

Editorial

The World Health Organization European Healthy Cities Network 30 years on



La Red Europea de Ciudades Saludables de la Organización Mundial de la Salud 30 años después

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On 12–13 February 2018, the World Health Organization (WHO) held a landmark event at the WHO Regional Office for Europe in UN City in Copenhagen, Denmark, in which Mayors and political leaders from across the WHO European Region and beyond gathered for the WHO European Healthy Cities Network Summit of Mayors. Forty three elected city mayors and 85 high-level political leaders were among 250 delegates meeting to discuss, consider and adopt the Copenhagen Consensus of Mayors on 'Healthier and Happier Cities for All'; a vision for the future of the WHO Healthy Cities Network, and cities in the WHO European Region.¹

This political vision is the outcome of an 18-month consultative process with Mayors, politicians, and experts from across the European Region, and will guide the next phase of the WHO European Healthy Cities Network. The new phase will commence in January 2019 and is fully aligned with the United Nations 2030 Agenda for Sustainable Development (UN 2030 Agenda),² ensuring the WHO Healthy Cities Network is the vehicle for WHO's implementation of the SDGs at the local level until 2030. The political vision, adopted in the form of the Copenhagen Consensus, was drafted by a Political Vision Group of Mayors, appointed in 2016 by the WHO Regional Director for Europe, Dr. Zsuzsanna Jakab.

It is bold, brave, and innovative, and will serve as a political manifesto for cities to use to improve the health and well-being of all the people who live, work, and engage with their cities and urban places.

As Dr. Jakab described in the opening the Summit of Mayors, the meeting was of historic significance for WHO. Not only did it mark the 30-year anniversary of the WHO European Healthy Cities Network, itself the oldest such city network in the world, but also in being the first time in its history that the WHO Regional Office for Europe had brought together such a large and prominent group of city mayors and elected political leaders to discuss health and well-being for all.

A strong delegation from Spain to the Summit included leading politicians from Madrid, L'Hospitalet de Llobregat and Sant Andreu de la Barca, along with strong support from Barcelona, who were unable to attend. There were also representatives from beyond the European Region. Cities from Cabo Verde, Congo, Cote D'Ivoire, Mongolia, Paraguay, and the United States of America were also

represented. Twice former Mayor of Cali in Colombia, Professor Rodrigo Guerrero Velasco was one of the key note speakers, speaking on homicide and epidemiology.

The WHO Healthy Cities Network was initiated in January 1986 when a small planning group, under the chairmanship of Professor Ilona Kickbusch, then of the WHO Regional Office for Europe, was convened in Copenhagen, Denmark to plan an intervention that would take the high-level thinking behind the 1978 Alma Ata Declaration,³ the subsequent WHO vision Health for All by the Year 2000⁴ and the 1986 Ottawa Charter,⁵ 'off the shelves and into the streets of Europe'.⁶

Focusing on the places where, within the near future, a majority of the world's population would 'live, love, work and play', the Project was initially envisaged as bringing together a small number of cities to collaborate on action strategies for promoting and protecting health at the city level and sharing experiences. Launched at its first conference in Lisbon, Portugal in April 1986, the Project soon created a remarkable momentum and was picked up across Europe and in other WHO global regions.

In Spain, the city of Barcelona was one of the initial cities involved, together with Madrid who joined slightly later on, but one of the most remarkable responses came from the Valencia Region where Healthy Cities, promoted by Concha Colomer and Carlos Álvarez and supported by Regional Health Chief Joaquin Colomer, soon extended to communities across the Valencia Region which included over 80% of the population.⁷

In 1988, Liverpool in the United Kingdom, one of the first project cities hosted the first National Network conference, and the same year the WHO European Healthy Cities Network was launched. Thirty years later the Network is still going from strength to strength, with over 1000 cities involved in Europe alone, together with many thousands more cities worldwide.⁷

On 1–4 October this year, at the International Healthy Cities Conference in Belfast, the current phase of work for the network will end, and 30 years will be celebrated, in anticipation of the commencement of the next phase of the network, which emphasizes political leadership for health and well-being at the city level, and coherence between city level, national level, and international level governance, in January 2019.

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Also, in October of this year, a 40th anniversary conference to celebrate the adoption of the 1978 Alma Ata Declaration will be held in Kazakhstan. The importance of the Alma Ata Declaration in the origins of WHO Healthy Cities will be acknowledged through a cities declaration in support of the Alma Ata 2.0 Declaration, and discussion about expanding the Network into the eastern European and central Asian areas of the WHO European Region will be furthered.

So where does the WHO Summit of Mayors fit in to this remarkable continuing success story? The Copenhagen Consensus of Mayors endorsed by acclamation in the Summit not only positioned political leadership from the town hall at the epicenter of twenty-first century public health, but also connected it explicitly to the UN 2030 Agenda. The 2030 Agenda consists of 17 Goals and 169 targets; all of which are relevant to policy and action at the local level, with one particular goal, Goal 11, specifically speaking of 'Sustainable Cities and Communities'.⁸

The message that came strongly from both the WHO Regional Director, and political leaders at the Summit of Mayors, was that the United Nations will not be able to achieve this without engaging cities. At the heart of the 2030 Agenda is a commitment to sustainability and equity through a transformative approach to safe, inclusive, sustainable and resilient societies. As Dr Jakab reiterated at the Summit, whilst cities only occupy 2% of the land area of the planet, they account for 70% of the global economy, 60% of global energy consumption, 70% of greenhouse gas emissions and 70% of global waste. Cities may be a huge part of the problem, but without them we will be unable to find a solution. The Copenhagen Consensus of Mayors becomes that commitment from cities to be part of the solution. In the words of Dr Jakab, "we at WHO need to be working with you, the cities".

The Copenhagen Consensus focuses on 6 P's as the themes for action: People, Place, Participation, Prosperity, Peace, and Planet. Cities are in a prime position, the closest actors to the people, to understand the implications of the global challenges to health, well-being, and sustainability for the way we live our daily lives. Acting together across countries, world regions and across the whole planet, they can make a real difference to promote improved health and well-being for all. Elected city and metropolitan mayors and political leaders have a crucial role in delivering the action that we need, through the exercise of soft, hard, and convening power, with an outward focus and a voice that is accountable to local citizens. Acting together, they can push the boundaries, build consensus,

and work effectively to achieve equity and sustainability; and, to echo the Copenhagen Consensus, a healthier and happier future for all.

The adoption of the Copenhagen Consensus is indeed a landmark moment for the WHO. But now the work really needs to begin. We need to translate the Consensus into action, starting with the International Conference in October, and the launch of the Network's next phase next January. The focus on prosperity and peace represent new thinking for Healthy Cities and there is a commitment to taking action on better governance of commercial determinants of health, well-being and disease. Dr Jakab has set the WHO Healthy Cities Network the challenge of getting 20,000 mayors to sign, adopt and start the implementation of the Consensus by 2020. WHO is committed to support the town hall. To succeed, we all need to work together. To quote the Copenhagen Consensus of Mayors, "now is the time to act. We cannot afford to fail."

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All authors contributed equally to the article.

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