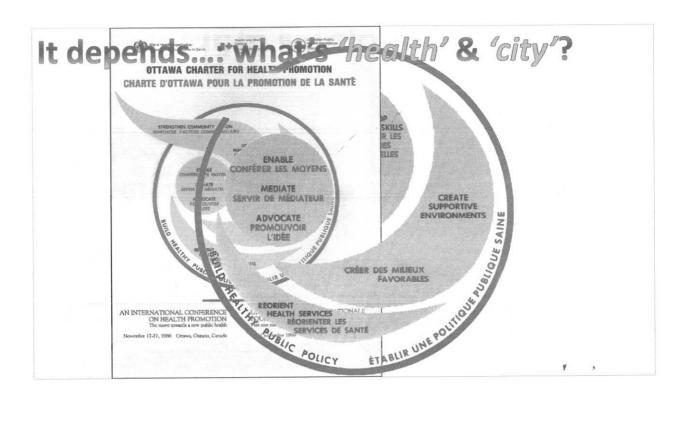
McDermott

Health is a relative state that represents the degree to which an individual can operate effectively within the circumstances of his heredity and his physical and cultural environment

Dubos

Health is the expression of the extent to which the individual and the social body maintain in readiness the resources required to meet the exigencies of the future







A clean, safe, high quality physical environment (including housing quality).

The meeting of basic needs (food, water, shelter, income, safety, work) for all the city's people.

Encouragement of connectedness with the past, with the cultural and biological heritage and with other groups and individuals.

An ecosystem which is stable now and sustainable in the long term.

Access to a wide variety of experiences and resources with the possibility of multiple contacts, interaction and communication.

A city form that is compatible with, and enhances the above parameters and behaviours.

A strong, mutually supportive and non-exploitive community.

AND THE CONTRACTOR OF T

An optimum level of appropriate public health and sick care services accessible to all.

A high degree of public participation in and control over the decisions affecting one's life, health and wellbeing.

A diverse, vital and innovative city economy.

High health status (both high positive health status and low disease status).

And then there is 'research':



on healthy cities

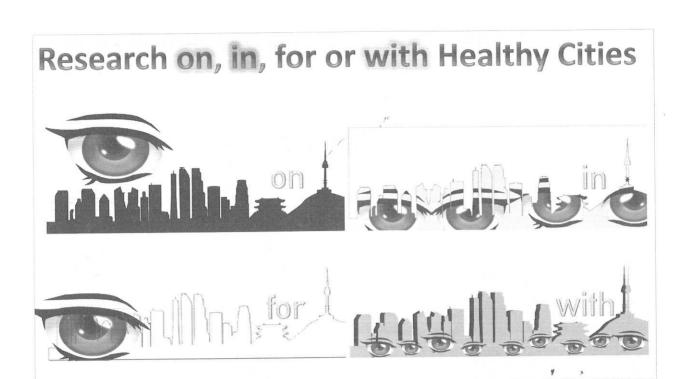




Research on, in, for or with Healthy Cities



health) Also scientifically progress is made. WHO published a cities slick book in Cosmopolitan style that documents the foundations and advances of the international Healthy Cities movement. It is stunning to see that so many diverse issues are dealt with so differently by thirty-odd cities. The author, Agis Tsouros, helped by what some at WHO call 'the Dutch touch' crafted a thing of beauty.



		SALUE MAJOR		for	with
why	Problem	Not defined by city or community	May be defined by city or community	May be defined by city or community	Must be defined by city or community
	Accountability	Only to research institution and/or Ethics approval system	Research institution; study population; governance systems	Governance systems; population and community; research institution	First and foremost: those affected
	Measure of success	Grant income, publication output	Acceptability of study, sustainability	Policy or programme review effect; implementation	Engagement, commitment of stakeholders and affected
	Output	Papers	Papers, change	Papers, change, health	Papers, change, health, equity
	Policy change	Only if so charged by those who pay research	As a by-product	Integral to research process	If desired by stakeholders and affected (city & community)
	Community	No. Often seen as hindrance	Sometimes	Sometimes	Always
who	External research –	yes	sometimes	sometimes	sometimes
	university External research – consultants	yes	sometimes	sometimes	almost never
	Internal research	no	sometimes	sometimes	ideal
	Internal research	no	yes (if existent)	no	yes
	unit – Local gov't Relevant official	no – only to define problem	sometimes – to help research process	yes – notably the authorities	Yes – all (government; community)
	stakeholders Relevant 'informal' stakeholders	no	sometimes	sometimes	always
how	Dominant paradigm	Data driven, quantitative	Mixed methods	Responsive (eg 4GE or realism)	Realist synthesis
	Dominant discipline	Epidemiology, 'Health Services Research'	Urban studies, social health, planning (stats)	Social and human geography, anthropology, sociology (stats)	Any
	Responsiveness	None	Some	High	Ultra high
	Replicability	Yes (but remember: Error III and IV) (De Leeuw, E. (2012) Do healthy cities work? A logic of method for assessing impact and outcome of healthy cities. Journal of Urban Health, 89(2), 217-281)	Yes	Some	None
	Comparative	Yes	Yes (but Flyvbjerg style) (Flyvbjerg, B. (2006) Five misunderstandings about case-	Yes (but Flyvbjerg style)	Yes (but Flyvbjerg style)

Driving the 'urban century' with research



'... all the processes of conflict, cooperation and negotiation in taking decisions about how resources are to be owned, used, produced and distributed. Inevitably, the contours of politics are framed by the inherited institutional environment (both formal and informal), by the political culture and by the differing degrees and forms of power, which participants bring to the process, and by their interests and ideologies'. (Leftwich, 1994)

- 'solutions for urban problems'
- · 'the theory, policy, and practice of value-based urban planning'

HUH, WHAT ...?

Research on, in, for or with Healthy Cities

- There is a place for all: on, in, for, with
- But the 'best' research is always co-created
- and leads to real (health) (or policy) change
- To facilitate this I urge you to consider:
 - To build your own research (appraisal) capacity and confidence
 - to get the very best out of the research enterprise
 - .for your administration and your people

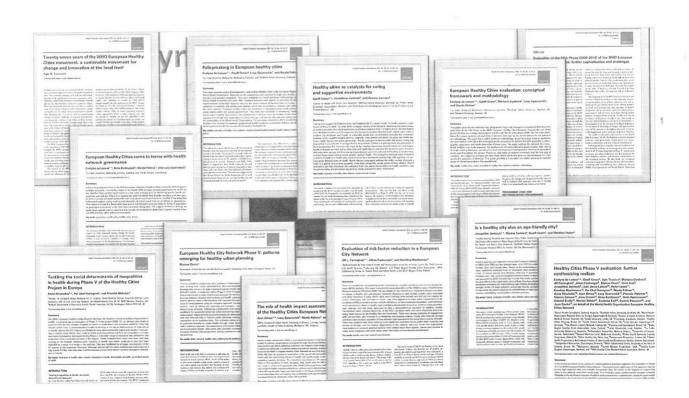
Two examples:

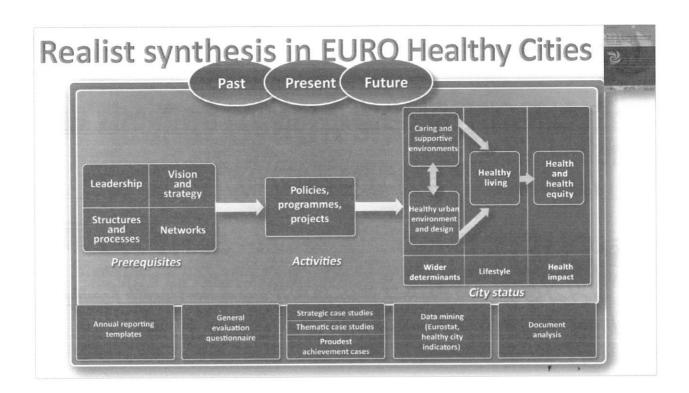
Realist Synthesis methodology

(as deployed in WHO/EURO Phase V Evaluation)

CHETRE

(Centre for Health Equity Training, Research and Evaluation; co-creating intelligence for better health)





Realist synthesis in EURO Healthy Cities 'On the ground' projects, programmes, policies are driven by 'theories':

- not 'scientific'
- but assumptions about causal, final, normative relations
- ** context; mechanism; outcome

Realist synthesis: integrating knowledge Evidence is never 'hard' but subject to flux

(ἐπιστήμη, τέχνη, σοφία, φρόνησις, παρρησία)

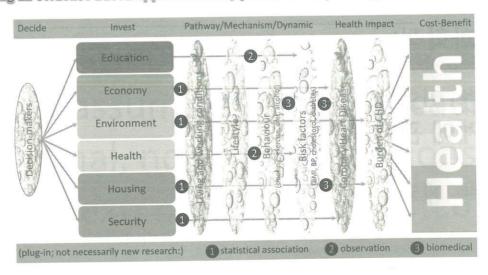
 $(episteme-knowledge; techne-skill; sophia-wisdom; phronesis-(political) \ a stuteness; parrhesia-speaking \ out \ boldly)$

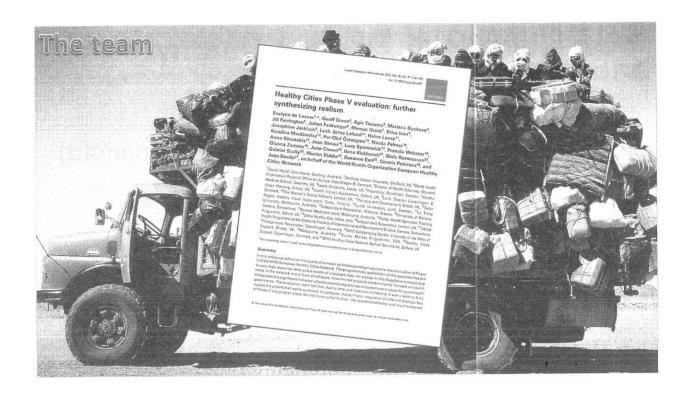
research ≠ knowledge ≠ policy ≠ change

(remember: build appraisal capacity!)

Realist synthesis: DECiPHEr

(Developing an evidence-based approach to city public health planning and investment in Europe)





Data collection and processing

Negotiated priority themes

(Healthy City values, WHO priorities, local politics, 'beliefs')

Establish data group

(qualitative, quantitative, resource experts, validation)

Establish 'Mother Reports' for each theme

(600+ pages of semi-processed data; total >6TB)

Data interrogation by theme lead authors

(Ask questions, hypotheses, cross-theme issues)

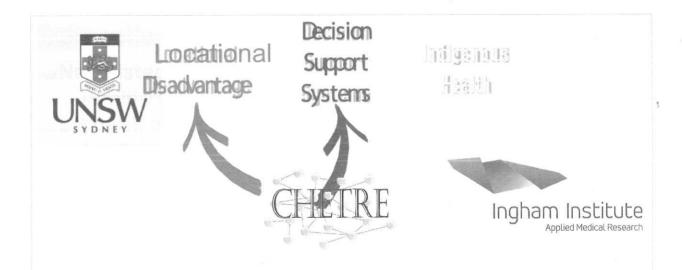
Write and validate papers

Two examples:



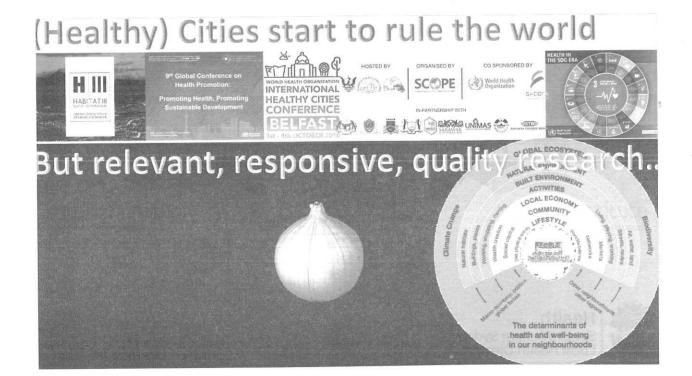


(Centre for Health Equity Training, Research and Evaluation; co-creating intelligence for better health)









But relevant, responsive, quality research...
...is critical,
needs to be organised well,
based on a clear logic and appreciation of
Healthy Cities

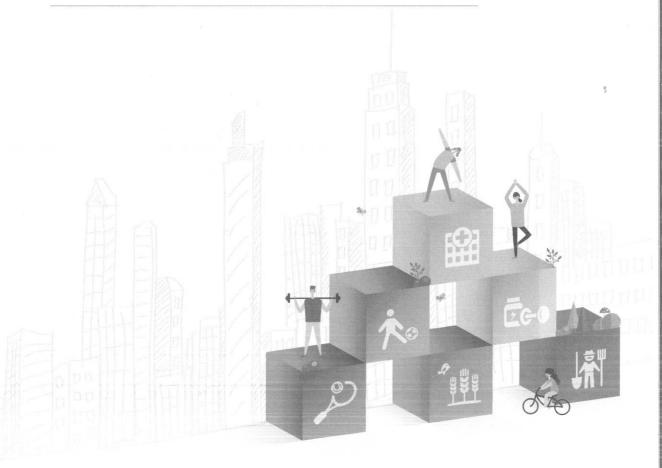
경청해 주셔서 감사드립니다

Progress of Healthy Cities Towards SDGs I 지속가능발전목표(SDGs)를 향한 건강도시 발전 I

Healthy City Project in Nonsan-si 논산시 동고동락 공동체 사업

Hwang Myung-sun | 황명선

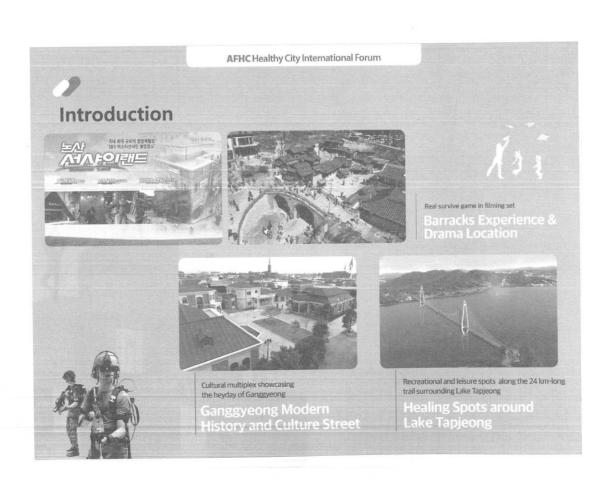
Vice Chair of KHCP KHCP 부의장 · 논산시장

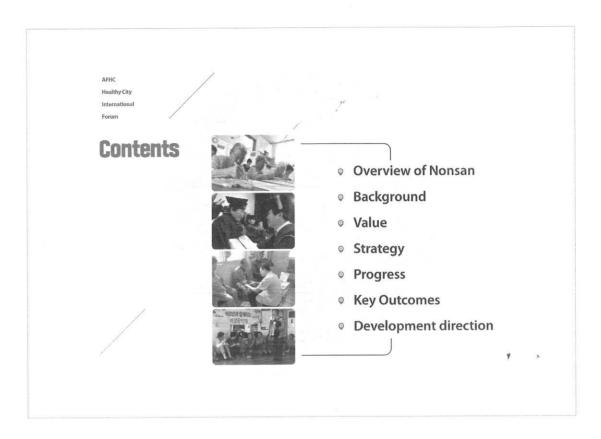


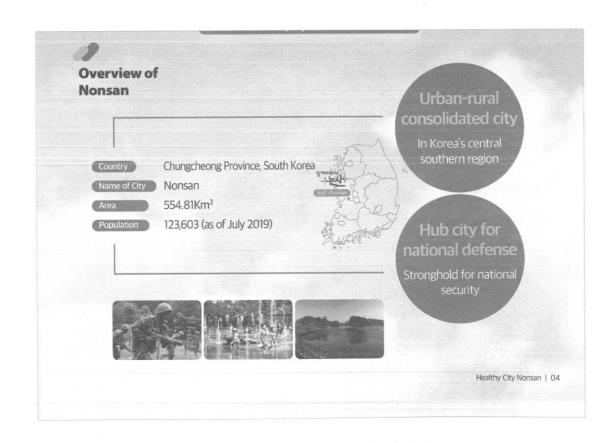


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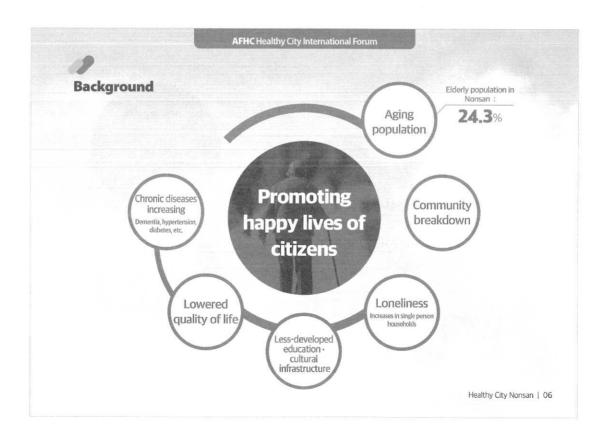








Hardworking city to improve not only the health of the citizens, but also physical environment such as water and swage treatment and social environment such as education, culture, transportation and park creation, and where every members of the community continuouslyooperate with each other to improve health and quality life of the citizens



Background

Donggo-Dongrak local automony: Changing life of local residents

- © Settlement of community democracy to discuss and decide on village work (once a month)
- o Growth in sense of ownership to contemplate and solve village problems
- o From dumping ground into village garden, From disfiguring wall into Sunflower mural







Healthy City Nonsan | 07

AFHC Healthy City International Fo

Value

Donggo-Dongrak: Restoration of village community by living together side by side

A healthy city driven by the "Donggo-Dongrak" philosophy Develop the whole community into a healthy city for everyone's happiness

Build and social

infrastructure for citizens to live a decent life

Restore village-based communities facing risk of collapse affected by rapid urbanization and individualism

⇒ Sharing Difficulties and Happiness Together with Community ("Donggo-Dongrak") Project

Strategy

Foundation of Village Community Support

Nation's first establishment of local autonomy council, Donggo-Dongrak, and enactment of Management ordinance in Nonsan city (2018)

Of 10~20 council members, increase in participation of youth, women, and multicultural family

Of 494 towns, constitution of 489 local autonomy councils completed

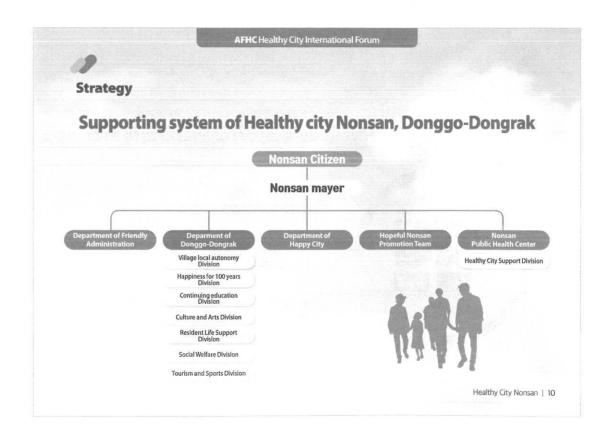
Full revision of the ordinance on the establishment and operation of the Nonsan City Residents' Association (2019)

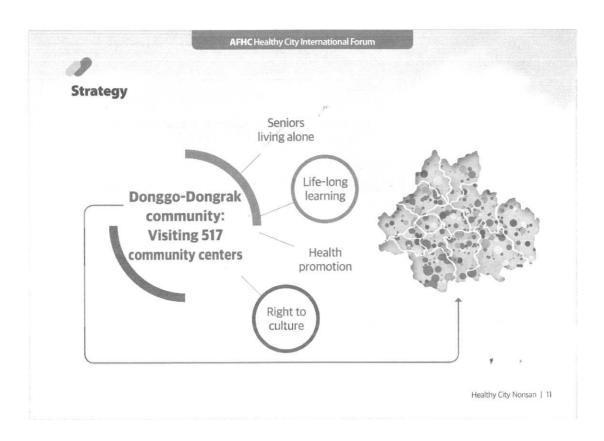
⇒
Residents' Association ange-over

Expansion of budget on participation of local autonomy:

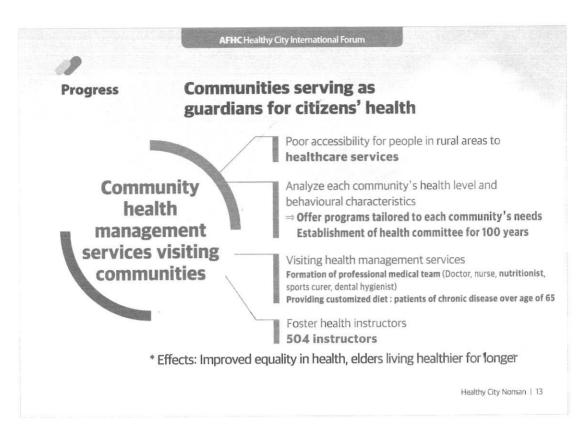
345 cases, 3.265billion won

* Full residence tax support(510million won): Residents' Association Support











Communities serving as schools

Elders finding a new chapter of life Hangeul University

Learning opportunities for elders who were lost amidst the waves of the times

Basic literacy, essay contests, illustrated poem books

* Effects: Elders' right to learn, helping them feel self-esteemed, improved quality of life







Communities serving as concert halls

For and with elders

Masil Music Concerts

Multi-genre performances (Satirical play, circus, magic, etc.) for elders living in the cultural blind spots in rural areas

* Effects: Communication and emotional touches to turn the culturally isolated areas to health communities







Key Outcomes

Donggo-Dongrak Major Achievements

Happy platform Through roles Village community restoration

 Establishment of care service among villagers Troubleshooting keyword (Neighbor care and regards Community building)



Through cultural enjoyment Happiness index rises

 Field satisfaction survey More than 95% satisfied with the results

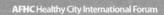


Social Work Creation

2016year 12persons 2017year 47persons 2018year117persons 2019year 130persons



Healthy City Nonsan | 17





Key Outcomes

» Community democracy for and by citizens

» More communities participating in the **Donggo-Dongrak** Project

- Community living
- Hangeul University
- service
- Masil Music Concerts | show 277 times (2017)
- 16 community centers (2016) → 97 centers (2018)
- 22 community centers (2016) → 329 centers (2019)
- Health management | 22 community centers (2016) → 489 centers (2019)
 - → show 676 times (2019)

