WHO-Macao (China) Healthy City Leadership Programme for the prevention and control of noncommunicable diseases

PROGRESS REPORT 2012–2013
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Macao (China) is taking a leading role for health in the Western Pacific Region.

Though small in size, Macao (China) is emerging as a major contributor to curbing the noncommunicable disease (NCD) epidemic in the Region.


The WHO-Macao (China) Healthy Cities Leadership Programme is a flagship initiative and has been instrumental in advancing the Healthy Cities programme in the Region. Four study tours covering 34 participants from 10 cities were held in 2012–2013, each of which generated rich experiences for delegates as local guides presented the diverse initiatives being undertaken to boost health opportunities in their cities, both through seminars and site visits.

As a follow-up to the Health Cities Leadership Programme, workshops were held to support further development in cities. Advocacy workshops were held with a wide cross-section of local stakeholders and initiated implementation of Healthy Cities plans.

Macao (China)’s Voluntary Contribution has strengthened the capacity of WHO to provide technical support around the Region in the fight against NCDs.
Key messages and way forward...

and the critical role of Macao (China) in scaling up Healthy Cities Leadership Programme for the prevention and control of NCDs in the Western Pacific Region

1. Learning by doing
2. Making a difference through local leaders
3. Leveraging the power of local governments
4. Linking national and local actions for sustaining healthy cities
5. Advocating for action within cities
6. Networking for scaling up healthy cities
Promotion of healthy lifestyle activity in Macao (China).
1. Introduction

Macao (China) emerges as a champion for noncommunicable disease prevention and control

Macao (China), not only boasts one of the most impressive health and development indices in the world, but it is now also taking a leading role for health in the Western Pacific Region.

Macao (China)’s economic growth has been underpinned by the rapid development of its gaming industry and rising levels of investment in tourism and property infrastructure. Though small in size, with a population of just over half-a-million in a densely packed land area of around 30 km², this island city is emerging as a major contributor to curbing the noncommunicable disease (NCD) epidemic in the World Health Organization (WHO) Western Pacific Region through opening its doors for city-to-city learning and enabling leaders in the Region to visit and learn from its models and good practices.

In 2004 and 2005, voluntary contributions to WHO from Macao (China) were used to support HIV/AIDS and environmental health projects in developing countries in the Region.

In recent years, Macao (China) has also been providing financial support for critical regional activities of WHO in the NCD and health promotion fields. This report chronicles some of the important processes and achievements that have taken place through these generous financial contributions. It clearly shows that Macao (China) has now positioned itself squarely as a leader, champion and donor that is addressing the leading causes of premature death, disability and chronic respiratory diseases and their risk factors in this Region.
2. Cities as powerful nodes for change

The WHO-Macao (China) Healthy Cities Leadership Programme

Based on the highly effective collaboration with the Government of Macao (China), WHO Western Pacific Region has established a Healthy Cities Leadership Programme focused on the themes of noncommunicable disease prevention and control, health promotion, healthy settings and public health leadership. In addition to its underwriting of the programme, Macao (China) brings considerable experience of developing healthy city approaches and boasts many examples of practices that demand to be shared.

The objective is to further strengthen Healthy Cities activities in the Region by providing skills to leaders through facilitating exchange of best practices among countries. The programme achieves this through discussion with technical staff in the Regional Office, observation visits and participation in scientific meetings.

The first four “batches” of city-to-city learning tours under the programme were organized in 2012 and 2013. In each city, delegates attended seminars and made site visits to key intervention settings such as schools, streets, markets and health centres. All four participant groups were strongly positive about their study tours. Not only was in-depth knowledge provided about Healthy Cities programmes by the tour, but the topics of discussion offered delegates the information necessary for setting priorities in their own cities. The tours were also a source of new ideas for the promotion of healthy cities. Each study tour is summarized as follows.
<table>
<thead>
<tr>
<th>TOUR</th>
<th>DATE</th>
<th>CITIES VISITED</th>
<th>PARTICIPATING CITIES</th>
<th>NUMBER OF PARTICIPANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>FIRST</td>
<td>7–17 May</td>
<td>Makati and Marikina (Philippines), Macao (China) and Hong Kong (China)</td>
<td>Phnom Penh (Cambodia), Vientiane (Lao People’s Democratic Republic) and Ulaanbaatar (Mongolia)</td>
<td>• 6 (2 from each city)</td>
</tr>
<tr>
<td>SECOND</td>
<td>5–14 November</td>
<td>Busan, Gimhae and Changwon (Republic of Korea), Macao (China) and Hong Kong (China)</td>
<td>Chongqing, Shaanxi Province, and Guangxi Autonomous Region in the People’s Republic of China</td>
<td>• 14 (12 from cities and 2 from MOH)</td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>THIRD</td>
<td>2–11 May</td>
<td>Gangdong-gu, Seoul and Wonju (Republic of Korea), Macao (China) and Hong Kong (China)</td>
<td>Hue, Hai Pong and Ho Chi Minh (Viet Nam)</td>
<td>• 7 (6 from cities and 1 from MOH)</td>
</tr>
<tr>
<td>FOURTH</td>
<td>11–19 November</td>
<td>Gangdong-gu, Seoul and Wonju (Republic of Korea), Macao (China) and Hong Kong (China)</td>
<td>Davao City (Philippines)</td>
<td>• 7 (4 from Davao City, 2 from CHD, and 1 from DOH)</td>
</tr>
</tbody>
</table>

CHD: Center for Health Development – DOH: Department of Health – MOH: Minister of Health
FIRST TOUR

for delegates from Cambodia, Lao People’s Democratic Republic and Mongolia

The first group to take part in the WHO-Macao (China) Healthy Cities Leadership Programme toured from 7 to 17 May 2012 and consisted of six delegates from three cities in the Region: Phnom Penh (Cambodia), Vientiane (Lao People’s Democratic Republic) and Ulaanbaatar (Mongolia).

The delegates visited the WHO Regional Office for the Western Pacific (WPRO) to launch the Healthy City leadership course with the Regional Director, Dr Shin Young-soo. Then they visited Makati and Marikina in the Philippines, Macao (China) and Hong Kong (China). The emphasis was on learning from seeing health promotion in action and absorbing the experiences of other cities that have implemented programmes embodying the values of Healthy Cities to create enabling environments for health.

The study tour was instrumental in improving the skills and competencies of city-level programme managers with regard to healthy settings and NCD prevention and control.
Rush hour traffic along Ayala Avenue, Makati City, Philippines.

Public park in Hong Kong (China).
Residents in Macao (China) engaging in group physical activity.
Delegates of the first WHO-Macao (China) Healthy Cities Leadership Programme study tour

Dr Amphoy Sihavong, Deputy Director, Vientiane Capital Health Department:

Thanks to the study tour, participants learned a lot both about the theory and practice of Healthy Cities, tobacco control, physical activity, food safety and alcohol consumption. After the study tour, we developed the proposal “Promoting 100 smoke-free secondary schools” which received the Best Proposal Award from WPRO. We are still implementing this and consider this programme a good approach for the future.

Dr Munkhdelger Mukhbaatar, Deputy Director, City Health Department, Ulaanbaatar City and Dr Yagaantsetseg Radnaabazar, Senior Officer, Governor’s Office, Ulaanbaatar City:

It was amazing to learn how children in Macao (China) are growing in a healthy school environment. Food served to children during lunch was of a high quality and hygienic standard and the calorie-based food menu provided to schoolchildren is an outstanding practice that we will definitely take back home to try and adapt and implement.
SECOND TOUR

for delegates from China

The second study tour was held from 5 to 14 November 2012 with 14 delegates from China, including four from the city of Chongqing, four from Shaanxi Province, four from Guangxi Autonomous Region, and two from the Ministry of Health.

On the itinerary were Macao (China), Hong Kong (China), and Busan, Gimhae and Changwon (Republic of Korea). Participants learned from the host countries’ experience of developing healthy public policies and supportive environments in the following areas: physical activity, nutrition, urban planning, tobacco control, environmental health, water and sanitation, healthy housing, environmentally sustainable and healthy urban transport, greening the city, road safety and food safety.

One recommendation to emerge from the study tour was that a joint training course should be developed as a follow-up activity. The National Patriotic Health Campaign Committee (NPHCC) is now in charge of developing the training course, which will focus on healthy urbanization. The course will include the six Western Area Health Initiative (WAHI) pilot cities of China: Nanning City and Liuzhou City, Guangxi; Yuzhong District and Shapingba District, Chongqing, and Xi’an City and Tongchuan City, Shaanxi.
CITIES VISITED: BUSAN • GIMHAE • CHANGWON • HONG KONG (CHINA) • MACAO (CHINA)

City skyline of Busan, Republic of Korea.
School children in Hong Kong (China).

Pedestrian path in downtown Macao (China).
Delegates of the second WHO-Macao (China) Healthy Cities Leadership Programme study tour

Mr Wang Gengxi, Tongchuan Patriotic Health Campaign Committee of Shaanxi:

This study tour broadens my mind on Healthy City work. We could build on the achievements of the existing Hygienic City initiative, to expand to the areas such as tobacco control, NCD prevention and control, road safety, which are so critical for the improvement of urban health in our Tongchuan city.
THIRD TOUR

for delegates from Viet Nam

The third round of the WHO-Macao (China) Healthy Cities Leadership Programme was held from 2 to 11 May 2013 and attended by seven participants from Viet Nam: two from Hue, two from Hai Phong, two from Ho Chi Minh City and one from the Health Environment Management Agency, Ministry of Health.

The study tour consisted of visits to Macao (China), Hong Kong (China), and Gangdong-gu, Seoul, and Wonju (Republic of Korea).

The participants would have benefited from more time to discuss the related issues during some of the sessions, and would also have liked to see more detail on how cities had changed as a result of projects and the challenges that they faced. However, all participants reported that each session had increased their knowledge about the Healthy Cities concept.
CITIES VISITED: GANGDONG, SEOUL • WONJU • HONG KONG (CHINA) • MACAO (CHINA)

Seoul, Republic of Korea.
Delegates of the third WHO-Macao (China) Healthy Cities Leadership Programme study tour

Dr Bui Khanh Toan, Chief of Cabinet Office, Health Environmental Management Agency, Ministry of Health, Viet Nam:

The programme gave us a chance to share experiences and learn from the Republic of Korea, Hong Kong (China) and Macao (China) in developing healthy public policies especially in tobacco control, prevention and control of noncommunicable diseases,
health promotion and public health leadership. We also learnt from host countries their experiences of building on existing city programmes, mobilizing community involvement and advocating political support. In Korea I was impressed by health promotion programmes such as healthy restaurants and road safety programmes at schools; in Hong Kong (China), by the tobacco control programme and health promoting schools, and in Macao (China) by its noncommunicable disease control and prevention programme with community involvement in disease management and tobacco control.
The fourth study tour, from 11 to 19 November 2013, involved seven delegates from Davao, Philippines (two from the Center for Health Development, four from Davao City Government and one from the Department of Health).

The study tour consisted of visits to Gangdong-gu and Wonju, Macao (China) and Hong Kong (China). In addition to learning about the host countries’ experience in developing healthy public policies and supportive environments, they learned how study tour cities engage the community and other sectors in their work to develop healthy public policies and healthy environments. They visited schools, workplaces, public spaces and transportation systems where policies and programmes that support health and well-being had been implemented.

The delegates acknowledged the strong political will of the Mayor of Wonju and were highly impressed by the Healthy Building concept in Macao (China) as well as Hong Kong (China)’s monitoring and evaluation framework. The priority areas discussed for Davao were healthy eating in schools and restaurants (along the lines of the Eat Smart School Accreditation Scheme in Hong Kong, China), building bike ways, health promotion and education of children, active ageing, hotlines for smoking cessation and building a public-private partnership framework.

There are plans to organize an Advocacy and Multisectoral Action Planning Workshop in 2014, followed by a Healthy City Leadership Course.
Delegates visiting an urban farm market in Gangdong-gu, Seoul.
Delegates with the mayor of Gangdong-gu, Seoul.

Delegates with the mayor of Wonju.

Delegates of the fourth WHO-Macao (China) Healthy Cities Leadership Programme study tour

Ms Maria Luisa Tarnate Bermudo, City Social Welfare and Development Officer of City Social Welfare and Development Office, Davao City, Philippines:

The programme enabled me to truly appreciate and understand the Healthy Cities good practices which we can replicate and scale up in present efforts to make Davao a healthy city.

Bicycles service centre in Gangdong-gu, Seoul for public use and rental.
3. Support for city plans

Following the WHO-Macao (China) Healthy Cities Leadership Programme

As a follow-up to the four study tours, certain participating cities were provided technical and financial support to implement a proposed plan, programme or policy. Experts and WHO staff visited these cities to expand the discussions and sustain advocacy for healthy cities.

Vientiane: advocacy workshop

Vientiane held a city-level advocacy workshop on 27 July 2012 to discuss ideas and draft a plan for establishing healthy environments and policies. The workshop was attended by almost sixty delegates including key officials from the various departments of Vientiane Capital City as well as its nine district vice governors.

The workshop focused on the broad concepts of Healthy Cities, the history of Healthy Cities in the Western Pacific Region, case studies, and multisectoral action for healthy environments and healthy policies as alternative entry points.

The Healthy City Steering Committee convened again in August to clarify the roles and responsibilities of its members and to look at future planned activities. WHO made a suggestion for the local government officials to organize similar advocacy workshops in their respective districts inviting participation of heads of villages, community and local associations. A district-level workshop held in October 2012 was supported with Macao (China) funds.
Smoke-free temple in Vientiane, Lao People’s Democratic Republic.
Healthy City Advocacy Workshop in Vientiane Capital, Lao People’s Democratic Republic.

Smoke-free Vientiane Capital.
Phnom Penh organized a Healthy Cities Advocacy and Multisectoral Planning Workshop from 20 to 21 December 2012. Local leaders were introduced to the Healthy Cities concept and raised priority issues from each of their khan (districts). The main objective of the workshop was to advocate for and create awareness of Healthy Cities and to identify ways of addressing NCDs through Healthy Settings in Phnom Penh. Approximately 170 representatives from local government, schools, NGOs and the Ministry of Health took part.

Identified priority actions included developing and strengthening personal skills and building awareness on NCD risk factors, and improving the urban environment to enable health promotion. Districts selected Health Promoting Schools as a priority programme and as a result of the workshop initiated a project to improve nutrition and food safety in schools in Phnom Penh.
Participants at the WHO Regional Healthy City Leadership Course, Brisbane, Australia.
4. Healthy Cities Leadership Courses

Healthy Cities Leadership Courses present practice-oriented and experiential approaches to urban health management and are designed to further advance and enhance leadership skills. The courses build on the skills obtained through the city-to-city learning tours of the WHO-Macao (China) Healthy Cities Leadership Programme and are guided by the document, Initiating and scaling up Healthy Cities in the Western Pacific Region: an introduction.

First course for delegates from Cambodia, Lao People’s Democratic Republic and Mongolia

To build on the skills of the city planning and health officers from Cambodia, Lao PDR and Mongolia who took part in the first batch of city-to-city learning tours, WHO held a Healthy Cities Leadership Course in collaboration with Deakin University, Australia prior to the Fifth Global Conference of the Alliance for Healthy Cities in Brisbane in October 2012. Participants reviewed their Healthy Cities programmes and identified approaches to build capacity for multisectoral action. Each city was then tasked with developing a plan to optimize multisectoral actions toward a sustainable Healthy Cities programme.
Workshop in action – Healthy City Leadership Course, Brisbane, Australia.
A Healthy Cities Leadership Course was hosted by the Shanghai Municipal Committee for Health Promotion, a WHO Collaborating Centre, from 13 to 14 August 2013. The course was attended by 17 participants from the six cities (three provinces) in WAHI. Priority areas across all WAHI provinces of Guangxi, Chongqing and Shaanxi include NCD prevention and control (tobacco control, healthy diet and physical activity, self-management of NCDs), as well as ageing and health (Chongqing) and transport (Guangxi). To bring about change on these issues, advocacy and action planning workshops will be held in each WAHI city with local participants.
Third course for delegates from Viet Nam

In collaboration with the Vietnam Institute of Health and Education (VIHEMA), WHO organized a workshop from 9 to 10 September 2013 in Hai Phong to develop a healthy city action plan. It was attended by Hue, Hai Phong, Ho Chi Minh City and Ha Long. All cities identified priority action areas.

Viet Nam has been working toward Healthy Cities and Hue and Hai Phong have already carried out a number of projects. Participants visited a market made healthier through the participation of vendors under one of the projects, Healthy Markets. It was proposed during the workshop that VIHEMA develop an operational manual to support current Healthy Cities and to promote the concept among other cities.
Fourth course for delegates from Mongolia

Organized by the Ministry of Health, a Healthy Cities Leadership Course was held from 17 to 18 September 2013 in Ulaanbaatar to support the city in developing a three-year action plan for each of its nine districts. The central government is currently scaling up its support to districts and cities through the National Healthy Cities Programme (NHCP). Guidelines have been developed, including a set of basic indicators to be achieved by cities by 2016.
The course was attended by 44 participants from all nine districts. At the end of the course, each district developed a three-year plan that focuses on their priority goals, which include waste management, air pollution, greening of the city and improved drinking water supply.
5. Support for development of the Western Pacific Regional Action Plan for Prevention and Control of NCDs 2014–2020

A consultation on the Draft Western Pacific Regional Action Plan for Prevention and Control of NCDs was held from 6 to 8 March 2013 at the WHO Regional Office for the Western Pacific in Manila, Philippines with significant financial support from Macao (China).

The consultation was attended by 29 senior officers of the government agencies responsible for NCD prevention and health systems strengthening in 19 Member States.

The participants reviewed progress on the current Western Pacific Regional Action Plan for Prevention and Control of NCDs. They also identified barriers and opportunities in its implementation as they discussed and finalized the draft of the next Western Pacific Regional Action Plan for Prevention and Control of NCDs (2014–2020). In addition to stretching the period of the plan from four to six years to match the WHO global plan, recommendations emerging both for WHO and countries were to work on economic arguments for health promotion and to enhance surveillance of NCDs.

The Western Pacific Regional Action Plan for Prevention and Control of NCDs was presented to and subsequently endorsed by the Member States during the 64th Session of the Regional Committee held from 21 to 25 October 2013.
6. Strengthening WHO technical support

The Voluntary Contribution from Macao (China) was also used to boost WHO technical support and covered the salary costs of a full-time international Professional staff member working on noncommunicable diseases (NCD) at P5 level in the Regional Office, a full-time international Professional staff member working on health promotion at P4 level in the Regional Office as well as the salary costs of a full-time National Professional Officer for NCDs in the Lao PDR.

Funds were used to enhance senior management leadership functions at the Regional Office through organization of a strategic planning retreat in 2012 and purchasing of tablet devices for use by members of the Cabinet.
7. Conclusion

The story of Macao (China) and its growing role in supporting the work on NCD prevention and control in the Western Pacific Region is clearly an inspiring example of how change can happen through innovative new approaches and ways of thinking. No doubt, we will be hearing more about this small island city making a big difference in the fight against the rise of NCDs in this Region.