

Summary report on the

# Meeting on scaling up the Healthy City programme in the Eastern Mediterranean Region

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Sharjah, United Arab Emirates  
23–24 February 2016



**World Health  
Organization**

Regional Office for the Eastern Mediterranean

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## **1. Introduction**

The WHO Regional Office for the Eastern Mediterranean organized a meeting on scaling up the Healthy City Programme in the Eastern Mediterranean Region in Sharjah, United Arab Emirates, from 23 to 24 February 2016. The objectives of the meeting were to obtain updates on the status of the Healthy City programmes in countries of the Region and to identify achievements and challenges, share lessons learnt from the experience of Sharjah, which is the first officially certified Healthy City in the Region, and agree on priority actions for countries to scale up the Healthy City programme. The meeting was attended by 50 participants from 10 countries: Egypt, Jordan, Islamic Republic of Iran, Kuwait, Morocco, Oman, Pakistan, Saudi Arabia, Sudan and United Arab Emirates with experience in the Healthy City programme and urban health development from the Region. In addition, representatives from the municipalities of selected cities and regional experts on different priority health related programmes attended and shared their insights and experiences.

Urbanization had been growing rapidly over the past two decades and is expected to continue in the coming years, as more than half of the population in the Region lives in urban areas. Urban health challenges are becoming more acute and complex due to unplanned urban growth that puts populations at increasing risk of poor quality of life, poor health coverage, poor infrastructure and sanitation, unsafe drinking water, higher vulnerability to disasters, and hence higher risk of communicable and noncommunicable diseases and injuries. Responding to these challenges, WHO introduced the Healthy City programme more than 20 years ago to address urban determinants of health through participatory governance, a solidarity approach and intersectoral collaboration.

Since 2012, WHO has boosted its technical support to Member States in this area. It established a Regional Healthy City Network (RHCN) website enabling mayors and governors to join the network and share their challenges, success stories, and their experiences on urban health development. The Sharjah meeting was organized to explore ways to scale up the Healthy City programme in the Region.

In the inaugural session H.E. Abdulla Almahyan, Member of Executive Council and Chairman of Sharjah Health Authorities represented His Highness Sheikh Dr Sultan bin Mohammed Al Qasimi, Member of the Supreme Council and Ruler of Sharjah. Dr Hussain Al Rand, Assistant Undersecretary of the Minister of Health, represented H.E. Mr. Abdul Rahman Bin Mohamad Al-Qwais, Minister of Health of the United Arab Emirates.

The meeting was opened by Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean who expressed his appreciation to His Highness Sheikh Dr Sultan bin Mohammed Al Qasimi for his leadership in making Sharjah the first officially certified healthy city in the Eastern Mediterranean Region. He noted that equity and social justice for access to the basic social services including health services had become the guiding principles for development activities and had been emphasized in the Rio Political Declaration on Social Determinants of Health and also by the World Health Assembly in May 2012. As well many of the Sustainable Development Goals were directly or indirectly linked to health and social wellbeing. The Healthy City programme was particularly useful and appropriate for overcoming challenges related to emergencies and refugee populations. He closed by assuring the meeting of WHO's commitment to supporting countries in scaling up the Healthy City programme and to build capacities in its leadership and management.

## **2. Summary of discussions**

During the meeting, an update on the Health City programme status in the Region was shared with the participants along with details of the programme in Sharjah, including steps, roles and responsibilities, achievements, obstacles, and future road map. During discussions, the participants underlined two pillars of programme success to date: leadership commitment and intersectoral collaboration. With regard to the Sharjah experience, discussions highlighted the importance of political support and leadership, team work with clear roles and responsibilities, building capacity, good planning, building a database, establishing performance indicators as per the WHO standards, documentation and reporting, re-direction of available resources and involvement of the private sector along with the technical support of WHO.

Five nongovernmental organizations introduced their initiatives in the context of the Healthy City programme: early detection of cancer breast, promoting breastfeeding, diabetes prevention and control, renal diseases, and addressing the needs of people with special needs. During discussions the participants highlighted the need to amalgamate the activities at the national level under one regulatory body with strong linkages with primary health care. It was emphasized that the main players in the Healthy City programme are local authorities/municipalities, central government, community-based organizations and central audit.

During discussions on the emergency preparedness and response plan in Sharjah the participants highlighted the importance of integrating the preparedness and emergency plans in all strategic plans of different sector. It was noted that there are strong linkages between the Healthy City programme and Sustainable Development Goals and the

programme can be used as a platform to guide the countries of the Region to achieve them in a synergetic manner.

On the second day of the meeting the participants were divided into three groups to visit implementation sites of Healthy City related initiatives and interventions. After the field visits, the groups noted the attention paid to health and well-being, particularly health promotion and education and not only treatments of diseases. The home health care services for the elderly were acknowledged by the visiting groups, as well as the humanitarian city with people with special needs and waste management and recycling process. Detailed action plans, advocacy and documentation were among the salient features and strengths of the programme that were identified by the participants. They noted that these were followed up with close monitoring and supervision using key performance indicators related to the WHO standards. Participants felt that the engagement of different sectors of the population, especially school-age children, enhanced the commitment to and ownership of the programme and hence its sustainability.

### **3. Action points**

#### *Member States*

- Strengthen political commitment and enhance intersectoral action in order to scale up the Healthy City programme.
- Share more experiences including success stories, evidence-building and lessons learnt through the RHCN website and promote the registration of more cities on the site.
- Assess the current situation regarding implementing the Healthy City programme using the WHO short guide in order to build a full



picture for implementing the programme in line with the strategic directions approved by the participants during the meeting.

- Allocate a greater role to civil society during implementation of Healthy City projects.
- Change the mind-set of health workers to be involved in social responsibilities and address social determinants of health during providing health care services.
- Strengthen emergency preparedness and city resilience in the context of the Healthy City programme.
- Conduct action-oriented research and studies to generate more evidence.

#### *WHO*

- Create a platform for south–south collaboration among different cities in the Region.
- Support training of Healthy City experts at national and regional levels.
- Follow up implementation and expansion of the Healthy City programme in the Region.
- Update the Regional Health City Network and facilitate exchange of experiences between countries.



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