

Healthy Cities

The Concept of Healthy City and Healthy

The Concept of Healthy City was first proposed by World Health Organization (WHO). According to the data from WHO, there is 112 cities with populations of more than one million; 24 cities more than ten million. There will be more than 60 percent of world population living in the city no later than 2005. Many problems posed by industrial society including hygienic, environmental, and ecological problems will become increasingly severe. Therefore, WHO begins to promote the concept of healthy city and expects that densely populated cities should not have only the negative impacts such as nervousness and environmental pollution but also the positive ones including Lifestyles of Health and Sustainability, LOHAS. However, the development of cities will face a lot of social, hygienic and ecological problems, and the responsibility and ability to control these factors is beyond the burden of the government department in charge of health. So, to effectively solve the health problem of urban residents, it is necessary to integrate the forces of all sectors.

WHO elaborated some characteristics of health in the Lisbon meeting in 1986:

1. Health involves social affairs, not just medical affairs.
2. Health is the responsibility of all urban sectors.
3. Health should be overseen by experts in specialized fields of natural science, social studies, aesthetics, and environmental studies.
4. Health is the manifestation of community participation and cooperation of public and private sectors.

The characteristics above show autonomy and cooperation are the key principles in the concept of health. Autonomy refers to people's power over affairs affecting their lives, whereas cooperation suggests health is not only the responsibility of public sectors, but also the responsibility of private organizations as well as community members.

In addition, according to Duhl (1995), the significance of a Healthy City can vary between the three levels: individual, group and community, and global.

1. At the individual level:

Health refers to citizens' rights to growth, development, peace, freedom from fear, and power over affairs affecting their lives.

2. At the group and community level:

Health means individuals are free from exploitation, enjoy meaningful work, develop trust and cooperate with others when working in a group.

3. At the global level:

The focus is on issues associated with a fair distribution of global resources, awareness of ecological limits and so on.

1. The Definition and Function of The Healthy Cities

The first meeting on The Healthy Cities Project was held in Lisbon in 1986 by 21 European cities, which resolved to promote health in cities and pointed out 5 characteristics of Healthy Cities (Ashton , 1992):

1. The basis of the Healthy Cities project lies in action. The idea of Health for All, the principles of health promotion and the 38 objectives for the European region should be adopted as the main guidelines.
2. A good action plan is one based on the priorities of each city itself, ranging from environmental action to project design to changes in individuals' lives, with health promotion as its main principle.
3. Healthy Cities monitor and study the impact of well-developed healthy cities on the cities and their health.
4. Healthy Cities share ideas or experiences associated with health promotion with sister cities or cities showing interest.
5. There is mutual support, cooperation, learning and culture exchange between Healthy Cities and towns and villages.

Hancock and Duhl (1986) promulgated the definition of The Healthy Cities as ” A healthy city is one that is continually creating and improving those physical and social environments and expanding those community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential.”. Therefore, a Healthy City is a process, not an outcome. In other words, a Healthy City refer to environments where the residents have a shared vision and would like to make health-related changes, not just a city where the residents have attained a satisfactory level of health.

In order to establish a clear indicator to gauge whether a city is 'healthy' or not, the WHO believes that an ideal healthy city should possess the following 11 functions:

- (1) Provide a clean, safe and high quality living environment
- (2) Possess a stable and sustainable ecosystem

- (3) Possess a strong and cohesive community
- (4) Possess a community that is highly participative in policies affecting living standards and welfare
- (5) Be able to provide residents with basic needs
- (6) Residents are able to obtain different experiences and resources through numerous channels
- (7) Economic activities that are diverse, vibrant and creative
- (8) Be able to preserve historical monuments and respect local cultures
- (9) Possess a prospective city plan and is a city with unique qualities
- (10) Provide residents with quality sanitation and health services
- (11) Residents are in good health conditions.

3. National Healthy City Indicators

- (1) Counties and Townships: There are 14 health indicators (including 9 international indicators), 7 environmental indicators (including 5 international indicators) and 13 socioeconomic indicators (including 4 international indicators), a total of 34 indicators (including 18 international indicators)
- (2) Special Municipalities and County-controlled cities: There are 16 health indicators (including 10 international indicators), 17 environmental indicators (including 12 international indicators) and 15 socioeconomic indicators (including 4 international indicators), a total of 48 indicators (including 26 international indicators)

Health indicators	Environmental indicators	Socioeconomic indicators
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<p>International indicators:</p> <p>A1 Mortality</p> <p>A2 Cause of death</p> <p>A3 Low birth weight</p> <p>B2 Percentage of Children fully immunized</p> <p>B3 Number of inhabitants per practicing primary health care practitioner</p> <p>B4 Number of inhabitants per nurse</p> <p>B5 Percentage of population covered by health insurance</p> <p>B6 Availability of primary health care services in foreign languages</p> <p>D6 percentage of all live births to mothers >20; 20-34; 35+</p> <p>Domestic indicators:</p> <p>TH1 Smoking Rate among 18 years and above adult</p> <p>TH2 Betel Nut Chewing Rate among 18 years and above adult</p> <p>TH3 Important Disease-Screening Rate</p> <p>TH4 Ratio of population who exercise regularly</p> <p>TH5 Long Term Care Rate</p> <p>A total of 14 items</p>	<p>International indicators:</p> <p>C1 Atmospheric pollution</p> <p>C2 Water quality</p> <p>C3-1Percentage of water pollutants removed from total sewage produced</p> <p>C4 Household waste collection quality index</p> <p>C5 Household waste treatment quality index</p> <p>Domestic indicators:</p> <p>TE1 River quality</p> <p>TE2 Passage rate of public toilet checks</p> <p>A total of 7 items</p>	<p>International indicators:</p> <p>D3 Unemployment rate</p> <p>D4 Percentage of people earning less than the mean per capita income</p> <p>D5 Percentage of child care places for pre-school children</p> <p>D8-1 Percentage of disabled persons employed</p> <p>Domestic indicators:</p> <p>TS1 Crime occurrence rate</p> <p>TS2 Crime solution rat</p> <p>TS3 Ratio of automobile accidents</p> <p>TS4 Ratio of drunk driving accidents</p> <p>TS5 Number of fires per ten thousand people</p> <p>TS6 Ratio of elderly people living alone receiving care</p> <p>TS7 Ratio of social welfare expenditures</p> <p>TS8 Ratio of residents serving as volunteers</p> <p>TS9 Participation in community-building organizations</p> <p>A total of 13 items</p>
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Items added by municipalities and counties and cities level	Items added by municipalities and counties and cities level	Items added by municipalities and counties and cities level
B1 Existence of a city health education programme TH6 Smoke-free environment number	C6 Relative surface area of green spaces in the city C7 Public access to green spaces C8 Derelict industrial sites C9 Sport and leisure C10 Pedestrian streets C11 Cycling in city C12 Public transport C13 Public transport network cover TE3 Ratio of maintained empty lots TE4 Ratio of sidewalk space TE5 Ratio of improvement on accessible	TS10 Lifelong learning TS11 Number and growth rate of cultural facilities

Reference: Health Promotion Administration, Ministry of Health and Welfare

4. The Establishment of Alliance for Healthy Cities, Taiwan

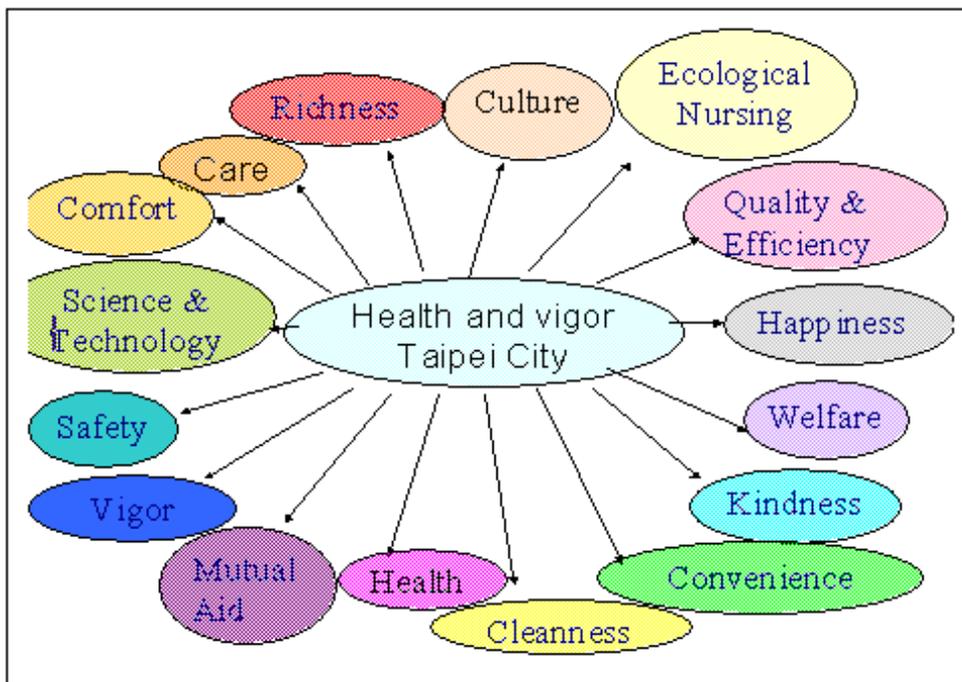
More and more counties and cities in Taiwan have devoted themselves to the promotion of healthy cities. In order to allow the greater efficacy of promotion, expansion of resources, and exchange of information among domestic healthy cities, Taipei City, Tainan City and Kaohsiung City jointly initiated Alliance for Healthy Cities in Taiwan at the end of 2005.

On February 24, 2006, Dr. Ho Sheng-mao, the former Minister of the Department of Health, and Hsu Tian-tsai, Mayor of Tainan City served as conveners, Ma Ying-jeou, Mayor of Taipei City (now President of R.O.C.) and Ye Chu-lan, Mayor of Kaohsiung City as co-conveners, they together invited county and city mayors all over Taiwan to participate in the “Taiwan Healthy Cities Alliance Summit”. At the summit, there were around 70 participants, including mayors, deputy mayors, or representatives from 22 counties and cities. The “Healthy Cities Protocol” was signed, and they agreed that there would be at least one meeting annually, and healthy cities in Taiwan would take turns to host the event.

5. The Values and Effectiveness of Policies regarding Healthy City Promotion in Taipei

In recent years, many policy ideas of Taipei City Government coincided with healthy cities plan advocated by WHO. In fact, Taipei has been already eligible to be an international healthy city from subjective and objective condition. For example, Health: New Healthy Food Culture, Smoke-Free Environment, Taipei Citizens's Weight Loss Plan, Community Health Care, and Community Health Construction; Ecological Environment: The Per Bag Trash Collection Fee, 2010 Zero Landfill Policy, Sewer and Water Pipes Improvement; Traffic: Taipei Wi-Fi City. Those important city infrastructures gained public recognition and build a good reputation worldwide.

To improve life quality of citizens, citizens 'healthy, and the international medical and hygienic interaction, The activity "the First Year of Healthy City, Festival in Taipei" was held at National Chiang Kai-shek Memorial Hall on January 1, 2002 and announced that year 2002 is the first year of Healthy City and start to carry out healthy city plan basing on the 5 main strategies set in the Ottawa Charter for Health Promotion. Taipei City Government actively joined the health city network built by WHO and hosted 2004 Taipei Healthy Cities Leaders Roundtable and International Healthy Cities Conference in order to present Taipei City's efforts to build a health city and strengthen citizens' recognition. Moreover, Taipei City Government spares no efforts to build a safe, ecological, prosperous, friendly, happy, cultural, convenient, energetic and international capital city, and make Taipei could become a well-known healthy city in Asia-Pacific region



Taipei City Government hosted a press conference for the 1st Taipei Healthy City International Seminar on December 16, 2004. Ma Ying Jeou, the Mayor of Taipei City officially announced the Charter of Taipei Healthy City with a group of representatives from Government-Industry-University Collaboration, which set a milestone for Taipei Healthy City Project. In addition, cooperating with private sectors to conduct the Declaration of Taipei Healthy City showed the idea of Civicism, the core value of Healthy City to create consensus between citizens and the government.

Declaration of Taipei Healthy City

1. Taipei City Government collaborates with all the citizens to realize the goal of “Healthy for All”, the principles promoted by WHO.
2. Respect the consciousness and action of the communities
3. Empower the communities and encourage communities making their own decision.
4. Strengthen city’s cultural development and promote local feaures.
5. Reduce the inequality in health between the communities
6. Create a healthy city of high stability and sustainable development and maintain the environmental qualities and the citizens ‘health while developing the city.
7. Ally with other healthy cities to share successful experiences, sources, information and knowledge, and support each other.

Taipei City Government declared 2002 was the Year One of Taipei Healthy City, and use different ways to realize the goal of “Healthy Taipei” such as promoting city diplomacy by more international interaction, encouraging citizens joining the healthy city construction, and more investment to the communities. Also, Taipei has made the communities as platforms and progressively promoted the idea of safe communities. Till 2010, 12 Districts of Taipei successfully join the health and safety related international networks: Shihlin, Beitou, Zhongshan, Songshan and Wanhua Districts of Taipei, were also entitled as members of The Alliance for healthy Cities. Naihu, Zhongzheng, Xinyi, Datong, Wenshan, Nangang District were certified as International Safe Community. This achievement not only improve the interaction nationwide and worldwide but also promote Taipei.



Taipei is the capital of Taiwan. International exchange in economy, trade and culture takes place frequently here, and the communities, government departments, associations and the public take an active part in the exchange. In order to meet the development trend of international healthy city promoted by the WHO and to actively realize the ideal goal of “Health for All” of the twenty-first century, Taipei City Government, led by Mayor Ma Ying-chiu, is advocating healthy city policies in the hope of establishing a sustainable development prospect of “vigor and health” and developing a city characterized by health, vigor, safety, happiness, care, convenience, cleanness, ecological nursing, science & technology, comfort, culture, welfare, kindness, mutual aid, richness, and quality & efficiency. It is expected that a healthy city will be built through the assessment of citizens' needs, the establishment of health-promoting public policies, the wide participation of the citizens, the support from communities, government departments and associations, and the cooperation and innovation of public and private sectors

Reference:

1. <http://healthycity.taipei.gov.tw/ct.asp?xItem=1307834&CtNode=39519&mp=100068>