Report on
World Health Day 2010
and lessons learnt for the WHO Eastern Mediterranean Region
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Executive summary

For the first time in history, more than half of the world’s population lives in cities, with over one third living in slum areas without adequate basic services, such as schools, water and sanitation, roads, shelter, safe food and quality health care services. It is estimated that by 2030 two thirds of us will be living in urban areas.

“Urbanization and Health” was selected as the theme for World Health Day 2010 in recognition of the effect that urbanization has on our collective health globally and for us individually. Cities are facing different challenges, such as lack of clean water and sewerage facilities, air pollution, environmental hazards, unsafe housing, road traffic accidents, congestion, violence and injuries, unhealthy diets and lifestyle and low levels of physical activity. To tackle these problems does not necessarily require additional funding, but commitment to redirect resources to priority interventions, thereby achieving greater efficiency. Countries of the Eastern Mediterranean Region were active in promoting the urbanization and health theme, using this opportunity to reduce health inequity in their cities through community participation and intersectoral action.

In this regard a web site was created by the WHO Kobe Collaborating Centre for Health Development which encouraged cities to register and commit to addressing city shortcomings and gaps through community participation and intersectoral collaboration. In the Region, 209 cities in the “1000 lives, 1000 cities” global initiative registered and committed themselves to undertaking actions to reduce health inequity at the urban areas. Cities committed to perform actions such as: physical activities, tree plantation, safe driving, cleaning campaigns, no-smoking campaigns and free physical check-ups that will continue throughout 2010.

The Regional Office celebrated World Health Day in the presence of the Deputy Mayor of Tehran, Islamic Republic of Iran; the Mayor of the National Initiative for Human Development, Morocco; the former Minister of Health of Pakistan; a representative of HE Minister of Health, Egypt; and the Governor of Cairo as key speakers. Dr Hussein A. Gezairy WHO Regional Director for the Eastern Mediterranean, in his opening speech shared evidence of the major health challenges faced in five specific urban areas in the Region and asked that evidence should serve as an advocacy tool to influence policy-makers and to facilitate positive change in urban health actions, through implementation of the health city programme. Dr Gezairy highlighted the fact that slum and poor areas of megacities have less access to quality social and health services and urged all stakeholders, city planners, United Nations partners, civil society and community members to work together and to pool resources and efforts to improve urban health and reduce health inequity in urban slums. Similar events took place in all countries of the Region. This document shares the experiences and lessons learnt from seven months’ efforts in preparation of World Health Day 2010 in the Eastern Mediterranean Region.
BACKGROUND

Urbanization and Health was selected by WHO as the theme of World Health Day 2010 in recognition of the effect that urbanization has on our collective health globally and for us individually. The slogan for World Health Day 2010 was “Urban health matters”. The theme “Urbanization and Health” is timely and highly relevant because the majority of the world’s population now live in urban areas and this proportion is expected to grow; urban health should become a major focus of global public health policy. Much of the natural and migration growth in urban populations is among the poor. For the first time in history, more than half of the world’s population live in cities with one third in slum areas without adequate basic services, including quality health care, schools, water and sanitation, roads, shelter, security, safe food, etc. There is also evidence of poorly-planned or unplanned urbanization patterns which have negative consequences for the health and safety of people. This includes increased risk of road traffic injury, heart disease, cancer, diabetes and chronic lung diseases, physical inactivity and unhealthy diets and higher risks for communicable diseases.

Every city has its own unique set of health challenges but countries of the Region are facing a range of common health challenges that all can be accounted for as social determinants of health that are outside the health sector’s domain, including:

- lack of access to safe drinking-water and sustained solid waste management, particularly in slum areas;
- unsafe food and a lack of legislation to monitor and control food safety which causes diarrhoea and other foodborne diseases;
- unhealthy diet and lack of exercise or lack of access to open areas suitable for physical activity and sport;
- road traffic accidents, violence and injuries;
- air pollution, congestion, unsafe housing;
- personal habits, such as smoking, unhealthy lifestyles, eating habits, etc.

According to the study conducted by the Regional Office on the occasion of World Health Day 2010, there is great difference in the access of people living in slum areas with other parts of the studied cities. Many cities face a triple threat to health: infectious diseases exacerbated by poor living conditions; chronic, noncommunicable diseases and conditions fuelled by the use of tobacco, unhealthy diets, physical inactivity, harmful use of alcohol; various types of accidents, injuries, road accidents, violence and crime. The conditions in which people live and work have a strong influence on their health and are known as the social determinants of health. Health is the result of a complex interaction of these underlying conditions or determinants of health. They include an insufficient legal and regulatory framework, low education levels, insufficient infrastructure and services, such as poor housing and a lack of clean water or sanitation that particularly impact the health of the poor and slum dwellers. Living and working conditions vary widely within and between cities across the world and represent the “cause of the causes” of health or ill-health.
Considering all the issues mentioned above there is an urgent need for intersectoral collaboration and community empowerment to tackle health and social challenges in urban areas of the Region and World Health Day 2010 was an opportunity in which all stakeholders, community members, city health and social planners got together and experienced one day of joint activities with the hope that this kind of collaboration would continue throughout 2010 and beyond.

COORDINATION MECHANISM AND OUTCOMES

On 5 May 2009 the Regional Director approved the establishment of a technical working group chaired by the Assistant Regional Director and with a representative from each division as its members. The terms of reference of this technical working group are to set policies, strategies and monitor the progress of World Health Day activities across the Region. The names of members of the technical working group are listed in Annex 1.

Major achievements of the technical working group include:

- preparation of commissioned papers documenting health inequity in five urban slum areas in cities of the Region, namely: Ariana (Tunisia), Cairo (Egypt), Khartoum (Sudan), Rawalpindi (Pakistan), and Sale (Morocco).
- production of World Health Day handbook which covers the detailed results of studies on urbanization and health in selected countries (to be published soon).
- the sending of an invitation letter and letter of cooperation to all ministers of health and ministers of the interior informing them of the World Health Day theme and the “1000 cities, 1000 lives” global initiative. Mayors/governors were encouraged to register their cities by signing the letter of cooperation indicating their active involvement in this year-long theme.
- the dissemination of signed certificates by the Regional Director’s acknowledging the registration of the city in the “1000 Cities, 1000 Lives” global initiative.
- the recruitment of a CBI Communication Officer especially for the work of World Health Day.
- the production of a factsheet folder covering 11 regional priorities namely: birth spacing; social determinants of health; community empowerment; malnutrition; food safety; noncommunicable disease prevention; healthy lifestyles; injury prevention; environmental risk factors; emergency preparedness and response; pandemic prevention and management which impact on urban health;
- the production of advocacy materials and documents containing promotional ideas. This material was then disseminated mostly electronically to countries, respecting the “green” nature of this campaign. Countries then customized the templates to meet their needs and culture.
- the production of background documents such as the Regional Director’s address, the programme of the Day, topics for key speakers and guidelines for a children’s art competition.
• the ensurance of close and effective collaboration between the community-based initiatives programme and other programmes, particularly the media and communication programme.

• the appointing of focal points in country offices to outline follow-up on World Health Day activities.

Representatives of the WHO Kobe Collaborating Centre for Health Development in Japan, other Regional Offices and the community-based initiatives and media and communication programmes also attended the monthly video conferences organized and led by the Kobe Centre. WHO colleagues responsible for World Health Day 2010 in all the Regions had an opportunity to share their experiences, innovative ideas and report progress of the Day’s activities to each other. It was a very effective channel of communication and learning for each Region. Each Region was required to submit a half-page update to Kobe which was posted on the Kobe web site and printed in the World Health Day newsletter.

Advocacy and partnership

Local design and publishing houses were given deadlines to deliver production samples and a committee comprising representatives of different relevant programmes selected two design houses to undertake the production of advocacy material for this event. A sample of advocacy tools and materials can be found in Annex 2. In line with the “green” theme of this campaign” templates of the designs were mostly distributed electronically to the countries, which helped to reduce printing costs. In addition, the timely distribution of advocacy kits and their designs to countries by the middle of March gave countries time to adapt and produce their own materials.

A special word of thanks is given to the following programmes in the Regional Office who actively contributed at different stages of the design, production and distribution of advocacy kits: Graphics and Design; Editorial Graphic and Publishing Support; the Global Arabic Programme; and the Administrative Services Unit.

Factsheets

Thanks to the Coordinator of the Women’s Reproductive Health programme and the Regional Advisers of: Emergency Humanitarian Action; Nutrition; Food and Chemical Safety; Supportive Environments for Health; Healthy Lifestyles; Noncommunicable Diseases; Health Policy and Planning; and Surveillance, Forecasting and Response programmes World Health Day factsheets were developed. The factsheets highlight the issues, challenges and actions taken in 2010 and the way forward in using opportunities created by the Day to improve the community’s awareness of priority health-related programmes and to encourage city planners to put health at the centre of city development.

The factsheets were shared with Member States in Arabic, French and English and covered the following areas in urban settings:
• community empowerment
• birth spacing for promoting maternal and child health
• emergency preparedness and response
• malnutrition and its risk factors
• food safety
• environmental risk factors
• healthy lifestyles promotion
• injury prevention and management
• prevention and control of noncommunicable diseases
• social determinants of health
• pandemic prevention.

Audio/visual material

The following audio and visual presentations, developed by the media and communication programme, were displayed in between the speeches during the inaugural ceremony. A list of the World Health Day advocacy kits can be found in Annex 2.

• a 3-minute film portraying urbanization and health in the Region in combination with extracts from the Regional Director’s World Health Day 2010 video message
• A 30-second global World Health Day short film
• 1000 cities/1000 lives short film
• extracts from the World Health Day global documentary film (subject to availability from WHO headquarters)
• a 3-minute clip showing selected drawings from the children’s art competition in addition to Information, Education, Communication materials.

Registration of cities in the “1000 lives, 1000 cities” global initiative

The “1000 cities, 1000 lives” was a campaign for World Health Day 2010 that called upon all cities worldwide to open up portions of their streets to people to promote health activities for one day during the week of 7–11 April 2010. A web site was established by the WHO Kobe Centre in which city planners and civil society were encouraged to register their cities in the global initiative to show their commitment to improving health and quality of life at the city level.

Thanks to the Regional Director’s continuous support and Member State’s positive engagement, the WHO Regional Office has been among the most proactive regions and so far has registered 209 cities from all 22 countries of the Region have registered in the initiative. The names of the registered cities are listed in Annex 3.

WHO Regional Office will continue to provide technical support to these 209 cities beyond World Health Day and will encourage them to be recognized as healthy cities. This requires that governments lead the formation of the city health forum participated in by representatives from different development sectors and the community, needs assessment and
plan to fill gaps at the urban areas. WHO will assist cities to introduce healthy hospitals, healthy schools, healthy workplaces and healthy market initiatives.

WORLD HEALTH DAY CELEBRATION AT THE REGIONAL OFFICE

The World Health Day ceremony, conducted at the WHO Regional Office for the Eastern Mediterranean, began with a speech by Dr Hussein A. Gezairy, WHO Regional Director for the Eastern Mediterranean. He highlighted five evidence-based case studies from five different countries in the Region, which provided evidence of the major health challenges faced in urban areas of the Region: Ariana in Tunisia, the Cairo slum area of Baten El Bakra in Egypt, Sale in Morocco, Khartoum in Sudan and Rawalpindi in Pakistan. Dr Gezairy explained that this evidence should serve as an advocacy tool to influence policymakers and facilitate positive change in urban health actions, particularly through the implementation of the healthy city programme. Attention was drawn to the fact that the slum and poor areas of these cities have a higher incidence of infant and maternal mortality, higher rates of depression, higher child malnutrition, male gender bias in education and a high level of substance abuse. Health inequity and poor quality of life were also underlined as key concerns. Dr Gezairy ended his speech urging all stakeholders, city planners, United Nations partners, civil society and community members to work together and to pool resources and efforts to improve urban health and reduce health inequity in urban slums.

In order to provide further clarification on major issues surrounding “Urbanization and Health” four key topics were selected and presented by influential dignitaries who were invited from Islamic Republic of Iran, Morocco, Pakistan, and Egypt.

Dr Sayed Hadi Ayazi, Deputy Mayor of Tehran, on behalf of the mayor HE Mr Ghalibaf, discussed intersectoral collaboration and community empowerment in Tehran. He outlined the key requirements to achieve good health: a good state of physical and mental health, wholesome food, clean drinking-water, unpolluted air, rewarding employment, a sense of belonging and self-esteem, and suitable and safe housing.

In addition, he said that people must be presented with a variety of choices so as to be involved in the decision-making process. The key role of the Mayor is to facilitate
multisectoral action and community involvement; this is one of the most crucial elements for urban health development. He proposed that the Tehran municipality arrange a field visit of key stakeholders, including mayors of mega cities from the Region, to witness and share experiences in the field of health. He also proposed inclusion of “Urban Health” on the next agenda of the Asian Mayors Assembly. He said that Tehran was also ready to share its experiences on implementation of the “Urban Health Equity Assessment and Response Tool” (Urban HEART) with countries of the Region who were interested in implementing Urban HEART to reduce health inequity in urban areas.

Ms Nadia El Guermai, the Governor of the National Initiative for Human Development in Morocco, discussed political commitment and leadership based on the commitment of high-level authorities in Morocco to achieve the targets of the Millennium Development Goals (MDGs). Ms El Guermai identified the main force behind good governance as strong institutions, a judicious legal framework and the development of consensus. Achieving equity, skilled manpower, community empowerment, allocation and an efficient use of resources requires political commitment at the highest level. In Morocco, the leadership connects all the key and vital ingredients of a joint action programme for health.

Dr Ejaz Rahim, former Minister of Health, Governor of Pakistan and Member of the WHO Kobe Centre advisory committee, raised the issue of health inequity in urban slums. Dr Rahim explained that owing to population growth and increasing migration from rural settings to urban areas, especially slum areas, was a major challenge. Slum areas pose increasing health threats to other city dwellers. They are an “efficient” breeding ground for epidemics, pandemics and noncommunicable diseases; furthermore, crime, use of illicit drugs and other social vices can be nurtured in slums. The slum areas interface between the rural and urban poor. The Pakistan experience demonstrates that in order to address this problem, a balanced approach of attention to both urban and rural development is necessary.

Dr Abelazim Wazir, the Governor of Cairo, talked about health equity and social justice. He said that currently the average out-of-pocket health expenditure bordered on catastrophic expenditure for the poor trying to access quality health care services. The
challenge lay in governments providing universal coverage that guaranteed equity and social justice.

The meeting continued with the signing of a memorandum of understanding on partnership between the Kuwait Patient Helping Fund and the WHO Regional Office and an exhibition of the work of the children taking part in the art competition. A copy of the programme for World Health Day at the Regional Office is included as Annex 4.

**The children’s art competition**

The Regional Office received over 1400 paintings from children from various countries. A selection committee selected the winners aged between 8 and 18 years old, including a special category of 17 children with physical disabilities. In light of their disability these children’s immense effort and talent will be awarded and continue to be highlighted throughout the campaign. The top winners from the different age categories included children from Egypt, Islamic Republic of Iran, Bahrain and Oman. Seven runners-up were also selected from the shortlisted paintings to ensure equality and encourage the continued participation of all countries in next year’s competition.

**World Health Day celebration in the Children’s Park**

In view of the memorandum of understanding between WHO and the Egyptian Red Crescent, and as a part of the celebrations of the Day under the theme of “Urbanization and Health”, the Egyptian Red Crescent, thanks to its current head and former Minister of Health Dr Mamdouh Gabr and the Director General Dr Magda El Sherbibi, agreed to join forces to celebrate and organize healthy activities that took place in the Children’s Park opposite the Regional Office. The event in the park was divided into five stations and activities were led by 80 children/youths.
Each station required attendees to watch the show for 10–15 minutes and was organized as follows.

- Station 1: Health promotion tent providing IEC health promotion materials.
- Station 2: Interactive show on road safety and first aid with volunteers demonstrating how they conduct road safety courses.
- Station 3: Youth as agents of behavioural change demonstrating youth’s role in promoting community behavioural change.
- Station 4: Sports karate show promoting physical health activities.
- Station 5: Art and drama activities.

There was also a mini marathon as well as an area allocated for people to paint on a big blank canvas. A tree was planted by Dr Wazir, the Governor of Cairo, to mark the event. Light healthy refreshments and snacks were served and festive music was played. The event was thoroughly covered by the press.

The role of WHO volunteers

WHO staff members from different programmes volunteered to assist in the coordination and organization of the celebration. The tasks undertaken by the volunteers included organizing World Health Day displays and stands, displaying the children’s art work, working as ushers, distributing various advocacy and technical materials covering the theme: “Urbanization and Health”, as well as numerous other tasks. The volunteers’ great input into the Day cannot be understated, through additional internal collaboration in cooperation with external partners the celebration proved to be a great success. A list of the volunteers is included in Annex 1.
WORLD HEALTH DAY CELEBRATION IN COUNTRIES

Djibouti

The World Health Day celebration was launched at the Community Health Centre of Farah-Had by the General Secretary of the Ministry of Health, Deputy Mayor of Djibouti, WHO Representative and the participation of all UN agencies, public and private sectors and 16 health committees of Djibouti City and civil society. On 8 April, an awareness session on hygiene and the importance of urban health was held for the pupils at a primary school. On 9 April a clean-up campaign was conducted in 16 sectors of Djibouti city through the health committees. The Mayor of Djibouti declared a major clean-up campaign from 20 to 27 April 2010 in Djibouti. Community participation in environmental health activities was the main outcome of this intervention; in addition radio, television and the press were mobilized to cover the different activities conducted from 7 to 12 April 2010.
Egypt

Eleven governorates participated in the event: Cairo, Giza, Port Said, 6th October, Helwan, El Qaliobia, Al Sharkia, North Sinai, Aswan, Alexandria and Kafr El Sheikh. Two representatives of the media, who are recognized as community leaders, worked with the WHO Representative’s Office to involve the media at country and regional level, using different types of media to document success stories, interview governors and well-known artists and influential people and disseminate success stories through newspapers and television programmes during the campaign to draw peoples’ attention to World Health Day.

The Governor of Giza and the Governor of Cairo celebrated the Day in front of the pyramids and International Park and in attendance were heads of UN agencies, the ministry of health, the media and other interested groups and individuals. Athletic, artistic and cultural activities, family walks, anti-smoking, anti-drug and environmental campaigns, tree planting, and social solidarity activities, visits to the houses of the elderly and orphanages, school health education programme for cancer awareness, free physical check-up camps and mammography, blood donation, awareness and stands against female genital mutation, were among the activities of the Day.

A demonstration of sporting activities

Students performing a special show
Islamic Republic of Iran

World Health Day 2010 was celebrated in Razi International Conference Hall, Iran University of Medical Sciences, on 11 April 2010. The opening ceremony was attended by high-level officials, chancellors of universities of medical sciences, journalists, representatives of the media, diplomatic missions and representatives of UN agencies located in the country. The Minister of Health and Medical Education said the tenth government objective was to implement and promote health equity. During the ceremony, certificates of appreciation were presented to individuals who had contributed positively towards health promotion in the country. It was also celebrated by the ringing of bells in schools throughout the country. The Minister of Health and Medical Education visited a school in Tehran to promote the theme of urbanization and health. The event was celebrated during Health Week in the country from 7–13 April, implemented through different activities involving schools, universities and health centres within the country. As of 18 April 2010, 67 cities from the Islamic Republic of Iran had registered in the global initiative “1000 cities 1000 lives”.

World Health Day celebration Iran University of Medical Science and Health Services, Tehran

HE Minister of Health and Medical Education inaugurating the World Health Day celebration
Iraq

25 Iraqi cities registered in the global initiative “1000 cities, 1000 lives”. Those cities will be implementing a variety of activities throughout the year, reflecting the multidimensional nature of the theme to raise awareness of health issues, increase community solidarity and access to health services, including usage of health volunteers and improvements in environmental health.

The Ministry of Health, along with thirteen other ministries marked the launch of the World Health Day campaign in Baghdad Al-Rassafa on Thursday 8 April, under the patronage of H.E. the Minister of Health. Dr Ihsan Jaafar, Director-General for Public Health, opened the community-based ceremonies which featured school celebrations and a students’ art exhibition, awareness campaign and screening for hypertension by the local primary health care centre, registration of families for early childhood vaccination and promotion of healthy messages on the effects of urbanization on health.

The ceremonies were attended by over 500 community members and students from local schools, as well as 150 representatives from participating ministries and other officials. In Sulaimaniyah City, more than 750 community members, students and health professionals were involved in conducting awareness campaigns, singing school songs and performing dance at the city’s Azadi Park, where local community-based organizations and government officials carried out health promotion activities and sponsored a healthy food fair open to the public. For the start of festivities on 11 April, a march was organized by students, health workers and government officials from the city centre to the Azadi Park, closing off the main street in celebration of World Health Day.

The city of Kirkuk, in spite of being one of the most insecure places in Iraq, joined in the celebrations by organizing a 5k walk of decision-makers, health workers and community members in the main street of the city to promote healthy lifestyles.
Lebanon

World Health Day 2010 was celebrated in Lebanon on 7 April under the patronage of H.E. the Minister of Public Health, in coordination with the Ministry of Interior and municipalities. The event opened with a press conference. Beirut, Sin El-Fil, Baakleen, Furn El-Chebak and El-Chiyah, in addition to Mar Elias camp and its surrounding area in Beirut, all registered to join the “1000 cities, 1000 lives” global initiative and implemented a variety of activities through the conducting of a national campaign under the slogan “My Country, My City, My Health”. The activities included the organization of a health and environment fair in downtown Beirut and El-Chiyah; the planting of trees and conducting of a forestation campaign and converting of a waste dumping site to a public garden; no-smoking day; the convening of a neighbourhood festival; the conducting of awareness-raising sessions in schools on the rights of children and youth; the visiting of elderly people and provision of healthy food; the holding of a free physical check-up day; conducting visits to restaurants and bakeries for inspection of their practices related to food safety and distributing related awareness-raising brochures/flyers; the conducting of physical activities; and the promotion of good driving habits.
Libyan Arab Jamahiriya

The event took place through the organization of five seminars, the objectives of which were to promote health and urbanization through targeting schools and university students to build their awareness. World Health Day 2010 was celebrated on 14 April 2010 and participants were invited from different sectors, including representatives of schools, hospitals, government, oil companies and embassies, etc. Activities took place at Al Jafara City, such as the cleaning of roads and schools and the stopping of traffic for one day, with the collaboration of the Minister of Health. The media were invited to cover the event.
World Health Day was celebrated in Muscat, Sohar, Sur, Nizwa and Salalah cities. The activities conducted on the Day included a walkathon extending from the Ministry of Health building to the Ministry of Oil and Gas building in Muscat. In other cities the activities included a range of exhibitions on road safety, provision of emergency first aid in ambulances, blood donation campaign, mobile drug show and an exhibition about the role of civil defence in communities, sport activities, traditional Omani games, a cultural show, an agriculture show, a children’s campaign and quizzes. Salalah city arranged for a walkathon from Salalah Port to Al Nahda roundabout, conducted lectures and health check-ups at all health institutions, and open day activities that comprised a series of activities from the launch of Salalah healthy city’s web site to physical activities, kids entertainment and an amusement band among other attractions for adults and children alike.
Ramallah and Nablus Municipalities in the West Bank and Burij Camp in the Gaza Strip celebrated World Health Day 2010 on 8 April in different cities through several activities organized and implemented with the participation of different civil society organizations. Government and high-level city officials in Ramallah showed their commitment to working towards achieving healthy Palestinian cities and a better life for their inhabitants. Anti-smoking campaigns, free medical check-ups, supporting the poor, conducting awareness campaigns for school children on nutrition and road safety, tree planting and family walk, environmental health and sport activities for people with physical disabilities were among the main activities of the Day in Nablus and Ramallah. Also in the Gaza Strip, the Day 2010 was celebrated in Rafah, in cooperation with the Ministries of Health, Education and Youth and Sports and Rafah Municipality through organizing a march in Rafah city with the participation of two schools wearing T-shirts and caps with logos of World Health Day 2010 and WHO. The march ended in the sports stadium, where the schools performed folkloric dances and art pieces.
Pakistan

World Health Day 2010 was celebrated in the province of Baluchistan in Pakistan, in collaboration with different partners at Quetta city. Ms Ghazala Gola, the provincial Minister for Women’s Development was the chief guest of the event. More than 250 participants from different health departments, nongovernmental organizations and other sectors also attended the event.

Dr Shahnawaz Khan from the Rural Support Programme in Balochistan discussed healthy cities and urban governance. He said that the WHO healthy city programme engaged local governments in health development through a process of political commitment, institutional change, capacity-building, partnership-based planning and innovative projects.

Ms Ghazala Gola congratulated WHO and organizing partners for a successful event on World Health Day. She showed her commitment for women’s urban health development and assured everybody that she would raise and discuss urban health issues in the Provincial Assembly. There was remarkable media coverage of the event.
Qatar

On the occasion of World Health Day 2010, Qatari Health Authorities held a seminar to discuss different aspects of the theme “Urbanization and Health”. The seminar included several lectures and presentations given by a wide range of experts representing the Ministries of Environment, Municipalities and Constructive Planning, and Interiors, in addition to schools of medicines.

Birth spacing, emergencies and preparedness, safe drinking-water in Qatar, road safety, food safety and noncommunicable diseases were the main issues discussed during the seminar. The seminar was held under the patronage of H.E Abdullah Ben Hamad Al-Kahtani, Minister of Health, whose speech was read at the opening of the event, focusing on the importance of community participation, multisectoral collaboration and the role of awareness in alleviating the health hazards of urbanization. A televised message by Dr Hussein A. Gezairy, WHO Regional Director for the Eastern Mediterranean, was displayed at the inauguration ceremony for the event.

World Health Day celebrations in Qatar
Saudi Arabia

An event organized at King Abdul Aziz cultural centre in Riyadh under the patronage of the Prince Ahmed bin Abdullah bin Abdul Rehman Al-Saud. The Prince in his speech committed to implementing a variety of activities throughout the year reflecting the multidimensional nature of urbanization and also to strengthen multisectoral action to promote health and economic development in the city. In addition, an exhibition was held on urbanization and health supported by governmental and nongovernmental agencies.

Bisha, Bukariyah, Al-Khobar, Al-Qunfudha and Zulfi city all registered to take part in the global initiative. In Zulfi city, the main street was closed to vehicles to organize a community walk for health promotion. Influential people, celebrities, sports personalities and people with physical disabilities participated in the event. There was an activity of bicycle riding by school students at Zulfi and Bukariyah. In Qunfudha, a women’s walking event was organized on the corniche. Darriyah and Bisha city arranged the exhibition with support of government and nongovernmental agencies in which people were screened for blood pressure and diabetes. Jeddah city also participated with a range of different activities with the most major activity taking place on the Jeddah coast on 8 April with the participation of H.E. Abdulaziz Khoija, the Minister of Culture and Media of Saudi Arabia. This emphasized the importance of healthy lifestyles among leaders and the community. The media at country and regional level covered the event extensively. The pictures and videos related to the events are also posted on the web site of the Regional Office for the Eastern Mediterranean and You Tube. The country intends to continue implementing activities promoting urbanization and health.
Somalia

Eight cities (Burao, Berbera, Bosasso, Galkayo, Garowe, Hargeisa, Merka and Mogadishu) signed up to take part in the global initiative “1000 cities, 1000 lives”. The day was celebrated in the above-mentioned cities with a number of activities taking place in line with the theme of ‘urbanization and health’. These included: free access to health services, clean-up campaign, health forums, tree planting, no-smoking campaign, family walk, health forums, football match and school art competition. Other key highlights of World Health Day in Somalia include an initiative dubbed “reaching the people in Somalia with health messages through SMS”. Key health messages were disseminated with the support of three mobile service providers in Somalia—the Nationlink, Hormuud and Telesom—reaching an estimated 2.2 million people. The use of mobile phone technology demonstrated that health promotion can still take place amid the current challenging situation in parts of Somalia; thus demonstrating the value in making use of innovative communication means in order to raise awareness on health-related issues.
The department of health education and media in Ras El Kheima, in cooperation with the Emirati Red Crescent, the municipality of the city and other partners and sectors in the government, celebrated World Health Day 2010 on 7 April through arranging a variety of activities aimed at improving health awareness among the community. These activities included: 1 km marathon with 150 runners participating from different age groups, pitching of a healthy tent with check-ups for diabetes, cholesterol levels, weight and body mass index and triglyceride tests. After the marathon, there was a health exhibition displaying posters, brochures, health newsletters and educational books, in addition to the conducting of awareness-raising sessions about the dangers of smoking and obesity and lack of exercise. More than 300 persons visited the tent and the exhibition. The Department of Preventive Medicine organized a seminar on the theme of the day in Ras El Kheima city.
Yemen

World Health Day 2010 was celebrated in three cities: the capital Sana’a, Taiz and Aden although five cities registered to join the “1000 lives, 1000 cities” global initiative. The activities in Sana’a included two marathons which were organized for people with physical disabilities and youth. They started at Al-Dhorafi playground and ended at Bab Al-Yaman (the main square of the old city). A walk was also conducted led by two ministers and other government officials, UN staff and representatives of nongovernmental organizations; they were accompanied by a military ensemble/band. The walk started in Al-Othery Square and ended in Bab Al-Yaman, where the ceremony took place. At the end of the walk an awards ceremony was organized for the winners of the marathons followed by speeches by dignitaries. Furthermore, there were a number of other activities that were common among the three cities including: Friday holy sermons in the mosques incorporating messages about the importance of health care in the healthy cities; tree planting; visiting people with special needs and orphanages; inspection campaigns for school cafeterias; promotion of good driving habits, sports days; television shows to discuss social and economic issues and health priorities; school activities and competitions; and the distribution of materials, posters, pamphlets about healthy diet, tobacco control and healthy habits. The Government is now committed to making the selected cities healthier and cleaner. Notably activities such as tree planting and the promotion of healthy lifestyles will be regular activities in the selected cities.
LESSONS LEARNT FROM THE CAMPAIGN

Planning and management

- The selection of the theme “Urbanization and Health” was a fundamental component of the campaign as it encouraged governmental and intersectoral collaboration.
- Government commitment and involvement had an immense impact on campaign progress in terms of the extent that nongovernmental organizations and ordinary citizens were able to participate.
- Excellent support from senior management was a key feature of the campaign.
- The establishment of a technical working group for World Health Day and the establishment of two selection committees—one for design selection and the other for the school art competition—were constructive techniques to assist in the decision-making process.
- Advance and thorough planning enabled teamwork, mobilization and coordination among the different programmes in the Regional Office. Each programme’s capacity was beneficially exploited.
- The role of the WHO Representatives proved to be a key indicator in terms of country progress for World Health Day and the number of cities registered.
- The participation of four key speakers from different countries presenting a different topic related to the theme of World Health Day was a new innovation.
- Certificates of acknowledgement were dispatched to each city that registered serving to encourage the registration of additional cities and providing a sense of ownership.

Collaboration and partnership

- Internal collaboration and cross programme involvement encouraged teamwork and campaign ownership.
- Close contact with the WHO Kobe Centre in Japan was extremely beneficial given the immense support they provided.
- Benefiting from pre-established ties, strengthened intersectoral collaboration proved invaluable. The memorandum of understanding signed between the Egyptian Red Crescent Society and WHO assisted in facilitating their joint participation in the Children’s Park event, which represented a new successful innovation. Outdoor events create healthy environments which promote communal participation.
- Selected Regional Office staff worked as volunteers for World Health Day, a new initiative illustrating that many people were willing to assist and offer their spare time for the event.
- Seeking assistance from young students was extremely useful in relation to the school children’s art competition; their dedication and hard work was remarkable.

Reporting mechanism, communication and documentation

- The development of an evidence-based report founded upon case studies from five countries of the Region was an innovative successful approach.
• The progress report sent to the Kobe Centre each month allowed the CBI programme to keep track of all achievements and developments made at the regional and country level prior to the event.

• Good documentation of activities was undertaken at the regional level and in some cases at country level, which was essential to produce reports and ensure campaign sustainability.

• The interactive map created by the Kobe Centre showing the registered cities influenced additional city registration and created a competitive environment among countries.

• Monthly video conferences and teleconferences facilitated the opportunity for countries to share their experiences while stimulating competition between them.

• Regular contact, weekly phone calls to country focal points ensured that pressure and campaign momentum was maintained encouraging further city registration.

• Establishing close relationships with country focal points was essential to the campaign’s success and the large of number of registered cities.

• Continuous contact and coordination with the design and event company, including a thorough briefing before World Health Day, produced positive results on the day.

• The advance dispatching of advocacy materials to countries was essential, particularly to those in conflict.

• Electronic advocacy materials were available on the World Health Day web site in line with the “green” theme of the campaign.
### Annex 1

**LIST OF WORLD HEALTH DAY CONTRIBUTORS**

<table>
<thead>
<tr>
<th>Table 1. List of focal points/contact people for World Health Day</th>
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</thead>
<tbody>
<tr>
<td><strong>Country</strong></td>
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<tr>
<td>Afghanistan</td>
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<tr>
<td>Bahrain</td>
</tr>
<tr>
<td>Djibouti</td>
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<tr>
<td>Egypt</td>
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<td>Islamic Republic of Iran</td>
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<td>Iraq</td>
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<td>Jordan</td>
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<td>Kuwait</td>
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<td>Lebanon</td>
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<td>Libyan Arab Jamahiriya</td>
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<td>Morocco</td>
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<td>Oman</td>
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<td>Pakistan</td>
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<tr>
<td>Occupied Palestinian territory</td>
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<tr>
<td>Qatar</td>
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<td>Saudi Arabia</td>
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<td>Somalia</td>
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<td>Sudan</td>
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<td>Syrian Arab Republic</td>
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<tr>
<td>Tunisia</td>
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<tr>
<td>United Arab Emirates</td>
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<tr>
<td>Yemen</td>
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</tbody>
</table>
Table 2. List of the regional task force

Dr Abdullah Assa’edi as Chairman
Dr Sameen Siddiqi, Coordinator HCD
Dr Mohamed Elmi, Acting Coordinator SEH
Mr K. Khoshchashm, TO/ PME
Dr Gabriele Riedner, RA/ASD
Dr Jaffar Hussein, RA/ HLS
Dr Irshad Sheikh, MO/ EHA
Mr Omid Mohit, TO/MAC
Dr Mohammad Assai, RA/CBI, as Secretariat

Table 3. Contributors to country reports

WR Djibouti: Dr Mostafa Tyane
WRO Egypt: Dr Mona Abou El Naga
WRO Iraq: Mr Rabeen Pasha
WRO Islamic Republic of Iran: Ms Shadrokh Sirous and Ms Parisa Ardam
WRO Lebanon: Ms Nohal Alhomsi
WRO Libyan Arab Jamahiriya: Mr Amjed Musa
WR Oman: and her team: Dr Jihane Tawila, Ms Suha Battash and Ms Ruth Mabry
WHO Office Palestine: Dr Motasem Hamdan
WRO Pakistan: Dr Ghulam Nabi Kazi
MOH Qatar: Jassim Fakhroo
WRO Saudi Arabia: Mr Gamal Abo Issa
MoH Saudi Arabia: Mr Falah Mazrou
WRO Somalia: Dr Humayun Rizwan, Ms Lucie Ngugi
WRO Yemen: Mr Abdulmalik Mofadal and Ms Mona Al Mudhwahi
MoH United Arab Emirates: Fadila Shareef

Table 4. Volunteers from the Regional Office

Joana Vogel, Regional Adviser, Gender and Health Development
Hatem Nour El Din, National Professional Officer, Library and Health Literature Services
Marwa El Saghir, Senior Secretary, Research Policy and Cooperation
Hoda El Sabbahi, Senior Secretary, Health Care Delivery
Wafaa Abd El Raouf, Technical Assistant/Logistics Support to Programme
Nahla Ahmed, Secretary, Graphic Design
Hala Orhan, Senior Secretary, Gender and Health Development
Mazen el Abbar, Senior Technical Assistant, Printing and Marketing of Publications
Mohamed Nour, Team Leader, GSM Support
Ossama Reda, Clerk, Distribution and Sales/Printing and Marketing of Publications
Annex 2

WORLD HEALTH DAY ADVOCACY KITS

Brochure on health inequity

A foldout brochure was developed and distributed on World Health Day based on five case studies carried out in Ariana (Tunisia), Cairo (Egypt), Khartoum (Sudan), Rawalpindi, (Pakistan) and Sale (Morocco). The aims of these studies were to: document the regional experience on health inequity in five cities; to encourage city planners and policy-makers to pay more attention and allocate additional resources to the urban poor; use evidence to plan and improve the quality of life of the poor living in the urban slums, as a model.

Posters and roll up stands in Arabic, French, and English
Mouse pads

Badges and mugs

CD covers and labels
Annex 3

### NUMBER OF REGISTERED CITIES

<table>
<thead>
<tr>
<th>Country</th>
<th>No of cities registered</th>
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</thead>
<tbody>
<tr>
<td>Afghanistan</td>
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<tr>
<td>Djibouti</td>
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<td>Bahrain</td>
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<td>Iraq</td>
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<td>Islamic Republic of Iran</td>
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<td>Egypt</td>
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<td>Jordan</td>
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<tr>
<td>Kuwait</td>
<td>1</td>
</tr>
<tr>
<td>Lebanon</td>
<td>8</td>
</tr>
<tr>
<td>Libyan Arab Jamahiriya</td>
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</tr>
<tr>
<td>Morocco</td>
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<tr>
<td>Oman</td>
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<tr>
<td>Pakistan</td>
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</tr>
<tr>
<td>Occupied Palestinian territory</td>
<td>3</td>
</tr>
<tr>
<td>Syrian Arab Republic</td>
<td>7</td>
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<tr>
<td>Somalia</td>
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<td>Saudi Arabia</td>
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<td>Yemen</td>
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<tr>
<td>United Arab Emirates</td>
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<tr>
<td>Sudan</td>
<td>13</td>
</tr>
<tr>
<td>Qatar</td>
<td>1</td>
</tr>
<tr>
<td>Tunisia</td>
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<td><strong>Total</strong></td>
<td><strong>209</strong></td>
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</tbody>
</table>
### Annex 4

#### WORLD HEALTH DAY 2010 PROGRAMME

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker/Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:30–10:30</td>
<td>Private meeting of key speakers with Regional Director, Deputy Regional Director, Special Policy Adviser and Assistant Regional Director</td>
<td></td>
</tr>
<tr>
<td>10:30–10:35</td>
<td>Recitation of the Holy Qur’an</td>
<td>Dr. Ahmed Neinaa</td>
</tr>
<tr>
<td>10:35–10:55</td>
<td>Opening message by WHO Regional for the Eastern Mediterranean</td>
<td>Dr. Hussein A Gezairy</td>
</tr>
<tr>
<td>10:55–11:05</td>
<td>Intersectoral collaboration and community empowerment in Tehran</td>
<td>Dr. Mohammad Bagher Ghalibaf, Mayor of Tehran</td>
</tr>
<tr>
<td>11:05–11:15</td>
<td>Political commitment and leadership in Morocco related to health and human development</td>
<td>Ms. Nadira El Guermai, the Governor of National Initiative for Human Development</td>
</tr>
<tr>
<td>11:15–11:25</td>
<td>Alleviating health hazards in slum areas of Pakistan</td>
<td>Dr. Ejaz Rahim, Former Minister of Health, Gov of Pakistan, and member of the WKC advisory committee</td>
</tr>
<tr>
<td>11:25–11:35</td>
<td>Health equity and social justice in Egypt</td>
<td>Dr. Abdelazim Wazir, Governor of Cairo</td>
</tr>
<tr>
<td>11:35–11:45</td>
<td>Speech by the Minister of Health, Government of Egypt</td>
<td>Dr. Nasr El Sayed, Minister’s Assistant for Preventive Affairs, Primary Health Care and Family Planning</td>
</tr>
<tr>
<td>11:45–11:50</td>
<td>Signing of memorandum of understanding on partnership between the Kuwait Patient Helping Fund and WHO Regional Office</td>
<td></td>
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<tr>
<td>11:50–12:00</td>
<td>Exhibition of the children’s art competition</td>
<td></td>
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<tr>
<td>12:00–13:00</td>
<td>Open discussion with the media and participants</td>
<td></td>
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<tr>
<td>13:00–14:00</td>
<td>Celebration in the Children’s Park, including refreshment</td>
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