The Neighbourhood Health Network – Aragon, Spain

Context

The Neighbourhoods Health Network is part of a long-term initiative focused on work in community action in Aragón. This project is aligned with the Health Plan of Aragón 2030 (1) and the Implementation Strategy of the Health Promotion and Prevention of the Spanish National Health System (2).

Description

The Neighbourhoods Health Network programme was launched in 2018, spearheaded by the Government of Aragon and the Zaragoza City Council. The initiative originated in three neighbourhoods of Zaragoza city: Arrabal, Casetas, and Las Fuentes (3).

The main objective of the Network is to enhance health, well-being, and equity across the diverse neighbourhoods and districts of the city of Zaragoza by promoting community assets tailored to the needs of the local population.



Image 1. Institutional presentation journey

Its specific objectives are:

- Addressing health determinants, while considering the life cycle, fostering resilience during life transitions (such as childhood, adolescence, migration, ageing) and promoting healthy environments to mitigate health inequalities by reducing health inequalities.
- 2. Strengthening the community focus orientation and networking of public services to improve the health and well-being of the local population.
- 3. Establishing neighbourhoods to bolster community health, increase the visibility and empowerment of health assets and encourage community participation in Zaragoza's neighbourhoods.

To facilitate understanding, we will outline the different groups and levels of work established during this process:

- Driver Group Creation: this group includes technical representatives from the Department of Public Health and members of the Zaragoza City Council. Their goal is to analyse the situation within each network and develop a comprehensive work proposal.
- Motor Group Creation: This cross-sectoral includes professionals with experience in community health who stimulates grassroots action within the neighbourhood.
- Health Network Creation: supported by the promoting group, this network consists of citizens and local entities eager to engage in health promotion activities alongside the motor group.

The program formally commenced with the creation of the driver group, consisting of technical representatives who tailored the program to reflect Zaragoza's realities. Subsequently, a motor group was established in each participating neighbourhood. These motor groups included public sector professionals from education, social, and health services, representatives of district or neighbourhood councils, individuals linked to community resources such as health councils or other participation platforms, and third-sector professionals.

Participation in the network is a voluntary decision for individuals and associations active in the neighbourhood that share common values such as mutual respect, trust in their capacity to build cooperative relationships, transparency and reciprocity, and the ability to share a common vision of

neighbourhood needs and health assets. In order to join the network, they must to sign a registration document in which the members commitment to the project's values and mission.

Each network convenes periodically based on its needs, and each motor group produces an assessment report detailing demographics, socio-economic data, health information, community resources, and coordination structures in each neighbourhood. Following this, representatives from each driver group present their findings in an institutional setting. During this day, workshops are organised to analyse the situation in each neighbourhood and encourage participants to get to know each other.

Afterward, the health network was established, and working days were organised in each neighbourhood to identify and prioritize needs. Each network then worked on different initiatives based on these prioritized topics.







Image 2. Arrabal, Casetas and Las Fuentes network meetings

One year after the project's start, each neighbourhood had developed differently, and a journey was undertaken to conduct an early evaluation of the initiative. This day also included formative workshops.

An evaluation of the process was conducted one year after the program's launch (4), showing that the planned phases of development were fulfilled. The evaluation of the three networks showed positive short-term results in a questionnaire administered to the participants. These results included participants' knowledge of new entities (85.45%) and activities (83.56%), the development of synergies (68%), interaction to promote the use of health assets (83.69%), and the creation of coordination structures (81%).

Currently, of the three original networks, two remain active and fully autonomous, while additional networks are being organised.

Conclusions

The Neighbourhoods Health Network has proven to be a locally implemented community actions initiative that fosters synergies within neighbourhoods and develops effective health promotion strategies; it collaborates with various stakeholders and enhances citizen participation in addressing local needs.

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