278 SMART UPBRINGING, RE MUNICIPALITY NORWAY: A NEW MODEL FOR COMMUNITY HEALTH BASED ACTION RESEARCH

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Background In 2011 Re municipality was certified as Safe Community. Re is a small municipality in a rural area in Norway. Over the last 10 to 15 years the development in Re has been of some concern. An increasing number of children and youths struggle to manage their lives. A survey in junior high shows that 20% is depressed. Investment in early childhood can give great results and are well documented in several studies. Programs that take care of the populations physical health has been developed both internationally and in Norway. But when we searched for interdisciplinary programs that address psychological health and prevention during childhood there were none. This lead Re municipality to start a project in 2011, SMART upbringing. **Our vision:** *Resilient children, youths and adults*. SMART has become a model for our municipality to organise a continuously interdisciplinary prevention program that addresses children's mental health in all arenas and prevention levels. Our understanding is that if we affect the children's capacity to be resilient we can prevent mental illness, self harm, drug abuse and falling out of society.

Methods The SMART is inspired by several methods: Values through positive psychology, appreciative action research used to coordinate the efforts on booth micro level and organisational level across all services and social constructions to create a common terminology on strengths through storytelling that identify success in everyday life. Through repeating cycles using appreciative action research together with the children and their family, new knowledge develops. The tools are pictures, stories, films and posters created together with the children. The theoretical fundament is described in 3 books. The tools are used on all arenas in the municipality. Re has hired a sociologist to initiate a study over a period of 3 years to research and develop SMART upbringing.

Results SMART upbringing has become the largest interdisciplinary development project that addresses childhood and prevention of mental health. The culture is changing, and the focus is changing from repairing to preventing. From problems to *strengths*. Teachers, social and health workers reports that they gain better results in their work. SMART is a program that empower the children. We have achieved fewer children need special facilitated teaching from 11.5% to 7.3% (under the average in Norway). Fewer children reports on beeing bullied (under the average in Norway). The children services have received 37% fewer reports on concern of neglect.

Conclusions It is our belief that SMART upbringing can contribute with knowledge on how a municipality can organise continuous interdisciplinary actions that safeguard and promote children's mental health in all services on all childhood arenas.

279 TEAVIISARI – A TOOL FOR BENCHMARKING SAFETY PROMOTION AND INJURY PREVENTION ON LOCAL LEVEL

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Background In Finland, municipalities are responsible for promoting the health and welfare of their residents. Safety promotion and injury prevention are an integral part of health promotion on various fields of municipal action.

Description of the problem Until the launch of TEAviisari, a nationwide benchmarking tool for the management, planning and evaluation of health promotion capacity building (HPCB), there has been very little accurate and comparable nationwide information on health promoting activities in different sectors in Finnish municipalities.

Results Aiming to make measures taken by local authorities visible and to provide information on actions that promote better public health on local level, TEAviisari is based on a generic HPCB framework. The framework consists of seven dimensions: commitment, management, monitoring and needs assessment, resources, common practices, participation and core functions. Safety and injury related topics covered in TEAviisari include but are not limited to prevention of home and leisure accident injuries, inspection of health and safety at schools, home-school collaboration to promote safety, prevention and monitoring of accidents and injuries at school, compiling a local safety plan, evaluating older person's housing safety and having expertise on health and safety technology and assistive devices. The results show that differences between municipalities and schools exist in all topics. The data can be viewed on municipal level or on various geographical or administrative levels. Data for single schools are shown with the permission of the school.

Conclusions TEAviisari shows that it is possible to assess the HPCB of municipalities, serving as a tool for the local government while making it transparent to the residents. Web-based user interface provides a quick access to relevant, interpreted information for decision-makers. TEAviisari is free of charge and available at <http://teaviisari.fi> in Finnish, Swedish and English.

280 KNOWLEDGE BROKERS: COMMUNITY PARTNERS IN YOUTH INJURY PREVENTION RESEARCH

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Background (issue/problem) Building strong partnerships between researchers and the community in youth sport and recreational injury prevention to promote active living and prevent chronic disease is a timely priority. Engaging community partners throughout the research process, from planning to dissemination, is critical to ensure project success, effective knowledge translation (KT) and impact.