

World Health Day 2010



URBAN HEALTH
MATTERS

Toolkit
for event organizers

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Any queries regarding this toolkit should be addressed to: whd2010@wkc.who.int

This toolkit is available electronically and can be found at www.who.int/whd2010

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WHY THIS TOOLKIT?

This “Toolkit for event organizers” is intended to assist in the planning process to mark World Health Day 2010, including the *1000 cities 1000 lives* campaign. It provides information on how different sectors – individuals, institutions, organizations, or government agencies involved in public health from the local to international level – can play a role.

The guide can be read in its entirety or used as a quick reference, depending on the need of the reader at any given time. The toolkit briefly describes the current trends and facts around urbanization and health and some of the actions being taken to address its associated challenges. It also highlights key messages for the Day and provides ideas for local and national events as well as some planning guidelines to implement activities right for any given city.

Who should use this guide:

Individuals, institutions, organizations and government agencies interested in organizing an event for World Health Day 2010, at the local, national, or global level levels.

Policy-makers at all levels may also find the guide useful for its key messages around the theme of urbanization and health.



SECTION ONE

CHAMPIONING URBAN HEALTH



HOW TO PARTICIPATE IN WORLD HEALTH DAY

Any city, town, or local authority is welcome to participate. National leaders are encouraged to take part in the Day by promoting and participating in activities. An online registration form should be completed on the World Health Day website in order to officially register city participation and be eligible for some of the opportunities the campaign may provide (e.g. publicity, designation as one of the 1000 cities, etc.). For more information, please go to www.who.int/whd2010. Individuals can participate in the city-led events and can also submit individual stories of urban health champions. Following is the list of options for participation:

1. 1000 cities: Open city streets to people

To prepare for World Health Days, the health sector (MOH) usually collaborates with other relevant sectors (in this case urban planning, transport, and environment) to use the toolkit as a guide in planning awareness and educational campaigns or to launch new initiatives (a national target, legislation or policy), at all levels of government. The idea is to ensure a “whole of government” and a “health in all policies” approach, and to involve national policy-makers in planning for World Health Day. Positive experiences may well lead to more structural long term policies to give public health a higher profile. More health awareness does not always primarily come from the health sector. Increasingly, other sectors are showing the willingness, responsibility and leadership to incorporate health in the policy process.

When: One day during the week of 7 April, up to Sunday 11 April.

What: Cities are invited to open a portion of their streets to people and close them to motor vehicles, offering citizens a novel public space for physical exercise, meeting family, friends and community, health checks, eating healthy local food or visiting local attractions.

These open-street initiatives, growing in popularity around the world, can measurably reduce carbon emissions, improve air quality, boost small business and offer citizens an opportunity for physical activity and a mental health break. The aim is to offer a range of activities for all citizens to enjoy together, no matter their age, gender, culture or income bracket. Many cities already have open-streets (or “car-free”) programmes. The goal is to engage more than 1000 cities to participate, with 11 April being an ideal target date. For those cities where Sundays are a working day of the week, 9 April would be the preferred alternative.

Who: Municipal leaders, NGOs, community based-initiatives and individuals. Mayors, and departments of health, transport, parks and recreation are invited to lead an open-streets initiative, convening the necessary municipal departments, civic and business organizations. Alternatively, civil society movements can encourage a city’s participation, but they should have the municipal authorities approve the initiative. Collaboration with groups including those with a health, environment and transport focus, business, and religious groups will be key to success. The event should be promoted widely to all citizens.

To register: Go to the World Health Day website and officially register city participation and describe activities to be conducted in the closed-off streets. Only those individuals who are authorized and with the full support of the municipality to close portions of the roads to health activities should register the city. A declaration of participation from local authorities will be requested upon receipt of registration.

For more information to plan open streets events, please see the guide on page 20.



2. 1000 lives: Record and profile the story of local health champions

When: 1 November 2009 – 1 October 2010

What: Make a short video profiling an urban health champion. Choose someone who is making a real difference to improve health in their community. Is there a local champion who has successfully lobbied for policy change? Someone who has brought health services to their community? Or the other way around: someone from the transport or urban planning sector who has improved the living environment, or increased awareness in order to enhance health? The goal is to gather and promote at least 1000 stories.

Who: Any individual who has made a difference to health in a city. Individuals can self-nominate, or others can do the video with or for them. All citizens are invited to help identify a local health champion. Support their efforts to videotape their story in an engaging way, using visuals showing how they worked with the city and their community. Consider documenting the lessons learned from their efforts and the impact for health in their community and sharing these with WHO.

To register: Submit a video of up to four minutes to www.youtube.com/whd2010.

3. Organize other activities throughout the week

When: Any day or days between 7–11 April 2010

What: There are many other activities, events, and policies that can demonstrate actions and solutions for the World Health Day campaign. The announcement of bylaws or regulations on tobacco, food, waste management, or holding regular car-free events on a given day each week in the summer, are just a few examples of other major city initiatives. Ideally the activities or initiatives should encourage the participation of several different types of agencies or groups, as this is one of the main messages of the World Health Day campaign – going beyond the health sector to ensure lasting health benefits to cities and citizens. School assemblies; activities with children; poster campaigns with schools; university forums; company relay races; clean-up campaigns; health fairs; and town hall meetings with mayors, national leaders, heads of states on local health concerns, are also activities to consider. Ideas for more of these activities appear on page 24.

Who: National and/or municipal offices, workplaces, schools, universities, health facilities.

To register: Go to the World Health Day website and register the activities your organization or group would like to hold.



4. Sharing World Health Day 2010 activities

When: 7 April 2010

What: On 7 April, World Health Day, WHO will promote the open-street events and other urban health activities that will occur throughout the week leading up to 11 April.

Who: Through the website, designate a focal point to send WHO a description, photos, comments, and/or plans for the open street event as well as other planned activities. After the event takes place, send photos, videos and any metrics from the open street event. What was the event? How many people participated? What was the feedback from participants? What was the improvement in air quality for the day? Any lessons learned? Use the information to consider expanding the open-street event – would the city hold these more regularly? Once a month? Every week?



SECTION TWO

KEY MESSAGES, FACTS AND TRENDS



KEY MESSAGES

Virtually all population growth over the next 30 years will be in urban areas.

The rapid increase of people living in cities will be among the most important global health issues of the 21st century. Over half the world's population now live in cities. By 2030, six out of every 10 people will be city dwellers, rising to seven out of every 10 people by 2050. In many cases, especially in the developing world, the speed of urbanization has outpaced the ability of governments to build essential infrastructure. Unplanned urbanization can intensify an existing humanitarian crisis and has consequences for the health security and safety of all citizens in cities.

The urban poor suffer disproportionately from a wide range of diseases and other health problems.

Health data is usually aggregated to provide an average of all urban residents - blurring differences between the rich and the poor. It thus masks the health conditions of the urban poor. More than one billion people – one third of the urban population – live in urban slums. World Bank estimates that by 2035, cities will become the predominant sites of poverty. Health problems of the urban poor include an increased risk for violence, chronic disease, and for some communicable diseases such as tuberculosis and HIV/AIDS.

The major drivers of health in urban settings are beyond the health sector.

Urbanization is not inherently positive or negative. Underlying drivers – also referred to as social determinants – converge in urban settings which strongly influence health status and other outcomes. These determinants include physical infrastructure, access to social and health services, local governance, and the distribution of income and educational opportunities. Communicable diseases such as HIV/AIDS and tuberculosis, chronic diseases such as heart disease and diabetes, mental disorders, and deaths due to violence and road traffic injuries are all driven by these underlying social determinants.

Actions and solutions exist to tackle the root causes of urban health challenges.

Urban planning can promote healthy behaviours and safety through investment in active transport, designing areas to promote physical activity and passing regulatory controls on tobacco and food safety. Improving urban living conditions in the areas of housing, water and sanitation will go a long way to mitigating health risks. Building inclusive cities that are accessible and age-friendly will benefit all urban residents. Such actions do not necessarily require additional funding, but commitment to redirect resources to priority interventions, thereby achieving greater efficiency.

Build partnerships with multiple sectors of society to make cities healthier.

Health is a human right for all citizens. It is the role and responsibility of individuals, civil society, and governments to uphold this principle. Platforms where municipalities, civil society and individuals come together must be encouraged to protect the right to health of current and future generations of urban dwellers. By bringing multiple sectors of society together to actively engage in developing policies, more sustainable health outcomes will be achieved.



SOME URBANIZATION AND HEALTH FACTS AND TRENDS

The following information is drawn from the Knowledge Network on Urban Settings report, the WHO Commission on Social Determinants of Health, UNHABITAT reports and other global studies. For the most part, data is global and regional in nature and is meant to depict common trends related to urbanization and health. Differences in health outcomes and factors determining them in any given city will vary according to context. This information and data may be useful for groups wishing to develop their own advocacy materials for World Health Day.

Urbanization continues in all parts of the world

- The rate at which urbanization has taken place over the last few decades is well-illustrated by a look at how long it took a city to grow from one million to eight million inhabitants. For London, this growth took around 130 years. For Bangkok, similar growth took 45 years. For Seoul, it took only 25 years.
- Between 1995 and 2005 alone, the urban population of developing countries grew by an average of 1.2 million people per week, or around 165 000 people every day.
- Most rapid growth will take place in cities of 1 to 10 million people; it is not just a megacity issue.
- The speed of urbanization has outpaced the ability of governments to build essential infrastructures that make life in cities safe, rewarding, and healthy, particularly in low-income countries.

Growing health inequities in all cities

- The presence and extent to which health inequities exist in all cities is of particular concern.
- Significant differences in life expectancy between urban residents in the same cities exist in high-income countries as well as low- and middle-income countries.
- Evidence from 47 countries on child health outcomes shows higher socioeconomic inequality in urban areas compared to rural areas.

Urban settings as a health determinant

- Health outcomes are determined by environmental, social, and physical infrastructure conditions and factors that can be positively influenced.
- Examples of determinants include water and sanitation, quality of air, living and working conditions, access to services and resources, among others.
- Unplanned urbanization, especially in the developing world, has been accompanied by continued growth of slums and shantytowns.
- One in three urban dwellers lives in slums, or a total of 1 billion people worldwide.
- With more of the world's population living in cities, the conditions and factors that determine health outcomes become an ever more pressing challenge to address.
- The myriad factors and conditions in urban settings make urbanization such a powerful force that it is, in itself, a major determinant of public health in the 21st century.
- Failure to address these underlying factors now can result in spiraling health costs, as well as potential security issues for underserved populations in all cities.

Urban Environmental Health

- Some 32% of urban residents in developing regions lack improved sanitation. Globally, it is estimated that 3% of all deaths, including most diarrhoeal disease, is attributable to the lack of improved drinking-water sources, sanitation and adequate hygiene.
- The unreliability of piped drinking-water supplies in urban areas also encourages household storage of water, with associated risks of contamination (diarrhoeal diseases) and vector breeding (dengue and malaria); household water treatment and safe storage can reduce these risks.



Urban Environmental Health (continued)

- About 25 % of city dwellers in developing countries, and 70% in least developed countries use solid fuels for heating and cooking, causing indoor pollution, which greatly increases risks of respiratory disease, especially in children and exacerbates outdoor air pollution as well. Globally, some 2 million deaths annually are attributable to such indoor air pollution exposures. Shifts to improved stoves or alternative fuels (LPG, solar power, etc.) can address this severe health problem, and in some scenarios also reduce greenhouse gas emissions.
- Poor urban housing structures and household water storage and waste disposal practices also are factors in vector borne disease transmission, particularly dengue disease and malaria. Improved residential housing design, can address these as well as energy conservation. Disposal of health care waste, containing toxic or biohazards, can pose health risks in urban areas with inadequate waste facilities as may other forms of industrial and commercial waste exposures.
- Developing country cities are particularly vulnerable to health hazards from climate change and. In particular, the coastal location of many major cities, makes populations more vulnerable to extreme weather and to sea level rise. Heat waves also place cities at risk of the "heat-island" effect, where temperatures may be as much as 5-11° C warmer than surrounding rural areas due to dense urban geography and energy sources.

Urban transport and health

- In many developing world cities, soaring increases in motorized road traffic over past decades pose a growing urban public health problem, particular for vulnerable groups. In developed world regions too, such as Europe, urban transport patterns, along with smoking and diet, have been widely acknowledged as among the most important health determinants.
- Globally, road traffic injuries constitute the ninth leading cause of death, and most road traffic deaths occur in low- and middle-income countries. Almost half of those who die in road traffic crashes are pedestrians, cyclists or users of motorized two-wheelers.
- Urban air pollution is estimated to kill some 1.2 million people annually around the world, largely due to cardiovascular and respiratory diseases. A significant proportion of urban air pollution is generated by motor vehicles, although industrial pollution, electricity generation, and in least developed countries, household fuel combustion, also are major contributors. Globally, transport emissions also are a major contributor to climate change.
- In many developing cities, high urban vehicle concentrations, proliferation of aging and polluting vehicles (e.g. older diesels), poor infrastructure, and mixing of pedestrian/cycle and road traffic, generate even greater risks from air pollution and traffic injury – particularly for vulnerable groups.
- By creating barriers to walking and cycling and other forms of physical activity, poorly planned urban transport also encourages sedentary lifestyles. That is also a factor in obesity and obesity-related diseases. Transport-related noise is a factor in stress-related diseases.
- The health of the entire urban population is impacted by pollution and unsafe streets. But groups facing the greatest risks typically include children, older people, and people with disabilities and the poor – as they tend to be more reliant on walking, cycling and public transport for everyday movements.
- Urban sprawl often means new city neighborhoods and businesses are sited far from public transport hubs and without safe walking and cycling networks. This, in turn, creates a vicious cycle of greater reliance on motorized transport, and exposure to risks. Sprawl also can make expansion of electricity, sewage and water infrastructure inefficient and difficult to regulate.



The growing burden of noncommunicable diseases

- Today, around 80% of the global burden of chronic diseases is concentrated in low- and middle-income countries, with enormous implications for the accessibility, quality, and cost of long-term care.
- Obesity/overweight and other related conditions also place a significant economic burden on countries in terms of enormous healthcare expenditures and lost productivity.
- Unhealthy diets and physical inactivity contribute to increased risk for many noncommunicable diseases as well as chronic conditions including obesity, hypertension, cardiovascular disease, osteoporosis, type 2 diabetes and certain types of cancer.

Diet and physical activity in urban settings

- Urban environments tend to discourage physical activity and promote unhealthy food consumption.
- Participation in physical activity is made difficult by a variety of urban factors including overcrowding, high-volume traffic, heavy use of motorized transportation, poor air quality and lack of safe public spaces and recreation/sports facilities.
- Cities often have a greater supply of energy-dense, nutrient-poor foods with high levels of fat, sugar and salt, as well as a greater demand for “fast food” to accommodate the fast-paced lifestyle.
- In the WHO World Health Survey last conducted in 2003, at least half of the countries reported a prevalence of about 70% or more of insufficient intake of fruits and vegetables in urban areas.

Smoking and secondhand smoke in urban areas

- Smoking rates may be higher in some urban areas due to greater availability of tobacco products and targeted marketing, especially in developing countries.
- The absolute number of smokers in urban areas can be considerable even if prevalence is lower than in rural areas.
- According to data from the World Health Survey 2003, the median smoking prevalence in urban areas was over 20% in all WHO regions except Africa.
- There is no safe level of exposure to secondhand smoke. Smoking and non-smoking sections in restaurants, bars, pubs, do not ensure adequate limits to secondhand smoke.

Violence in urban areas

- The frequency and intensity of violence is closely tied to economic and social inequalities within and between large cities, with often huge disparities in homicide rates, youth violence, sexual assault and child abuse coinciding with inequities in the provision of housing, educational, employment and health expenditure.
- Rates of violence by young males, often belonging to gangs, are higher in urban areas. Gang violence often accounts for the bulk of violent offences reported in cities. Emigration to cities from rural areas, the breakdown of established social order, demographic changes and income inequalities all help fuel youth violence in cities.

Mental Health

- Rapid urbanization of cities leads to conditions that can threaten mental health, such as overcrowding, unemployment, poverty, cultural dislocation and isolation, and deterioration of housing.
- Urbanization can lead to increases in the burden of mental disorders and widening treatment gaps. Mental health treatment gaps are particularly pronounced in urban centres in developing countries.
- Studies from both developed and developing countries indicate that children in urban environments (especially those that are low-income), have higher rates of psychological and behaviour problems, and lower educational and occupational expectations than do those from rural areas.



Mental Health(continued)

- Neighbourhood factors such as levels of noise pollution, perceptions of the local environment (local amenities, area reputation and fear of crime) and neighborhood social cohesion and social capital have been found in several studies to impact on mental health.
- To improve service access and outcomes for mental health, mental health interventions need to be built into general health care, especially primary care. Health and social services must be provided in ways that address the particular mental health needs of urban populations including the vast numbers of migrants

Substance abuse

- Alcohol and drug related problems may be exacerbated by urbanization due to higher availability of alcohol and illicit drugs in urban environments.
- Even after accounting for other variables, urbanization is associated with twice the rates of hospital admission for alcohol or drug use disorders.
- The level of abstention is an important mediating factor of alcohol-attributable health burden that often serves a protective role in poorer societies, but such abstention rates tends to be lower in urban than in rural areas.
- With rising affluence in many cities in developing countries, there are often substantial increases in alcohol and drug use and resultant public health problems with an inequitable impact falling on the poor.

Tuberculosis

- Crowding and high population density are direct risk factors for transmission of communicable diseases, especially airborne diseases, such as TB.
- The rapid population expansion in urban areas globally and especially in low-income countries has resulted in sprawling urban poor settlements where people live in poor conditions facing problems related to poverty, sanitation, hygiene, housing and overcrowding. Congested urban settlements facilitate transmission of most communicable diseases and especially tuberculosis.
- TB incidence is much higher in big cities. In New York City, TB incidence is four times the national average. Incidence of TB in some parts of London is as high or higher than that in China. The situation is no different in resource-poor countries: 45% of TB cases in Guinea live in Conakry; 83% of TB cases in DR Congo live in cities.
- The challenges of urban TB control are: 1) multiplicity of health care providers of diverse types, 2) multiplicity of users of TB services (slum-dwellers, migrants, drug addicts, homeless) and 3) multiplicity of authorities -- municipal, provincial, national - responsible for carrying out similar tasks for different population groups. Quality TB care requires more than good clinical services, particularly strong linkages with other social services to enable strong patient support.

HIV/AIDS

- Prevalence of HIV in generalised epidemics is generally higher in urban areas; population-based household surveys indicate that prevalence is 1.7 times higher in urban than rural areas.
- In concentrated epidemics, groups at higher risk of HIV owing to particular behaviors such as intravenous drug use, men having sex with men, or sex workers and their partners tend to cluster in urban areas, increasing potential for exposure in urban areas.
- Although they may represent greater risks of HIV exposure, urban areas also tend to benefit from greater access to health services; the concentration of populations around health services underscores the potential for expanding and improving urban health services around HIV treatment and prevention.



Urbanization and Maternal and child health

- The rapid growth of cities has increased the visibility of unequal access to skilled care at birth and to emergency care for urban women.
- Women who live in these slums often do not have access to basic health services. These women and their newborns are particularly disadvantaged because they do not receive appropriate care during pregnancy and childbirth.
- Most caesarean sections in developing countries are performed among the urban richer and richest women, while often almost none of the urban poorest women have access to this life-saving procedure. A similar trend can be seen regarding access to skilled birth attendants. Only very few of the poorest women have access to a doctor and/or a skilled nurse or midwife during childbirth.

Public health emergencies and humanitarian crises in urban settings

- The risks of emergencies from natural hazards (such as floods, extreme heat and cold, landslides and earthquakes), chemical and radiological hazards, fires, transport crashes, and outbreaks of respiratory, water-borne and vector-borne diseases, are amplified by the concentration of population and their living conditions in urban areas.
- Conflict and insecurity in the urban environment and the movement of people from crises in rural areas to cities pose significant humanitarian challenges. Slums proliferate as large numbers of displaced people seek refuge at the margin of urban areas.
- Poor water and sanitation, overcrowded living conditions, and fire-prone shelter increase community vulnerability to emergencies, especially among the urban poor and other high-risk groups.
- Cities are an efficient engine for the rapid national and international spread of diseases by providing a unique environment for both amplification of diseases and mobility of infected individuals with access to bus and train stations, large international airports, and seaports.
- Health facilities are damaged or destroyed by hazards, while local authorities and communities are often ill-prepared and under-resourced to respond to the scale of these emergencies, leaving people with limited access to health and emergency services when they are most needed.
- When urban areas, which are the most concentrated source of health, logistic and other resources, are impacted by emergencies, assistance to the rest of the country is restricted.

UPDATES TO KEY FACTS AND TRENDS WILL BE AVAILABLE
ON WEBSITE VERSION OF TOOLKIT



ADDRESSING THE CHALLENGES

Actions to build a flourishing urban environment

If urbanization continues in its current path, it will present social, health and environmental challenges on an unprecedented scale in human history. There is an urgent need for a new approach to urbanization and a new paradigm of public health. Five key areas for action are:

- ✓ *Urban planning promoting healthy behaviours and safety.* Local governments and civil society can design urban areas to promote physical activity through investment in active transport; encourage healthy eating by managing availability and access to fresh food; and reduce violence and crime through good environmental design and regulatory controls, including managing the number of alcohol outlets.
- ✓ *Improve urban living conditions.* Apply healthy urban design principles with easy access to basic amenities and services, designated commercial and non-commercial land use, with land also set aside for protection of natural resources and recreation. One of the biggest challenges is, of course, access to adequate shelter for all. The quality of housing and adequate access to services such as water and sanitation are vital contributors to health.
- ✓ *Participatory urban governance.* Local participatory governance mechanisms should be established that enable communities and local governments to partner in building healthier and safer cities.
- ✓ *Inclusive cities are accessible and age-friendly.* People with disabilities make up at least 10% of the population, and access barriers prevent participation in education, employment and public life. Globally, populations are rapidly ageing, leading to more older people, many of whom will experience mobility and sensory impairments. Measures such as accessible public transit, kerb cuts, safe pedestrian crossings (e.g. tactile paving, signaled controlled crossings) all improve safety and enhance participation for disabled and older persons.
- ✓ *Making urban areas resilient to emergencies and disasters.* Improving the ability of the community to protect themselves from all types of hazards, and involving the health sector in community-led local emergency response planning and training, will help to reduce risks and provide a more effective emergency response. The development of settlements and infrastructure away from natural and technological hazard-prone areas, and safer health facilities which are prepared for emergencies will make communities safer. All-hazard health emergency management systems, with the ability to provide safe and secure health services, food and water, water, protection and shelter in humanitarian settings is needed to minimize loss of life and disabilities in emergencies, disaster and other crises.



SECTION THREE

PLANNING ACTIVITIES RIGHT FOR YOUR CITY



This section has three main parts:

- General tips on getting started
- Participation in the global *1000 cities 1000 lives* campaign
- Planning other World Health Day activities

GETTING STARTED

Key steps in the process of planning your activities for World Health Day 2010:

1. Develop and package the key messages
2. Mobilize other sectors
3. Plan events for the day – and beyond!

DEVELOP AND PACKAGE THE MESSAGE

It will be useful to keep the following points in mind when developing a message applicable to your city.

- Describe the most important health issues in your urban area. What are the biggest current or potential health problems in your city/region/country? How much baseline information is already gathered on these issues?
- Use the facts and trends pages (10-14) as a guide to collect the same type of information applicable to your city.
- Identify gaps (problems) in local information and current programmes, as well as the steps you can take to raise awareness and stimulate action.
- Publicize and promote the work done or programmes proposed by your organization to improve the situation.
- Empower individuals and organizations at the local level to get involved by identifying practical, locally relevant approaches to prepare for the event on the Day.
- Highlight success stories.

MOBILIZE OTHERS AND PLAN EVENTS

Approach local partners with an outline of activities and events for World Health Day 2010 and ask for their involvement and support. Explain how their participation shows enlightened self-interest: as well as supporting a good cause, it will increase their visibility and enhance their profile in the community. Local restaurants can promote business by offering cooking classes or selling special nutritious and healthy meals. Local sporting companies can have booths or demonstrations of sports goods – encouraging people to start a new sport, or holding sign-ups for clubs to hike, bike, kayak, play football, etc. Discussions, forums, seminars and courses are useful for exchanging information with the public, nongovernmental organizations, policy-makers and decision-makers, and associations of health-care providers and teachers. Town hall meetings can be set up with mayors and national leaders to discuss health issues in your city.

For planning the open streets events, see page 20

For ideas on other ways to celebrate World Health Day see page 24



1000 CITIES

Step 1. Open up streets on Sunday, 11 April 2010 or Friday, 9 April

Step 2. Promote a physical or mental health activity in the open streets

What is done in the open streets is left to the creativity, desires, and priorities of a city. It can be one activity or several. Here are just a few ideas to get you started:

- Organize a 5 or 10km run or walk led by the head of state, transport or health minister, or mayor;
- Plan a biking trip or walk to a cultural landmark or nature area in your city (e.g. along a cherry blossom path in Japan, to the Taj Mahal in Agra, or the Eiffel Tower in Paris);
- Ensure proposed races are open to wheelchair racers and that all activities are accessible to people with disabilities;
- Set up a health booth that provides Body Mass Index (BMI) and/or blood pressure tests;
- Promote fun athletics in open areas around the city – line dance, salsa, karate, taekwondo, Thai boxing;
- Enjoy music by holding a classical concert for all to enjoy;
- Hold a special football match or championship series commemorating the Day;
- Set up “Move for health zones” – a health fair in the streets with BMI screening stations, displays of health products, and samples of a variety of health drinks and foods made from local produce;
- Hold a farmers market to sell fresh fruits and vegetables with demonstrations by local chefs to promote healthy food;
- Provide a trader’s fair of sporting goods, equipment and athletic wear, and encourage people to pick up a new sport or join a team;
- Sponsor a conference, workshop or symposium with local experts on urbanization and health.



PLANNING GUIDE FOR 1000 CITIES OPEN STREETS EVENTS

Start planning well in advance

- Identify who needs to be involved in your city to help manage official coordination of the day;
- Consider setting up a working group with representatives from sister agencies and community leaders to plan and coordinate;
- Identify civic groups and NGOs such as the World Heart Federation, World Lung Association, or walking and cycling groups who can help sponsor activities and inform and mobilize their members;
- Identify and agree on an operational budget;
- Consider containing costs by identifying volunteers and engaging different types of businesses who will benefit from the event to sponsor activities;
- Start early – experience has shown that it takes at least four months for larger cities (1 million inhabitants or more) to plan and coordinate a street-closing event. For smaller cities, the time is less, but adequate time is needed to ensure success.

Choose the right streets

- Should be an attractive area that people will want to go to;
- Should be a major street or streets connecting to points of interest;
- Choosing an iconic street or landmark sends a powerful signal to the rest of the city and country;
- Identify businesses and organizations located in proposed target areas that could contribute to the success of the Day (e.g. local businesses, sport associations, restaurants promoting healthy food).

Manage traffic flow

- Identify the public transport routes that will be affected for necessary rerouting;
- Consider increasing the frequency of public transport to get people to the open streets area;
- Consider leaving one lane open for traffic in large cities/streets to help with traffic flow;
- Consider the number of parking areas that will be required in surrounding areas due to the closure of targeted streets;
- Work with local businesses and others who will need to get deliveries into the open streets zone and create loading zones outside the area for pick-up with specially authorized vehicles;
- Engage the police department or other agencies such as traffic or local highway officials to help direct traffic away from the open streets area. Barriers and checkpoints will need to be established;
- Develop a list of exemptions for those who would require special access rights to the designated areas. such as emergency vehicles, workers for urgent repairs, as well as disabled people;
- Develop a plan for access by residents affected in the open streets area during the day, and/or inform them ahead of time of the procedure to be implemented.



Be inclusive in choosing events

Plan activities for people of all ages, sizes, cultures and income brackets

- For little children and older adults
- For men and women
- For rich and poor
- Make events and associated publicity accessible to people with disabilities – removing physical and information barriers

Engage to get the right people working together

- Political will – the city
- Sister agencies – health, transport, recreation, education, police, sanitation
- Champions – the doers
- Community – business, civic, religious

The city has to get behind the day. The event will not happen without the political will of the city's leaders. You don't need any capital infrastructure, because you're using the roads. But you will need some operational money.

Sister agency coordination is essential. Police will help with public security, traffic flow and help direct traffic away from the streets closed to motor vehicles. Transport officials will help with rerouting public transport and managing the flow of people to and from the open street area to attend the events or to carry on routine activities. Health officials can help set up screening booths and be on site to provide first aid if needed. Parks and recreation officials can help organize healthy activities. Sanitation workers, perhaps together with volunteers, will be needed to help clean up afterwards.

Champions: The people organizing and running the activities for the day should be passionate and believe in the event. It will no doubt require patience, insistence and working well with others. Champions in turn need to be able to count on support from the local authorities and others.

Civil society: Choose groups who will help make the day a success. Some examples:

- Local restaurants who see the event as an opportunity and can offer health foods, hold cooking demonstrations of healthy meals, or offer special health menus for the day;
- Local businesses that can sponsor events, promote the use of sporting goods and equipment;
- Fitness centres which can promote exercise classes, provide demonstrations of sports for people to consider taking up (taekwondo, kayaking, kendo, badminton, volleyball, basketball, abseiling, hockey, etc);
- Biking and walking groups to help organize bike or walking lanes, or who may help set up free bike rental for the day;
- NGOs well-versed in organizing "Days" or that have experience in sponsoring walks and/or promoting health-related events such as the International Diabetes Federation or cancer society groups (e.g. Pink Ribbon campaign).



Communicate

Decide on your messages and audience and get the word out

- Develop an effective communications plan;
- Get messages out in as many different ways as possible;
- Work with local media to help publicize the events on radio, TV and in the newspapers;
- Work with local businesses and put announcements and fliers in shops;
- Consider sending information to selected target groups from the mayor publicizing the Day's events;
- Send special information to those groups who will be more directly affected by the event (e.g local businesses, residents and religious establishments in designated areas) to invite them to take part and let them know of any special measures being taken in their interest;
- Develop a special website and chat rooms; reference the event on all municipal websites, and those of participating agencies and civil society organizations;
- Remember to ensure that communications are accessible to people with visual impairment or hearing impairment.

For more information on engaging with the media, see page 26.

More tips for success

- Consider engaging the community through volunteerism;
- Consider running the open streets events at least a few times in order to identify and correct any problems that may occur;
- Work with the religious communities who may be affected by the closure of streets to ensure ceremonies are affected as little as possible.

Measure the impact

- Consider the following:
 - How many participants?
 - How popular were the health activities?
 - Were there changes in air quality?
 - How was local business?
- Conduct targeted surveys to assess public reaction to the Day (residents, people participating in the health activities, local business owners, religious community);
- Install air quality sensors inside and outside the traffic-free zones and measure over several days for comparative analysis. Also take measurements on the same day of the week the event takes place for a few weeks before and after to allow for comparable measurements;
- Ask local businesses to provide information on customers, sales, and involvement over the designated Day.

Share the results

- Collect stories, photos, video and lessons learnt with the community and with the World Health Organization.

For more information on how to use social media sites for *1000 cities 1000 lives*, see our separate “Social media guide”.



Consider expanding

- Cities around the world are holding open streets events on a regular basis. Consider making it a longer-term initiative for your city.
- Use the experience to establish a permanent group with members from coordinating municipal agencies, the business community, NGOs and other interested groups who could identify other areas in need of intersectoral action that would benefit from a health-in-all-policies approach. For example:
 - Working on tobacco-free initiatives in the city
 - Clean-up campaigns in low-income areas and ensuring municipal garbage collections on a regular schedule
 - Age-friendly initiatives for the city
 - Creating more green spaces in designated areas
 - Reducing speed limits in designated zones
 - Adopting helmet use laws for motorcyclists and cyclists
 - Promoting sustainable transportation

1000 LIVES

Individuals are a powerful force within urban settings, making changes that have enormous health benefits for us all. Do you know someone who has made a difference?

- Yuhta Ohishi is a Japanese boy with asthma who lobbied for two years to reduce exposure to secondhand smoke in his city of Shizuoka.
- Citizens from an informal settlement in India proposed to pick up trash in its alleys, and successfully persuaded the municipality to provide a regular truck service.

Social media sites can be a great way to share experiences, learn from others, and apply their innovations to our own situations. The *1000 lives* campaign is designated to collect stories of urban health champions from around the world. Here's how it works:

Nominate an urban health champion

- It can either be a self-nomination or someone you know or admire.
- Make a short video that reflects what this “health champion” is doing to improve health in your city, no more than four minutes long.
- Upload the video to the WHO YouTube site at www.youtube.com/whd2010.
- All six UN languages (Arabic, Chinese, English, French, Russian, and Spanish) can be accepted.

Through the videos of *1000 lives*, we will hear inspirational stories for us all to consider how we as citizens can work together and affect change.

For more information on how to upload videos to YouTube, see the separate booklet, “Social media guide”.



OTHER WAYS TO CELEBRATE WORLD HEALTH DAY

The list below provides a checklist of points for discussion and actions you might choose to take, according to the people and organizations you may wish to involve. In discussion with local partners, you will find many additional options for action and cooperation.

Policy-makers, local authorities, mayors, politicians

- Hold a high-level policy discussion with other mayors, national leaders, or heads of other municipal departments;
- Sign up the municipality to be part of the *1000 cities* initiative;
- Sponsor a 10km walk, biking, or sporting event on the Day;
- Make the closure of city streets for health a weekly event;
- Hold town hall events where citizens talk face to face with local or national policy-makers about important health issues in the city;
- Enact new legislation on transport, tobacco, road safety, or other health-related issue, or ensure enforcement of existing ones;
- Create a new fund dedicated to a health initiative, or establish a health promotion board across line agencies;
- Organize a round table or other discussion forum with your municipality and local citizens to discuss what the particular public health threats are in your city and identify ways to increase the preparedness of your city;
- Conduct an exercise to test emergency response plans at the local health facility, airport, train station, etc.

Health sector: doctors, nurses and other practitioners, administrators, public health personnel

- Set up health screening events;
- Stress the health sector's direct responsibility to respond to the threats to health due to urbanization;
- Demonstrate what the health sector can do to improve access to health services in cities, particularly to those less advantaged;
- Sponsor health fairs in the open streets on 9 or 11 April 2010;
- Conduct an assessment of the safety of health facilities in your urban area(s).

Education: teachers, students and children

- Conduct school-based initiatives to promote healthy diets;
- Initiate programmes to promote physical activity;
- Arrange a school assembly on World Health Day 2010 with a guest speaker on urbanization and health;
- Give children pedometers to see how far they walked on 9 or 11 April 2010;
- Have a "show and tell" in class to discuss what students will do to be part of *1000 cities* *1000 lives* or other planned activities;
- Show excerpts of health champions from *1000 lives* to students and children;
- Invite a doctor, nurse or community health worker to come and talk to students;
- Design a board game or quiz on living in a city and how it can affect your health;
- Write a letter or article for the school newspaper on improving health in cities;



- Reward children who walk, cycle or take public transport to school with earlier dismissal after class;
- Start school backyard gardens to grow fresh fruit and vegetables.
- Organize a cultural or sporting event in humanitarian settings

Business owners, private sector

- Involve local restaurants to hold healthy cooking classes and/or healthy food displays;
- Encourage sporting facilities to sponsor free membership drives for the month of April;
- Have local sporting goods and athletic wear companies sponsor soccer games, biking in the city, or other culturally-appropriate activities applicable to your city;
- Find the win-win ideas that stimulate the economy, create jobs and encourage healthy behaviour.

In the workplace

- Sponsor a company relay race on 9 or 11 April 2010;
- Sponsor a poster, T-shirt or bumper sticker design contest for World Health Day 2010;
- Sponsor a walk-to-work or cycle-to-work day;
- Reward carpoolers with the best parking spots;
- Initiate health promotion activities in the workplace.

In the media

- Write letters to the editor or op-eds (see page 29, “newspaper contributions”) about the event(s) that will be held in your city;
- Produce a public service announcement for TV or radio, promoting the city’s activities as part of the *1000 cities* campaign;
- Submit a news release on your event;
- Gain endorsements and participation by athletes, celebrities and government officials;
- Use billboards, bus sides and other public locations to post health messages;
- Challenge elected officials to develop an action plan to promote health in urban policy;
- Submit an article to a local magazine.



SECTION FOUR

ENGAGING THE MEDIA



How to interest the media in World Health Day

This section gives you some technical information on reaching and using the three primary channels of mass media – television, radio and print. The discussion that follows sets out appropriate goals for your media outreach efforts. It provides information on how to understand and work directly with the media and suggests resources for reaching specialized media markets.

Organize events

Parades, competitions, street events and quizzes using the World Health Day 2010 theme “Urban Health Matters” all create media attention and get the message out to large numbers of people in an entertaining and stimulating way. This is a good way to reach people who might not be attracted to more traditional events, such as seminars or meetings.

Involve celebrities

It is a good idea to involve celebrities as spokespersons. Remember it takes time and preparation to ensure the effective collaboration of celebrities, as they and their agents or managers must be made thoroughly aware of the causes and consequences of the subject matter and you must explain how you want them to contribute to the event.

Celebrities

- Choose individuals who are well known and respected within the country or community and who can draw positive attention to World Health Day;
- Invite personalities in music, film, sports and politics to talk about the issues;
- Engage a well-known person who lives nearby or is from your area – they may provide “local support” for your event;
- Make sure the celebrities are briefed in advance.

Communicate effectively

Media relations, also referred to as public relations, means seeking the most effective ways of reaching target audiences. For example, you can use the news and public affairs programming in your area to highlight health issues. Before coordinating your media relations efforts, review and set down what you want to accomplish. Doing this will help you to develop appropriate media activities and messages consistent with the goals outlined above.

When reviewing your communications plan, ask yourself the following questions:

- Who is your target audience and what would you like them to do?
- What messages should you use to influence your target audience?
- What types of media outreach would be efficient and cost effective for this purpose?



Understanding the media

Members of the media are also members of the community. They will be interested in your messages in their capacity as private citizens and also as professionals. Two things are needed, however, to increase media coverage: (1) understanding what the media want in a story and (2) making sure that the information is provided to them in a clear and timely manner.

Having effective media relations is simple as long as you keep these points in mind.

In addition, all reporters and producers seek similar story elements. They look for audience appeal, issues that stimulate debate, stories that generate increased readership, and sustained public interest through fresh perspectives on an issue. The media will avoid stories that are inaccurate or incomplete, as well as organizations that are overly persistent after a story has been rejected.

News releases

News releases should be one page, but no more than two pages in length, and it is important to include the five Ws: *who* is involved; *what* is happening; *when* it is happening; *where* it is happening; and *why* it is important to the audience.

In one or two sentences, the lead paragraph should answer these five Ws. Most reporters decide whether or not to read further depending on the first paragraph, and print editors tend to cut the press release from the bottom up. The second or third paragraph should include a quote reporters can use in their article.

Feature news proposals can be three to four pages in length and should capture and build on a story you want to pitch. Attention-grabbing headings are also important. Some suggestions for stories include:

- A profile of an active health community leader – what he or she has done and why;
- The barriers that exist to improving community health and why;
- Personal stories of people's experience of overcoming health-related problems;
- Targeted prevention programmes, perhaps for immunization or clean water supplies;
- Launch of a partnership with a local business to combat a health problem;
- A local angle on international issues.

Media kits

A media kit provides information prepared especially for the media and released on the day of the event. Often organizations have a standard media kit, which includes material introducing the organization. For major news events, the standard kit should be supplemented with current information relating to the event. Examples of materials that might be included in a media kit are:

- Statistics on the prevalence of a particular health-related issue in your city;
- Information on your organization and its prevention programmes;
- Information on national, state or local hotlines or resources;
- Business card for the media to contact you or your organization;
- Brief biographies of key officials and spokespersons in your organization.



Creating and sustaining media interest

There are a number of different ways to create and sustain media interest in your World Health Day event. Having a radio or TV station cosponsor your event will highlight its commitment to health as well as generate the potential for free publicity. You can use prepared World Health Day material to attract both media and public attention. Use it in all publicity-related materials, from invitations to media kits, buttons and banners.

When preparing your event, allow plenty of time for planning, and choose the date and time carefully. Select a time when your most important audiences will be available and there are no conflicting events.

Supply plenty of photographs (most newspapers prefer black and white) and camera-ready graphics such as charts. Some camera-ready material can be obtained from WHO Communications Officers (see the contact list on pages 33–34). Supplements for the basic media kit for a special event may include:

- News release(s) on the event;
- Biographies of people (speakers, panel members, etc.) relevant to the event in which you are trying to interest the reporter;
- Copies of relevant written materials, such as statements to be given at a news conference, speeches, etc.

Monitor your media relations

Track your media contacts by asking all your colleagues to record summary information about their telephone conversations on a simple form giving name, organization, date, time, and topics discussed. Examining the media contact forms can provide information such as how many media enquiries were received over a period of time, on which subjects, and whether enquiries are increasing or decreasing.

Newspaper contributions

Two tools for outsiders to express their views in newspapers are Letters to the Editor and short pieces that appear opposite the editorial page (known as “op-eds” in newspaper parlance). Most newspapers will usually consider up to two op-eds a year from one source. The piece should be quite short (ideally 300–400 words), well thought-out, clearly written and persuasive; it should be sent by the head of your organization or someone of similar status.

Be selective about your Letters to the Editor: if you write too often they will not get printed. Your letter is more likely to be published if it contains fewer than 400 words. You should develop your main idea within the first two paragraphs. If you are responding to a specific article, put its title, author, and the date when it appeared in the first sentence.

Other actions

Contact reporters on the staff of local papers and persuade them to publicize your event. In addition, arrange to have the event listed in local newspaper calendars and announced on television and radio stations. Deliver invitations two weeks in advance of the event, by hand or by mail. Two to three days in advance, call editors and reporters and ask if they plan to attend. The day before the event, call the selected media again and politely remind them about the event.



During the event, set up a media sign-in table and hand out media kits. Try to set up interviews with participants and introduce the media representatives to the appropriate spokespeople. A good idea is to issue everyone with name badges (with names big and bold!). Have someone from your organization take photographs to illustrate future articles on the event; they will also be useful for your own files.

Immediately after the event, send a news release to any reporters who were unable to attend and send follow-up letters to the editors of local newspapers. You can also write a follow-up article for inclusion in appropriate community publications, illustrated with photographs. Remember to thank the community and participants, and inform them of the success of the event.

Coverage of your World Health Day event can be expanded by planning in advance a system for measuring the success of the event. Record information such as how many people attended, how many volunteers were recruited, and how much media coverage was received. Not only is this information useful for internal evaluation, but it can provide focus for post-event news releases.

Using the media

Utilizing the media to the best effect requires a collaborative effort. In a community, there are often several groups working to promote their particular event. If open communication does not exist between them, competition for media coverage may occur, thus causing tension between the groups and confusion among the media. The best way to avoid this is to encourage collaboration between local organizations, if possible forming an intermediary group that will coordinate the names, places, dates, etc. of each organization's events to be covered.

Although you may sometimes call on a reporter to put a local angle on a national story, much of the time you will need to create newsworthy material on your own. The three most important elements in a good story, from the media's point of view, are action, people and substance. Match the needs of the media with your message.

There may be other opportunities throughout 2010 to build on the momentum you set in motion by the World Health Day celebrations. You may like to consider setting up a calendar of events, activities and programmes that are important to the community, which you could use to sustain your relationship with the media. Because the news media thrive on novelty, however, you can only realistically expect to achieve significant coverage two or three times a year.



SECTION FIVE

SUPPORT FROM THE WORLD HEALTH ORGANIZATION



SUPPORT

The World Health Organization regional and country offices are ready to provide advice and guidance to groups wishing to plan and host events for World Health Day 2010. Contact information for the regional focal persons in these offices can be found in the following pages under “Contacts”.

DESIGN AND SLOGAN



The official design and slogan for World Health Day will be made available – in Arabic, Chinese, English, French, Russian, and Spanish – through the official global website at <http://www.who.int/whd2010>. When preparing materials in support of World Health Day, this design and slogan can be used, and translated into other languages as needed. They should also be used in conjunction with the WHO official logo. Organizers are reminded that both the design and slogan of the World Health Day campaign and the WHO logo are WHO intellectual property, and should be used only to identify events and materials related to World Health Day. The World Health Day design and the WHO logo may not be reproduced together with commercial logos, be used for the purpose of self-promotion or for obtaining any commercial or personal financial gain, nor may it be utilized in any manner which implies WHO endorsement of activities or products of a commercial enterprise.

WEBSITE

The official global website has been launched and city registration has begun at <http://www.who.int/whd2010>. This site hosts the main information around the campaign, as well as brochures in six languages, a promotional video about open streets events, and a “How to” video for organizers interested in planning health events in streets closed to motorized traffic. The website also links to the social media campaign site described below.

USING SOCIAL MEDIA TO PROMOTE YOUR EVENTS

The World Health Day 2010 campaign website, <http://1000cities.who.int> provides a platform to engage with a global audience through the use of today’s social media. It allows cities to create their own group on Facebook under the auspices of the campaign to promote their activities and engage in dialogue with citizens. Videos can be uploaded to the site to show what each city intends to do and to report back on the Day’s activities. In addition, a YouTube site has been launched to collect the stories of urban health champions. A more complete guide on how to use the social media site can be found on the global website.



CONTACTS

WHO Centre for Health Development

International organizations should contact the WHO Centre for Health Development:

Dr Jacob Kumaresan

Director

WHO Centre for Health Development, Kobe, Japan

Fax: +81 78 230 3178

whd2010@wkc.who.int

Ms Lucy Braun

World Health Day 2010 Coordinator

Communications Officer

WHO Centre for Health Development, Kobe, Japan

Fax: +81 78 230 3178 Email: whd2010@wkc.who.int

Regional organizations should contact the respective WHO regional office. Country-based, national and local organizations should contact the respective WHO country office. In countries where there is no WHO country office, the relevant WHO regional office should be contacted.

This information is provided on the main WHO website at: www.who.int/country/en

WHO websites

WHO headquarters: www.who.int

World Health Day 2010: www.who.int/whd2010



WHO REGIONAL OFFICES

AFRICA

Sam Ajibola Communications Officer WHO Regional Office for Africa (AFRO) Brazzaville, Republic of Congo Tel: + 1321 953 9378 Email: ajibolas@afro.who.int

AMERICAS

Daniel Epstein (Washington DC, USA) Communications Officer WHO Regional Office for the Americas (AMRO) Tel: + 1 202 974-3459 Email: epsteind@paho.org

EUROPE

Ms Liuba Negru Press and Media Relations Officer WHO Regional Office for Europe (EURO) Scherfigsvej 8, DK-2100 Copenhagen Ø, Denmark Tel: + 45 39 17 13 44 Fax: + 45 39 17 18 80 Email: LNE@euro.who.int

EASTERN MEDITERRANEAN

Omid Mohit Communications Officer WHO Regional Office for the Eastern Mediterranean (EMRO) Cairo, Egypt Tel: +202 27 65037 Mobile: + 20 10 6019087 Email: mohito@emro.who.int

SOUTH-EAST ASIA

Ms Vismita Gupta Smith Communications Officer WHO Regional Office for South-East Asia (SEARO) New Delhi, India Tel: +91 11 23370971 Email: guptasmithv@searo.who.int

WESTERN PACIFIC

Peter Cordingley Public Information Officer WHO Regional Office for the Western Pacific (WPRO) Manila, Philippines Tel: +63-2-528-9992 Email: cordingleyp@wpro.who.int

WHO HEADQUARTERS

Gaya Gamhewage Corporate Communications Team Lead Geneva, Switzerland Tel +41 22 791 4030 Email: gamhewage@who.int

Media inquiries - Switzerland + 41 22 791 21 11 Email: mediainquiries@who.int



REQUEST FORM TO BE LISTED ON THE WORLD HEALTH DAY 2010 WEBSITE

Please list your proposed World Health Day 2010 event on the WHO website.

Organization name:
Title of event:
Location: Date of event:
Website link for further details on the event:

The following information will not be printed on the WHO website but may be needed to determine if the event is in compliance with WHO policy. In case of any doubt, the event will not be mentioned on the website.

Name of person in charge:Telephone:

Description of event:
.....
.....
.....

Submit this form to:
WHO Centre for Health Development
By fax +81 78 230 3178
e-mail: whd2010@wkc.who.int
Through website: www.who.int/whd2010

