

## KUCHING HOSTS INAUGURAL CONFERENCE

The Inaugural General Assembly and Conference of the Alliance for Healthy Cities (AFHC) was successfully held on 12-14 October 2004 in Crowne Plaza Riverside Hotel, Kuching with the theme 'Bringing Healthy Cities to Greater Heights through Stronger Networking and Community Empowerment'. The conference was attended by 352 participants, which included

### - Bringing Healthy Cities to Greater Heights through Stronger Networking and Community Empowerment -



Photo: Official Opening Ceremony of the Alliance for Healthy Cities Inaugural General Assembly and Conference

146 from outside of Malaysia and 206 from Malaysia. It was significant that this inaugural conference was hosted by Kuching, Sarawak, Malaysia, which has contributed in spreading the Healthy Cities programme in the Western Pacific region since 1994.

The Conference was officially opened in the morning of 12 October by Tan Sri Dr. George Chan, Deputy Chief Minister of Sarawak who was representing the Chief Minister of Sarawak. Mr. Shigeru Omi, the Regional Director of WHO Western Pacific Region; Mdm. Lourdes C. Fernando, the Mayor of Marikina City, Philippines cum the chairman of Interim Steering Committee; Hj. Madehi Kolek, Mayor of Kuching North; Y.B. Chan Seng Khai, Mayor of Kuching South; and other delegates were also present during the opening ceremony. WHO presented WHO Awards for Healthy Cities 2004, the first awards of this kind from WHO, to cities specially recognized for their outstanding achievements in their Healthy Cities Project as well as for promising project proposals in maintaining and improving the quality of life of urban population.

[\[cont. on pg. 2\]](#)



Photo: Official Opening Ceremony of the Alliance for Healthy Cities Inaugural General Assembly and Conference by Tan Sri Dr. George Chan (center), Deputy Chief Minister of Sarawak

### Message from WHO/DG

#### On the Occasion of the Inaugural General Assembly and Conference of the Alliance for Healthy Cities

I am pleased to offer my sincere congratulations on the occasion of the Inaugural General Assembly and Conference of the Alliance for Healthy Cities taking place in Kuching, Malaysia from 12-14 October 2004.

Towns and cities across the world are growing at unprecedented rates. In the year 2000 almost half of the world's population lived in cities and by 2050 this will have increased to two-thirds: six billion people. If current trends continue half of these people will be slum dwellers who will likely have little access to water or sanitation and will be subject to poverty and disease.

The health promotion movement "Healthy Cities", which has its origins in the Ottawa Conference and Charter for Health Promotion, has a major contribution to make to the health and well-being of all urban dwellers, and particularly for the disadvantaged.

Therefore, the work of the Alliance towards improving the health of urban residents with the theme of "Bringing Healthy Cities to Greater Heights through Stronger Networking and Community Empowerment" is of the greatest importance. The World Health Organization strongly supports the goals of the Alliance in its pursuit of realizing healthy cities for all.

I look forward to the continuing collaboration between the Alliance for Healthy Cities and the World Health Organization and wish you every success with the upcoming General Assembly and Conference.



LEE Jong-wook  
Director-General

World Health Organization





Photo: Inaugural General Assembly of AFHC

The keynote address was delivered by Mr. Shigeru Omi, the Regional Director WHO Western Pacific Region on the topic 'Health and Civilization - Challenges for the 21st Century'.

These were the three plenary papers presented at the conference:

- Bringing Healthy Cities to Greater Heights through Networking
- Bringing Healthy Cities to Greater Heights through Community Participation
- Bringing Healthy Cities to Greater Heights through Capacity Building

As for the business of AFHC, a Pre-Assembly Meeting, the AFHC General Assembly, and the AFHC Steering Committee Meeting were held and major decisions on the organization were made [See Details on pg. 10]

Seven tracks of parallel symposia were held on 14 October 2004 with a total of 48 presentations based on various developments of Healthy Cities. The topics of the tracks were: Planning, Collaboration and Partnership; Lifestyle and Health Promotion; Physical Environment; Community Participation; City Recreation and Tourism; and Research and Evaluation. The presenters were Healthy Cities practitioners and academics.

Exhibitions and poster presentations were also held during the conference, with the objectives of sharing the Healthy Cities experience and spreading the messages to the participants. There were 30 poster presentations of Healthy Cities and Healthy Settings and initiatives by various international and local Alliance members, delegates and observers. Visual messages stimulated information sharing among participants on how Healthy Cities techniques are working in respective cities.

Arrangements were made for the participants to visit several places of interest: i.e. Taman Rimba Samajaya (Stutong Forest Park), Matang Septic Sludge Treatment Plant and other Healthy Settings in the city.

The Deputy Chief Minister of Sarawak on behalf of the Chief Minister of Sarawak and the Government of Sarawak hosted the official dinner on 12 October 2004 for all members of the AFHC, WHO officials, delegates, speakers, observers and guests. An AFHC Membership Certificate, specially prepared for recognized AFHC founding members, was presented to each individual AFHC Member city/organization. The cultural show that evening was a wonderful opportunity to share diversities.

During this assembly and conference, the Sarawak Government launched an Ecological Sanitation Pilot Project. It was officially declared open by Datuk Michael Manyin, Minister of Environment and Public Health, Sarawak. The Danish Ambassador to Malaysia was also present at the launching ceremony. An agreement was then signed between UNIMAS, Norwegian Agricultural University and Denmark Agricultural University to research on that field.

The conference was officially closed in the afternoon of 14 October, 2004. The next Convener City in 2006, the City of Suzhou, made a multimedia presentation to invite people to the AFHC conference in Suzhou. Participants departed Kuching with hopes for progress in Healthy Cities and for meeting again in Suzhou in 2006.

The Sarawak Healthy Cities Secretariat led by the State Planning Unit, Chief Minister Department of Sarawak, Malaysia; and assisted by Sarawak State Health Department;

Kuching North City Hall (DBKU); Kuching South City Council (MBKS) and Land and Survey Department of Padawan Municipal Council organized the conference in collaboration with the World Health Organization Western Pacific Regional Office and the Interim Secretariat of the Alliance for Healthy Cities (Tokyo Medical and Dental University).

The organizing committee and a very efficient and expert technical committee who worked day and night to ensure the assembly and conference went smoothly, made sure all the delegates, participants and guests were well taken care of. The support given by the Ministry of Health Malaysia, the State Government of Sarawak and WHO Western Pacific Regional Office is especially acknowledged by the organizers.

### Founding Members

#### (◆ Members of the Steering Committee)

- ◇ Phnom Penh (Cambodia)
- ◇ Kwai Tsing District, Hong Kong SAR;
- ◇ Macao Special Administrative Region;
- ◇ Sai Kung District, Hong Kong SAR;
- ◆ The City of Suzhou (China)
- ◇ Fukuroi City; ◆ Hirara City;
- ◇ Ichikawa City; ◇ Owariasahi City (Japan)
- ◇ Busanjin-gu, Busan Metropolitan City;
- ◇ Changwon City; ◇ Seoul; ◇ Wonju City (Republic of Korea)
- ◆ Kuching City (Malaysia)
- ◆ Ulaanbaatar City (Mongolia)
- ◆ Marikina City; ◇ San Fernando, La Union; ◇ Tagaytay City; ◇ Valencia City, Bukidnon (Philippines)
- ◇ Hue City (Vietnam)
- [NGOs/NPOs] ◇ Healthy Cities Illawarra; ◆ Healthy Cities Noarlunga
- [Academic Institutions] ◇ South Australian Community Health Research Unit, Flinders University; ◆ Centre for Health Education and Health Promotion, Chinese University of Hong Kong; ◇ Health Promotion/International Health, Tokyo Medical and Dental University
- [National Agencies] ◆ National Coordinator of Healthy Cities, Malaysia



Photo: Members of the Interim Steering Committee and Interim Secretariat at the Pre-Assembly Meeting



## WHO Awards for Healthy Cities 2004



Photo: Deputy Chief Minister of Sarawak, Malaysia and Mayors of Kuching; Dr Pat Mowbray, Healthy Cities Illawarra, receiving the Award from WHO Regional Director, Dr. Shigeru Omi



Mayor of Ichikawa, Mitsuyuki Chiba and Mayor of Marikina, Ma Laudes Fernando jointly receiving the Award from WHO Regional Director

Six cities were given recognition by the WHO Regional Office for the Western Pacific (WPRO) for their outstanding achievements in their Healthy Cities Projects at the Conference and Inaugural Assembly of the Alliance for Healthy Cities in Kuching, Malaysia. The Award ceremony was held on the first day of the conference.

Supported by suspense-raising background music, Dr Hisashi Ogawa and Dr Susan Mercado from the WHO WPRO announced the awardees.

### Message from a Mayor on the Newsletter Committee

It is my great pleasure to take this opportunity to extend greetings to all of the Healthy Cities in the Western Pacific Region.

As a founding member of the Alliance for Healthy Cities, Seoul is proud to be a Co-Chair City of the Newsletter Committee, together with Kuching, Malaysia. This newsletter is a valuable communication tool that aims at bringing cities closer together and at bridging the information gap between them.

By becoming a member of the Alliance, Seoul – like the other members – has reinforced its commitment “to sustainable development, respectful of diversity; reaching for the highest possible quality of life and equitable distribution of health, by promoting and protecting health in all settings”, as stated in the Alliance’s Vision.

The Alliance for Healthy Cities provides a fruitful opportunity for all of its current and future members to share their successes – as well as the difficulties they face, and to combine their efforts in improving the quality of life and health of their citizens.

Our membership in the Alliance has brought Seoul one step closer to becoming a world-class city. We are looking forward to continued and productive networking with all other Healthy Cities in the region and beyond.

Best wishes from Seoul,

Myung-bak LEE  
Mayor of Seoul, Republic of Korea

Dr Omi, WHO Regional Director for the Western Pacific, handed the very creatively designed (*and also very fragile*) glass Awards and wooden Plaques of Recognition to the Awardees. The ceremony was filled not only with excitement, but also with a lot of humor!

[Kuching \(Malaysia\) and Healthy Cities Illawarra \(Australia\)](#) received the Regional Director’s award for their longstanding track record in improving quality of life using the Healthy Cities approach. Both cities were also cited for their international contribution to advocacy for Healthy Cities.

[Marikina City \(Philippines\)](#) “broke the record” by receiving a total of three WHO Awards for the “Best Practice for Healthy Environments for Children”; for “Best Proposal for Integrating Diet and Physical Activity in Urban Planning”, and for “Making Cities Safe Through Emergency Preparedness Planning”.

[Ulaanbaatar City \(Mongolia\)](#) received a WHO Award for “Best Proposal for Healthy Environments for Children”;

[Ichikawa City \(Japan\)](#) for “Best Proposal for Integrating Diet and Physical Activity in Urban Planning”; and

[Seoul \(Republic of Korea\)](#) for “Best Proposal for Health Promotion Investment Planning”.

More information about the WHO Awards can be viewed on the Alliance website (<http://www.alliance-healthycities.com>).

## Work on Priority Health Issues in the Western Pacific Region to be recognized by “WHO Awards for Healthy Cities” in 2005

In support of the work of the Alliance for Healthy Cities in the Western Pacific Region, WHO will provide recognition and support to good practices and innovative projects implemented by Alliance members for the second year in a row. During last year’s award ceremony held at the first Alliance for Healthy Cities conference in October in Kuching, Malaysia, six cities were given recognition for their outstanding achievements. The focus areas of this year’s “Good Practice” and “Best Proposal” Awards place emphasis on some of the Region’s priority health issues as discussed on [pages 4 and 5](#). [\[See pages. 4 and 5\]](#)



[See intro. on pg. 3]

### Focus 1: Tobacco-Free Cities

The first area is "Clearing the Air: Tobacco-free/ Smoke-free cities". Tobacco is the second major cause of death in the world, and one in five tobacco-related deaths occurs in the Western Pacific. Each day in the Region 3000 people die from tobacco use. Alarming is also the increasing use of tobacco among the region's children, as shown in recent data from the Global Youth Tobacco Survey (GYTS), and women's and children's exposure to the harm of second-hand smoke. The magnitude of the problem



and the fact that there are numerous cost-effective measures, which can have a significant impact on tobacco consumption, including population-wide public policies, such as bans on direct and indirect tobacco advertising or large visible health messages on tobacco packaging, provide strong arguments for action.

To support and encourage efforts of Alliance members to tackle the tobacco epidemic, Plaques of Recognition will be awarded to members who have implemented successful anti-tobacco measures, and financial support will be given to the city which submits the best proposal for comprehensive smoke free policies or bans on tobacco advertising, promotion and sponsorship.

### Focus 2: Drug-Free Cities

This year's awards also focus on "building drug-free communities". The global burden related to the three psychoactive substance categories (alcohol, tobacco, illicit drugs)



varies across the WHO Regions, with the overall disease burden being significantly higher in the Western Pacific and in Europe than in Africa and the Eastern Mediterranean. In the Western Pacific, the Americas and Africa alcohol poses the largest burden, while tobacco poses the largest burden in Europe and South-East Asia.



Realizing the strong need for more efforts at the community level, the purpose of this "Best Proposal" award is to provide seed money to selected Healthy Cities, which take up the task to develop a multi-component intervention within the community in order to increase public awareness and knowledge of drug use, to reduce the number of new cases and the relapse rate, and to support reintegration of former drug users into the community

### Focus 3: Community-Based Rehabilitation

The third area is "community-based rehabilitation (CBR)", which can be defined as "a strategy within general community development for rehabilitation, equalization of opportunities and social inclusion of all children and adults with disabilities". Worldwide, about 600 million people experience disabilities of various types and 80% of the world's disabled people live in low-income countries - the majority of them without access to basic services including rehabilitation facilities. The "Disability and Rehabilitation (DAR) Programme", which aims to enhance the quality of life and equality of opportunities for all people with disabilities by providing support to Member States in defining and implementing policies, developing appropriate services, and in strengthening community participation, can be implemented through CBR strategies. Cities, which have implemented an innovative and successful approach to CBR, with emphasis on social integration and community development for people with

disabilities, are eligible to apply for a "Good Practice" Award in this category. Furthermore, selected Healthy Cities have the opportunity to submit a proposal for a future CBR project, which, if selected will receive financial support.

### Focus 4: Poverty and Equity

Within the Western Pacific Region many people still live in poverty and not only in the seven countries that are classified as Least Developed Countries. Whether at household, community or national level, poverty is recognized as a significant determinant of ill health.

In recognition of the efforts of Healthy Cities, which have taken up the fight against persistent and growing inequalities, this area for "Good Practice" Awards was selected. All members of the Alliance, which have implemented outstanding "pro-poor or equity enhancing initiatives" will have the chance to receive a "Good Practice" award.

### Focus 5: Financial Protection of the Poor

Common health financing arrangements within the Western Pacific Region are still "inadequate to provide comprehensive, equitable and good-quality health care services for the population". In many areas, the poor spend as much as 30% of earnings paying for healthcare, thus limiting their ability to access health care. They often seek treatment at a later - and more costly - stage.



Within this focus area, those Healthy Cities, which have effective and sustainable health care financing mechanisms that promote social safety nets for health, have the opportunity to be recognized for their "Good Practice".

## Focus 6:

### Mother Friendly Hospital Initiative

The theme of this year's World Health Report and World Health Day was "Make every mother and child count", which is also related to this focus area of the WHO Awards for Healthy Cities. The Mother Friendly Hospital Initiative is one of the strategies of improving quality of care and reducing maternal mortality. Key features of a Mother Friendly Hospital include, for example, strong political commitment and a written policy on safe motherhood, trained

staff involved in obstetric care to improve quality of maternal care, improved referral of patients at different health care levels with provision of communication network, transport, and maternity waiting homes.

Any member of the Alliance who has successfully implemented a Mother Friendly Hospital Initiative can submit an application to this focus area and is eligible to receive a "Good Practice" Award.

## Further Information

More detailed information about this year's WHO Awards for Healthy Cities can be found on the Alliance website in the "Awards" section.

(<http://www.alliance-healthycities.com>).

**Don't Be Left Out!**

**31 August 2005** is the deadline for submissions for the WHO Awards.



## Inauguration of the Japan Chapter of the AFHC

健康都市連合日本支部設立首長会議



Owariasahi Mayor  
Dr. Koji Taniguchi



Hirara Mayor  
Dr. Akira Ishimine



Mayor of Ichikawa  
Dr. Mitsuyuki Chiba

Hirara City hosted the Inaugural Mayors Conference of the Japan Chapter of AFHC organized by the four Japanese founding members of the Alliance for Healthy Cities, on April 10, 2005. The date was in the midst of 'Yabiji' season, so once-a-year tours were taken to the coral reef nearby to feel the bounty of nature.



The conference was opened by Dr. Akira Ishimine, Mayor of Hirara City, followed by a keynote lecture on 'Healthy Cities and International Network' by Dr. Keiko Nakamura, Head of Secretariat of AFHC. Dr. Mitsuyuki Chiba, Mayor of Ichikawa City; Dr. Koji Taniguchi, Mayor of Owariasahi City; and their respective Healthy Cities team members from Ichikawa and Owariasahi participated in the conference. 200 people from Hirara City, officers from city hall, members of Healthy City Hirara Steering Committee and others joined the conference.

Three mayors and the Official Representative for the Mayor of Fukuroi City shared the progress of Healthy Cities projects

in their respective cities and agreed to form the Japan Chapter of AFHC and endorsed a plan of action of the Japan Chapter of AFHC.

A consensus was developed that it is important to work on the basis of WHO's considerations on health, therefore it is desirable to work closely with WHO and AFHC. Dr. Chiba, Mayor of Ichikawa; Dr. Ishimine, Mayor of Hirara; and Dr. Taniguchi, Mayor of Owariasahi were selected as the Chairman, Vice Chairman, and Treasurer of the Japan Chapter of AFHC.

Their plan of action included membership promotion, acceptance of study tours and exchange programs in cooperation with the WHO Collaborating Centre for Healthy Cities and Urban Policy Research, provision of technical and general information of Healthy Cities in Japanese language, and other tasks.



At the end of the conference, the mayors made the *Declaration on the Inauguration of the Japan Chapter of AFHC*. The mayors agreed to gather for a national convention in July 2005.



## Healthy Cities Key Words [Source: Health Promotion Glossary, WHO, 1998]

### Healthy Cities

Healthy Cities are cities that are continually creating and improving those physical and social environments and expanding those community resources which enable people to mutually support each other in performing all functions of life and in developing their maximum potential.

### Healthy Public Policy

Healthy public policy is characterized by an explicit concern for health and equity in all areas of policy, and by an accountability for health impact. The main aim of healthy public policy is to create a supportive environment to enable people to lead healthy lives. Such a policy makes healthy choices possible or easier for citizens. It makes social and physical environments health enhancing.

### Phnom Penh City

Situated in the Mekong sub-region facing the Chaktomouk River, Phnom Penh is the capital of the Kingdom of Cambodia. The official language is Khmer but more and more people speak English nowadays.



#### Phnom Penh in brief

Population - 1.2 million

Climate - Dry season - Nov to May  
Wet season - Jun to Oct  
Ave temp – 32°C  
Hot season – Mar to May

Area - 375 sq kilometers

HC Program started in - 1996

The city is comprised of 7 districts, 4 of which are inner city and 3 of which are on the outskirts of the city. As the city of Phnom Penh stretches through rivers and lakes, the land of the city consists mostly of low and flat plains. In recent years the economy has grown rapidly by expansion of the export-oriented garment industry as well as tourism. However, not being content with only this growth, the city has turned its eyes on the long-term sustainability.

Phnom Penh Healthy City was first created by the Ministry of Health with WHO support in 1996. As Phnom Penh is one of the founding members of the Alliance for Healthy Cities, the city administration and 7 districts are admirably harmonized and cooperative as a source of power to mobilize the program. The Phnom Penh Municipality and the Municipal Department of Health set up a committee of Healthy City, which has been led by the Governor of Phnom Penh. The chiefs of 7 districts as well as their related departments are its members. Besides, sub committees led by the 7 district chiefs are playing an important role at each district. Two significant seminars have been organized by the working group to evaluate the program. The first one held in December 2000 was mainly focused on management, economy, infrastructure and environment. At the second seminar held in October 2002, agendas were food safety, road safety, city cleaning and food protection.

Being the center of politics, economy, tourism, education and trade, Phnom Penh has a clear vision of the future. In a filled clean and safe city environment, its residents would have basic needs and enjoy lives backed by a strong, supportive, integrated and non-exploitative community.



The public would be expected to participate in local and city government. The city would cherish its historical and cultural heritage while providing its people with access to a wide variety of experiences, interaction and communication. Needless to say, reliable health services would be within the easy reach of everybody in the city. Economic diversity and innovation would be created along with these visions.

Many valuable programs of Healthy Cities are being carried out to turn these visions into reality. As for health issues, efforts will be made to prevent tuberculosis, AIDS and dengue and to improve food safety in order to get rid of 70% of the diarrhea suffered in the city. In terms of environmental issues, the city is tackling the problem of solid waste which city residents generate 927.8 tons per day. The existence of wells in dumping areas makes the situation more difficult, but the city has determined to rise to this daunting challenge. Additionally, the implementation of other urban infrastructure is considered a priority due to rapid growth in population and urbanization. The Urban Development Area Division is in charge and great efforts have begun to improve the quality of urban life through measures against slum areas, the construction of safe roads, and the renovation of parks and public gardens. In this process, the needy and minorities (such as handicapped people, homeless and orphans) are especially taken into account so that they can upgrade their living conditions.

The united position of the city and administration of 7 districts will advance the Phnom Penh Healthy City program and

surely it will encourage other cities in the country and the region to take their first step into the concept of Healthy Cities.

### Hue City

Hue City, the capital of Thua Thien Hue Province located in central Vietnam, joined the Alliance for Health Cities in June 2004 aiming at becoming a people-friendly, healthy and safe city.

#### Hue in brief

Population – 311,000

Climate - Monsoon weather pattern,  
with rainy season and dry  
season. High humidity all  
year around

Area - 67.7 sq kilometers

Hue has a long and prestigious history. Originally founded in 1558, Hue was the royal capital of the Nguyen Dynasty (1802-1945) due to its strategic location. Although suffering from continuous warfare including the national reunification war from 1954 to 1975, Hue City has magnificent tourist attractions, such as the historical royal monument complexes and court ceremonial music and songs, which are listed as UNESCO's world cultural heritage and world intangible and oral heritage. Over 1 million tourists from all over the world visit Hue every year.



Not only famed as a city of tourism and culture, Hue City has distinction in health care services with a number of hospitals including Hue Central Hospital, one of the biggest in Vietnam. There is a communal clinic in every quarter/commune providing primary health care services to the local people. Additionally, some home-based private clinics are available for health checks, care and cures.

Furthermore, Hue City is one of the main centers of general education and university education of the whole country. Along with



several renowned secondary and high schools, there is the University of Hue, which is comprised of the College of Arts, College of Agriculture and Forestry, College of Medicine and three other colleges.

Hue City has established a Steering Committee comprised of a Vice Chairman of the Hue City People's Committee and heads of relevant agencies of the city to be responsible for the leadership, coordination and implementation of the activities in the framework of the Healthy City Program in Hue City.



The city has a clear future vision to become a healthy city. One of them is the resettlement of people living on boats on the Huong River and within the historic area. For urban revitalization and development, those people would be in new residences with adequate infrastructure and urban services. As a result of rapid urbanization and economic growth, the city needs to implement new urban structures, such as traffic systems, drainage systems, sidewalks, parks and greenery areas, as well as improved waste management by enhancing solid waste collection services and further investment in equipment. It is also inevitable for the local people to be involved in environmental protection. For this purpose, the Ministry of Health has initiated the "Week of clean water and environmental sanitation", which has become an annual activity.

Along with food safety and hygiene in businesses, children's health has come into focus. It has been emphasized that all children in the city should be vaccinated. The city is trying to make Vietnamese youths well-built with an average height of 1.65 meters by 2010. Goiter in children, under-five year mortality, and malnutrition would be reduced. Also the city has taken action against infective diseases, aiming to lower the ratio of infection and death of petechial fever, cholera, typhoid, plague and hepatitis B by 2010, and rabies and malaria by 2020. Alleviation of diseases caused by iodine deficiency, reduction of HIV / AIDS

infection and progress in traffic safety has also been the city's target. Great effort has been made to improve the quality of health care services and developing a system of modern and convenient health care facilities.

Healthy City Hue is working on setting projects: healthy school, healthy workplace, healthy hospital and healthy marketplaces.

Hue City is a founding member of the Alliance for Healthy Cities and also serves as a focal point to expand healthy cities in Vietnam. The leadership of Hue City will contribute to the realization of their vision and goal for Healthy City Hue, as well as the development of networks both at home and abroad.

## Healthy Cities Illawarra

The Illawarra Region is on the south coast of New South Wales, Australia and comprises the local government areas of Wollongong, Shellharbour, Kiama and Shoalhaven. It has a total population of 361,000. In 1987, the Commonwealth government nominated it as one of the three funded pilot Healthy Cities in Australia because of the urban-rural population mix, its heavy industrial base at Port Kembla, multicultural population, high unemployment rate and low average income. The Illawarra Region is also an area of great natural beauty, the aboriginal name Illawarra meaning 'between the mountains and the sea'.



Healthy Cities Illawarra is a non-government, community based organization that receives core funding from the New South Wales (NSW) Health Department through the Illawarra Area Health Service. It is administered by a management committee comprising representatives from local government, health, environment, education and community sectors. As a non-government organization it provides the opportunity to lobby effectively for our

### Illawarra in brief

Population - 361 000  
 Area - 5784 sq kilometres  
 Comprises four local government areas  
 Climate - Winter average 15°C  
 Summer average 25°C  
 HC Program Started in - 1987  
 Priorities - Healthy Equity,  
 Environmental Health,  
 Safety, HIV/AIDS

community and also apply for grants not available to the government sector. Being incorporated provides legal protection for the volunteers on the management committee and has also allowed us to apply for, and administer grants, for smaller non-incorporated organizations. HCI employs the equivalent of 4.5 full time staff and has two offices one in Wollongong in the north and one in Nowra in the South.

The priorities for Healthy Cities Illawarra focus on both the healthy person and also more broadly on the healthy place. Our priorities involve:

- Intensive community development work in disadvantaged communities
- Community safety with a focus on child injury prevention
- Environment and links with human health
- Sexual Health, HIV education and prevention
- Tobacco Control

Over 18 years of work we have undertaken numerous projects and programs with various community, business and government partners. As we have evolved as an organisation we have become more interested and committed to the underlying social causes of ill-health.

The principles of the Ottawa Charter remain the cornerstones of how we approach our work.

The following are just some examples of our projects and achievements and are listed under the Ottawa Charter principles.

In 2004, we were proud to be recognised by the World Health Organisation through the Regional Directors Outstanding Healthy Cities Award for our "track record in sustained improvement in the overall quality of life of its citizens using the Healthy Cities approach."

## Get To Know Each Other (cont.)

### Build Healthy Public Policy

- Local research and targeted advocacy contributing to laws making child restraints mandatory in taxis in NSW
- Local research and targeted advocacy leading to review of laws and standards relating to safety of private swimming pools
- Lobbying for tightening of laws relating to emissions of dioxins and other substances at both state and national levels
- Coordination of the first community controlled investigation into radiation emissions from industry in Australia
- Successful advocacy for stricter pollution standards for a number of industries in the region

### Create Supportive Environments

- Initiated programs to support smokefree environments at local and state level
- Established a public display home incorporating safe design features
- Secured over \$150000 in funding and coordinated numerous environmental regeneration projects
- Coordinated the establishment of the award winning Reconciliation Track 'One Track For All' in Ulladulla
- Established and publicised the Southern Coastal Walking Route in the Shoalhaven
- Initiated and supported the establishment of the unique 'Hooka Park – Place of Healing'



### Strengthen Community Actions

- Established a community environmental health group following the Illawarra leukemia cluster
- Supported a successful community campaign for the reduction in industrial emissions of dioxins
- Engaged disadvantaged communities through local neighbourhood centres and established ongoing structures to pursue health improvements
- Established and supported intersectoral taskforces in Transport, AIDS Prevention, Child Injury Prevention, Aged Issues, Tobacco Control
- Coordinated the first ever mass clean up of

### Lake Illawarra

- Recognised and awarded over 1000 volunteers for their contributions to improving the Illawarra's health and environment

### Develop Personal Skills

- NSW Water Safety Taskforce award for Beach Safety program for people from non-English speaking backgrounds
- Coordinated the successful Multicultural Marinecare education program
- Established and maintained community based preventive education programs for HIV/AIDS
- Successfully established the Illawarra Road Safety Park
- Established the Illawarra Environment and Heritage Centre
- Established and supported breakfast programs for children in ten disadvantaged areas throughout the Illawarra
- Conducted numerous campaigns on road safety issues
- Initiated drain stenciling of environmental messages in Shoalhaven and Kiama LGAs.



### Reorient Services towards Health

- Established the first WHO accredited Safe Community in the Southern Hemisphere
- Coordinated the first City Vision process for the Shoalhaven region
- Initiated and was actively involved in the Kiama Municipal Health Planning process which was the first undertaken by a local government in NSW
- Initiated and supported the establishment of the Safe Communities pilot program in the Kiama LGA
- Lobbied successfully for the establishment of a public transport interchange at Oak Flats
- Initiated and coordinated a local research project which led to the establishment of a health transport system

In presenting this brief overview we would like to thank the World Health Organization and other Healthy Cities, islands, villages and communities around the world for their continuing inspiration – it is wonderful to feel part of the growing Healthy Cities movement and thus feel connected to you all.

[Mr. Frank Waller, Healthy Cities Illawarra]

## Ichikawa City

The city of Ichikawa is 20km from the center of the Greater Tokyo area and is facing Tokyo Bay. This residential city has a varied historical and cultural heritage. The city's mild climate, scenic spots, and ideal geographic location have always attracted people from an early epoch up to today.



The "Healthy City Ichikawa Declaration" was announced by the mayor of Ichikawa City on November 3<sup>rd</sup> 2004, the 70<sup>th</sup> anniversary of the city's municipalization. This declaration confirms the aims for "Healthy City Ichikawa," a city where all people can be energetic, healthy, and live life to its fullest by adhering to the spirit of the Constitution of the World Health Organization. The city of Ichikawa not only pursues its own Healthy City Program, but also liaises with other cities throughout the world to achieve a comprehensive elevation of citizens' health by participating in a network of Healthy Cities working with the World Health Organization.

### **I chikawa in brief**

Population – 463,103

Climate – mild, four seasons

Ave temp – 15.6°C

Area - 56.39h

HC Program started in - 2004



Ichikawa's efforts toward the achievement of a Healthy City were well accepted by the international community. The city was recognized as one of the founding members of the Alliance for Healthy Cities, and the mayor of Ichikawa City received a WHO Award for the Best Proposal for Integrating Diet and Physical Activity in Urban Planning

together with the mayor of Marikina, the Philippines. Ichikawa has become one of the leading cities making steady progress towards becoming a Healthy City.



Ichikawa City has been promoting a number of policies for the protection and advancement of the health of its citizens as indicated in the City's Master Plan adopted in April 2001. In addition to the emphasis on personal efforts in protecting and advancing individual citizens' health, there is a general recognition of the importance of support environments, the development of which is beyond the means of individuals. This is in accordance with the WHO's concept of health promotion and its WHO Healthy Cities Program. The concept of Healthy Cities encourages the city to adopt a comprehensive approach to the enhancement of citizens' health by intersectoral collaboration and the development of infrastructure to secure urban health, with continuous efforts to achieve a Healthy City.

The major achievements of Healthy City Ichikawa in 2004 were as follows: (1) declaration of Healthy City Ichikawa, (2) establishment of the Section of Healthy Cities in the city's administrative structure, which functions as the secretariat, (3) more than one year of consultations for the development of promotion programs for Healthy City Ichikawa involving multiple government departments as well as a multisectoral Committee for Promotion of Healthy City Ichikawa, (4) city-wide campaign to raise awareness of the Healthy City Ichikawa Program, and (5) formal participation in the Alliance for Healthy Cities.

Healthy City Ichikawa followed the steps outlined in the WHO's guidelines for the development of a healthy city project. The process represents a concrete example of the realization of the WHO recommendations in the actual setting of the governance of a city reflecting the views of the citizens. Ichikawa's experience shows how resources can be mobilized to achieve the goal of health promotion.

The city's 15 health promotion projects and 24 sectoral plans were evaluated from the viewpoint of improving citizens' health and creation of supportive environments in terms of the city's societal, cultural, and physical environments. Emphasis was placed on the best use of existing programs, clarification of the relationships between multiple sectoral plans and projects from the viewpoint of promotion of health, public-private partnerships, and systematic promotion of the city's plans and projects toward a Healthy City. Leading examples of effective projects were as follows: (1) Programs for healthy diet and nutrition at the Municipal Public Health Center, (2) Project to improve smokers' consideration for others in Ichikawa City with community participation, and (3) Project for environmental protection and to provide a healthier, friendly society by promoting recycling activities.

Many urban health challenges remain. However, the policies implemented as part of the Healthy City Ichikawa Program have been promoted steadily through the leadership of the mayor, and with the participation of various concerned partners the city of Ichikawa continues its efforts toward realization of a Healthy City.

## Seoul – the Mega City

The mega-city Seoul has about 10.3 million inhabitants and has a history of more than 600 years as the capital city of Korea. It is located in the western central part of the Korean Peninsular. Seoul possesses only 0.6% of the country's land share, while it contains more than a fourth of its population. Mountain ridges run from north to south and the Han River divides the city into a northern and southern part. Seoul consists of 25 autonomous districts. Seoul, a 'special' city in South Korea, has the status of a 'province' and its districts that of 'cities'.

As of January 2005, the city government has a new Division within the Welfare and Health Policy Bureau, namely the Division of Health Promotion, which includes the Healthy Cities Team (HCT). Seoul's Healthy Cities Project was initiated in September 2003, with the political support of the Mayor.

### Seoul in brief

Population – 10,310,026  
Climate – mild, four seasons  
Area – 605.52 sq kilometers



The major tasks for the Healthy Cities Team are as follows:

(1) to establish linkages between existing, ongoing projects: there are numerous urban planning projects that are being carried out, most of which have a strong potential to improve the health and quality of life of Seoulites. Such projects include the Cheong-Gye-Cheon Restoration Project, the purpose of which is to restore a stream that used to flow through the northern part of the city; the 'green space development project', a project to establish inner-city parks within the districts and to expand walkable streets; and the New Town Development Project. Awareness about the health impact of such projects must be created and the HCT must be a strong advocate for healthy public and private policies.



## Get To Know Each Other (cont.)



(2) Health Promotion Investment and Planning: Seoul is a proud recipient of the WHO Healthy Cities Best Proposal Award: "Health Promotion Investment Planning". The purpose of this project is to develop functional classifications for a city-specific satellite account of Korea's National Health Account for health promotion, to develop a health promotion investment plan and to propose an advocacy strategy. This project also contributes to the development of Healthy Cities indicators for Seoul.

(3) Working with the districts: Considering the size and structure of Seoul, we must work closely with the districts. This year Seoul's HCT is providing technical and financial support to four Healthy Cities, and two Safe City Pilot Projects, managed by the districts' Public Health Centers. The four Healthy Cities Pilot Project Districts are also planning to become members of the Alliance.

(4) to establish a communication strategy, with the public (e.g. through a new website, public events, like the annual Health Expo, international symposia, etc.), with the public and private sectors (e.g. through a steering committee and working groups, and through partnerships).



Email: [healthyseoul@paran.com](mailto:healthyseoul@paran.com)  
Website (Seoul City): [www.e-seoul.go.kr](http://www.e-seoul.go.kr)  
Healthy Cities Team Leader: Dr Hye-Kyung Park  
Healthy Cities Advisor: Dr Katrin Engelhardt

[Details (from pg.2)]

## The Outcome of the Pre-Assembly and the General Assembly

### *Pre-Assembly Meeting, 11 October 2004*

The Chairman, members of the Interim Steering Committee and Interim Secretariat met on 11 October 2004 prior to the Assembly to finalize the agenda, propose amendments to the draft charter and reports, propose a budget for 2005-2006 and Activity Plan 2005-2006, as well as discuss the expenditure for 2004 and new membership. The meeting was attended by the Convener City Mayors.

### *General Assembly, 13 October 2004*

The Inaugural General Assembly of Alliance for Healthy Cities (AFHC) was held on 13 October 2004. The General Assembly was attended by all the AFHC member cities and chaired by the Mayor of Kuching City North, Hj. Madehi Kolek.

The General Assembly then accepted the amendments to the draft charter which officially became the Charter of the Alliance For Healthy Cities (AFHC).

The Assembly then approved without changes the expenditure for 2004, the budget for 2005-2006, the annual membership fee of USD 500.00 annually for 2005 and 2006, the activity plan for 2005-2006, and the membership application procedure.

The General Assembly accepted the proposal of the Assembly Chairman to appoint the Interim Steering Committee as members of the Steering Committee for 2005-2006. The Assembly also agreed to the nomination of Healthy Cities Noarlunga and Healthy Cities Illawarra to fill the vacancy representing NGOs by annual rotation and to leave the posts for "private/business sector" and "international agency" vacant for the time being since there is no private sector member yet.

The Assembly endorsed the proposal for the Promotion Committee for Healthy Cities c/o Department of Health Promotion/International Health of the Tokyo Medical and Dental University, Tokyo, Japan to be the Secretariat for AFHC. The Assembly gratefully accepted the advisory role and continuous support of WHO Western Pacific Region to the AFHC.

The Assembly unanimously accepted the City of Suzhou, China as the next convener city for the General Assembly in 2006.

### *AFHC Steering Committee Meeting, 13 October 2004*

The Chairman and members of the Steering Committee and Secretariat met after the Assembly as the first Steering Committee Meeting of the AFHC. The meeting adopted the proposed organization structure, including the appointment of chairman to the various sub-committees, and finalized the activity Plan 2005 - 2006. It was decided the Mayors of Kuching will serve as the Chairmen of the Steering Committee 2004-2006.

## JOIN US IN THE ALLIANCE

### Application Procedure to Become a Member of the Alliance for Healthy Cities

The Alliance for Healthy Cities is an international network aiming at protecting and enhancing the health of city dwellers. The Alliance is a group of cities and other organizations that try to achieve that goal through an approach called "Healthy Cities" with the close collaboration of the World Health Organization.

Local governments from various countries and regions as well as NGOs, academic institutions and private organizations participate in the Alliance. As a group, the Alliance supports its members in various ways to develop a healthy city. The Alliance provides opportunities to share experiences of Healthy Cities, recognize and promote outstanding practices and innovations within Healthy Cities, mobilize resources for Healthy Cities, and develop new knowledge and technology for the advancement of Healthy Cities through international collaboration.



## OUR NEW MEMBERS

- [Townsville City, Australia](#)
- [Zhangjiagang City, Jiangsu Province, China](#)
- [Centre for Environment and Population Health, Griffith University, Queensland](#)

## Here's how you can join

There are two categories of membership:

1. Full Membership and
2. Associate Membership.

**Membership in the Alliance for Healthy Cities (AFHC) is open to any city or organization from anywhere in the world.**

**Full Membership** is for city governments, governing units of cities/municipalities/equivalent organizations. **Submit Forms A and B-1.**

**Associate Membership** is for individuals; non-city entities such as non-government organizations, national government agencies, private organizations, international agencies or academic institutions. **Submit Forms A and B-2.**

- Membership status will be recognized after a review process by AFHC.
- There will be a 500 US\$ /year fee for recognized members.

For further details, please visit <http://www.alliance-healthycities.com>

*(Form A)*  
**Application Form: Application for a member of the Alliance for Healthy Cities**

This form is for use by cities, municipalities, non-city entities (non-government organization, national government agencies, private organizations, international agency academic institutions), or individuals, **to apply for membership of the Alliance for Healthy Cities.**

This application form should be submitted to the Secretariat of the Alliance of Healthy Cities. (c/o Dr. Keiko Nakamura, International Health and Medicine, Graduate School of Tokyo Medical and Dental University, Promotion Committee for Healthy Cities, Yushima 1-5-45, Bunkyo-ku, Tokyo 113-8519, JAPAN; Fax +81 3 3918 7176; e-mail: [alliance.th@tmd.ac.jp](mailto:alliance.th@tmd.ac.jp).)

We (I) approve the Charter of the Alliance for Healthy Cities and would like to become a member of the Alliance for Healthy Cities.

1. Full name of city, municipality, organization, or individual to become a member

2. Full name of Mayor/Governor, representative of organization; Title/Position

3. Membership Status (please tick)

<input type="checkbox"/> Full Member (City Government, Governing Unit of City, Municipality)	<input type="checkbox"/> Associate Member (tick one of below)
	<input type="checkbox"/> Individual
	<input type="checkbox"/> NGO
	<input type="checkbox"/> National government agency
	<input type="checkbox"/> Private organization
	<input type="checkbox"/> International agency
	<input type="checkbox"/> Academic institution

4. We (I) enclose information sheet (Form B-1 or Form B-2) with this form.  YES
5. We (I) send required documentation.  YES
6. We (I) enclose a signature form by mayor (representative of the organization) for the Charter of the Alliance for Healthy Cities.  YES
7. We (I) understand that there will be a 500US\$/year fee for the year 2005 for recognized members.  YES
8. We (I) will submit optional documentation when they are ready.  YES
9. Signature of Mayor/Governor of city/municipality/town, representative of organization, or individual (for individual membership)

Signature: ..... Date: .....

*(Form B-1)*  
**Information Sheet for Full Member (city/municipality/town):**  
**the Alliance for Healthy Cities**

**Contact person's details**

Name:	Title:
City:	Country:
Address:	
Organization:	Section:
Telephone:	Fax:
E-mail:	Web site:

**1. Mayor/Governor details**

Name of mayor/governor:  
Title:  
Date elected/appointed (designated):      Term of office (years):

**2. Population**

Population size of your city (recent statistics):

**3. Healthy City Project**

**Coordinator**

Name of coordinator (or equivalent):  
Title:      Date appointed:  
Starting date of your Healthy City Project      Date started:

**4. Attendance at General Assembly**

Our mayor and/or coordinator and/or substitution will participate in General Assembly of the Alliance for Healthy Cities (every 2 years).  YES

**5. Membership fee**

The city agrees to pay an annual base fee.  YES

**6. Submission of documentation**

The city will send the following:  YES

- 1) written policy statement in support of Healthy Cities
- 2) future vision and goal
- 3) profile of city (baseline data)
- 4) analysis of priority health problems

*(Form B-2)*  
**Information Sheet for Associate Member (Individuals: NGOs/national government agencies/private organization/international agencies/academic):**  
**the Alliance for Healthy Cities**

**Contact person's details**

Name:	Title:
Name of Organization:	
Address:	
Telephone:	Fax:
E-mail:	Web site:

**1. Director/head/representative details**

Name of director/head/representative:  
Title:      Date appointed (designated):

**2. Individual/ Type of Organization**  Individual

- |   |   |
|---|---|
| <input type="checkbox"/> NGO                  | <input type="checkbox"/> National government agency |
| <input type="checkbox"/> Private organization | <input type="checkbox"/> International agency       |
| <input type="checkbox"/> Academic institution | <input type="checkbox"/> Other                      |

**3. Relation to Healthy Cities projects/ programmes/ activities**

Describe your relationship to Healthy Cities:

**4. Attendance at General Assembly**

Our director/head/representative and/or coordinator and/or substitution (or I) will participate in General Assembly of the Alliance for Healthy Cities (every 2 years).  YES

**5. Membership fee**

We as the organization (or I as an individual) agree to pay an annual base fee.  YES

**6. Potentiality of donations and/or contributions to support the Alliance**

Our organization are (or I am) interested in donations and/or contributions to support the Alliance.  YES     NO     NOT SURE

**7. Submission of documentation**

The organization will send the following if applicable  YES

- 1) written policy statement in support of Healthy Cities (if applicable)
- 2) future vision and goal of a Healthy City (if applicable)
- 3) profile of city/community/neighbourhood (baseline data, if applicable)
- 4) analysis of priority health problems (if applicable)

## Briefly

### Links to other websites

<http://ctb.ku.edu/>

The Community Toolbox

<http://www.bestpractices-healthpromotion.com/>

Best Practices Health Promotion

[A website developed by M. Goodstadt and B. Kahan]

<http://www.hp-foundations.net/>

International Network of Health Promotion Foundations

### Books and Articles

R. Beaglehole et al. Public Health in the New Era: Improving Public Health through Collective Action. *Lancet*. 2004; 303(19) :2084-6.

T. Takano and K. Nakamura. Participatory research to enhance vision sharing for Healthy Town initiatives in Japan. *Health Promotion International*. 2004 ;19: 299-307.

T. Takano (Editor). 2003. *Healthy Cities and Urban Planning Policy Research*. Spoon Press, London.

H. Frumkin Healthy Places: Reviewing the Evidence. *American Journal of Public Health*. 2003;93 :1451-6.

A. Lee, C. Tsang, S. H. Lee, and C. Y. To. A comprehensive "Healthy Schools Programme" to promote school health: the Hong Kong experience in joining the efforts of health and education sectors. *J Epidemiol Community Health*. 57:174-7; 2003.

F. Baum and C. Palmer. 'Opportunity structures': urban landscape, social capital and health promotion in Australia. *Health Promotion International*. 2002;17: 351-61.

T. Takano, K. Nakamura, M. Watanabe. Urban residential environments and senior citizens' longevity in megacity areas: the importance of walkable green space. *J Epidemiol Community Health*. 2002;56: 913-918.

WHO WPRO. *Regional Guideline for Developing a Healthy Cities Project*. (Healthy Cities-Healthy Islands Document Series, No.2) Manila, 2000.

E. De Leeuw. Healthy Cities: urban social entrepreneurship for health. *Health Promotion International*. 1999;14:261-269.

### Downloadable: books/ articles/

Duhl LJ and Sanchez AK. (1999). *Healthy Cities and the City Planning Process*. (WHO/EURO Publication). Available at:

<http://www.who.dk/document/e67843.pdf>

Wilkinson R and Marmot M (Editors, 2nd Edition). 2003. *Social Determinants of Health*. Available at:

<http://www.who.dk/document/e81384.pdf>

## THE "SUZHOU HONGKONG MACAO" HEALTHY CITIES FORUM, Suzhou, China, 24-27 May, 2005.

"SUZHOU HONGKONG MACAO" HEALTHY CITIES FORUM will be held in Suzhou, China, 24-27 May, 2005, by the organization of Suzhou Healthy City Leading Group; Centre for Health Education and Health Promotion; Chinese University of Hong Kong; and Macao Healthy City Committee. This forum is aimed at promoting the development and capacity building of Healthy Cities in China and helping the information exchanges of Healthy Cities.

This forum will be held under the auspices of the World Health Organization and the Alliance for Healthy Cities. Dr. Shigeru Omi, WHO Regional Director for the Western Pacific, will offer his congratulatory remarks. Dr. Hisashi Ogawa of the World Health Organization and Dr. Keiko Nakamura, the Secretariat of Alliance for Healthy Cities, will attend this forum. Experts from Canada, United Kingdom and the Netherlands will introduce the circumstances for developing Healthy Cities in their respective countries. Representatives from the Chinese Ministry of Health and delegates from 15 Chinese cities, including Beijing, Shanghai, Dalian, and Shenzhen will also attend the forum.

Nov. 2004

**Declaration Ceremony on Health City Ichikawa, Japan, 3 Nov. Healthy City Week and Symposium, Ichikawa, Japan, 14-21 Nov. National Workshop on Expansion of Healthy Cities initiatives, Ulaanbaatar, Mongolia, Nov. 2004**

Feb 2005

**Short Course on Healthy Cities and Urban Health Policy in Tokyo, Japan, 21-25 Feb:** Promotion Committee for Healthy Cities; WHO Collaborating Centre for Healthy Cities & Urban Policy Research; Course Director: Prof T Takano; [whocc.hlth@tmd.ac.jp](mailto:whocc.hlth@tmd.ac.jp)

Apr. 2005

**Healthy City Wonju Proclamation and the 1st Citizen's Healthy Day Ceremony, Republic of Korea, 7 Apr. Mayors Conference for the Inauguration of the Japan Chapter of AFHC, Hirara City, Japan, 10 Apr.**

May 2005

**Healthy Cities & Communities Short Course in Adelaide, Australia, 23-27 May:** Dpt Public Health at Flinders University, Adelaide; the Noarlunga Healthy Cities Project; the SA Community Health Research Unit. Course Facilitator: Prof Fran Baum;

[public.health@flinders.edu.au](mailto:public.health@flinders.edu.au)

**The "Suzhou-Hong Kong-Macao" Healthy Cities Forum, Suzhou, China, 24-27 May.**

Jun 2005

**Macao Healthy City Meeting, 19 Jun. Meeting of AFHC Steering Committee, Manila, Philippines, 28-29 Jun.**

Jul 2005

**First General Assembly and Conference of the Japan Chapter of AFHC, Ichikawa City, Japan, 14-15 Jul:**

[healthycity@city.ichikawa.chiba.jp](mailto:healthycity@city.ichikawa.chiba.jp)

Spt-Nov 2005

**Short Course on Healthy Cities and Urban Health Policy in Tokyo:**

[whocc.hlth@tmd.ac.jp](mailto:whocc.hlth@tmd.ac.jp).

### Newsletter of The Alliance for Healthy Cities

*Editor-in-Chief:* Dr. Keiko Nakamura

*Newsletter Committee:* Mr Liu Tian Chon, Mr Juline Allen, Dr Andrew Kiyu, Mr Basil Wee, Mr Rudzaimair Malek, Kuching; Dr Kye-Kyung Park, Dr Katrin Engelhardt, Seoul; Ms Chiaki Nakano, Tokyo

Published by The Alliance for Healthy Cities

Photos courtesy of Kuching City; Hirara City; Ichikawa City; Healthy City Illawarra; Seoul Metropolitan Government; Health Promotion/International Health, Tokyo Medical and Dental University; WHO Collaborating Centre for Healthy Cities and Urban Policy Research; and World Health Organization Western Pacific Regional Office

© The Alliance for Healthy Cities

**Contact:** Secretariat of the Alliance for Healthy Cities

c/o Promotion Committee for Healthy Cities

International Health and Medicine,

Graduate School of Tokyo Medical and Dental University

Yushima 1-5-45, Bunkyo-ku, Tokyo 113-8519, Japan

E-mail: [alliance.ith@tmd.ac.jp](mailto:alliance.ith@tmd.ac.jp) Fax: +81 3 3818 7176

URL: <http://www.alliance-healthy-cities.com/>

