

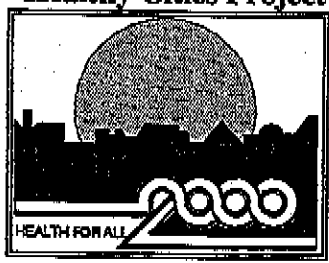
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***Guidelines for
Multi-City Action Plans***

***WHO Healthy Cities Project
Phase II 1993 – 1997***

Healthy Cities Project



**World Health Organization
Regional Office for Europe
Copenhagen**



TARGET 14

SETTINGS FOR HEALTH PROMOTION

By the year 2000, all settings of social life and activity, such as the city, school, workplace, neighbourhood and home, should provide greater opportunities for promoting health.

ABSTRACT

This document sets out the guidelines for Multi-City Action Plans within the second phase of the Healthy Cities Project, 1993-1997.

Keywords

URBAN HEALTH
HEALTH PLANNING
HEALTH PROMOTION
HFA STRATEGY COORDINATION
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Guidelines for Multi-City Action Plans

Definition

A Multi-City Action Plan or MCAP is a mechanism in which a group of cities with common concerns works together with WHO within the framework of the healthy cities project, to develop action to implement parts of the Health For All strategy in Europe.

1. Terms of reference

The objectives of MCAPs are:

- joint action (development and implementation of innovative programmes, policies, charters and declarations;
- to develop knowhow for other cities;
- to involve other partners in cities, beyond the healthy cities project offices.

Every MCAP should:

- 1.1 Agree specific strategic objectives together with WHO.
- 1.2 Agree a workplan together with WHO.
- 1.3 Establish forums for joint working and for the exchange of information (this includes business meetings, technical seminars and workshops, but other methods should also be explored and agreed).
- 1.4 Agree together with WHO and participating cities the arrangements for a city or institution to undertake the administrative responsibilities of the multi-city action plan.
- 1.5 Stimulate action within each participating city to contribute to the MCAP workplan.
- 1.6 Document the action taken by cities and the MCAP as a whole.
- 1.7 Disseminate the results of the MCAP widely in a form which will be useful to other cities.
- 1.8 Take other forms of joint action in support of its objectives such as joint resolutions on policies, common programmes, representations to appropriate international organizations.
- 1.9 Seek resources to enable the MCAP to fulfil its objectives.

2. Participation

- 2.1 Participation in an MCAP is open to any city in the WHO project network and to members of national networks of healthy cities and, exceptionally, to other cities. Participation is subject to agreement by WHO, in consultation with the coordinating city, taking into account the size of MCAPs and their needs.
- 2.2 Participation is also open to other institutions and organizations at the invitation of WHO in consultation with the participating cities.
- 2.3 Participating cities are expected to carry out action within their city which contributes to the MCAP. Participating cities are also expected to work jointly with other cities in the MCAP on the basis of an agreed workplan.
- 2.4 Each participating city must be willing to review the situation in the city with regard to the topic of the MCAP and to share this information with other cities.
- 2.5 Each participating city must be willing in principle to host a meeting of the MCAP.
- 2.6 Procedure for joining MCAPs.

2.6.1 WHO project cities

An application to join the MCAP should be made on behalf of the city by the chairperson of the steering committee responsible for the project. It should be made in the form of a letter to the MCAP coordinator or, where there is no coordinator, to the healthy cities project office. The application should endorse the strategic objectives of the MCAP and agree in principle to the city's participation in the workplan. It should name a city representative. The MCAP coordinator should pass the application to WHO for decision.

2.6.2 National network cities

- (a) National network cities applying to join an MCAP should have a healthy city project in place with the political and organizational support to take part in the MCAP.
- (b) Each participating city should have a mechanism (through a steering committee or other means) by which its representative can seek the necessary support for the requirements and the work of the MCAP through the political and administrative structures of the city and/or other relevant authorities.
- (c) An application from a national network city to join the MCAP should include the following: a description of the healthy city project in the city; a letter from a city politician (or other authorized person) who will be responsible for the city's participation, where possible written support should also be given by the head(s) of the sector(s) most likely to be involved in carrying out MCAP work. The letters should endorse the strategic objectives of the MCAP and agree in principle to the city's participation in the workplan.

- (d) The application should be sent to the coordinator for the MCAP or, where there is no coordinator, to the WHO Healthy Cities project. The coordinator is responsible for liaising with the cities involved so that they provide the required information and for passing on the application to WHO for decision.

2.6.3 Other cities and institutions

Institutions and other cities wishing to join an MCAP should liaise directly with WHO.

- 2.7 Interested cities and institutions may attend MCAPs as observers with the agreement of participants.

3. **Coordination**

- 3.1 Each MCAP must have a coordinating city or institution agreed by the other cities and WHO.

- 3.2 The coordinating city must give an undertaking to carry out the role outlined in 3.3. The coordinating city should also ensure that it has sufficient administrative capacity to carry out these tasks.

- 3.3 The coordinating city should:

- (a) undertake all the administrative responsibilities for the MCAP including handling correspondence;
- (b) link to the WHO healthy cities project office and to the WHO unit with special responsibility for technical input into the MCAP;
- (c) ensure the preparation of papers and proposals for MCAP work;
- (d) keep participating cities and WHO regularly informed about the MCAP and stimulate and maintain a flow of communication between cities;
- (e) maintain an accurate address list of all participants and contact persons for the MCAP;
- (f) prepare proposals for a workplan for the MCAP in conjunction with the participating cities and WHO;
- (g) assist the MCAP to carry out its workplan;
- (h) be a focal point for queries about the MCAP from enquiries;
- (i) compile a progress report on the MCAP for each business meeting to be made available to all MCAP groups and to WHO;

- (j) ensure that arrangements for MCAP meetings are satisfactory;
- (k) advocate and inspire action among participants and the MCAP;
- (l) take a leading role in fundraising for the MCAP;
- (m) organize business meetings at which frameworks for action are developed and followed up;
- (n) help to organize technical meetings open to both participating and other cities as well, at which models of good practice, expertise and experience can be shared.

4. The MCAP representative from a city

The MCAP representative from a city is the focal point for the MCAP in the city and is also responsible for initiating action in the city in support of the MCAP.

Responsibilities include:

- (a) linking the work of the MCAP to the relevant sectors in the city;
- (b) advocating (together with the healthy cities project) for action in the city relevant to the MCAP;
- (c) ensuring that the city fulfils its commitments to the MCAP, where appropriate by seeking the political and other forms of support necessary to do this;
- (d) supporting the coordinator of the MCAP, providing information as required and facilitating communication between the city and the coordinator;
- (e) briefing the local healthy cities project after each meeting and keeping the coordinator of the project informed;
- (f) being willing to act as a focal point for organizing an MCAP meeting in the city.

5. Role of local Healthy Cities projects in MCAP cities

Each local Healthy Cities project office should:

- (a) mediate with the city and with relevant sectors in order to encourage the city to carry out its MCAP responsibilities to the full;
- (b) establish clear and open lines of communication with each MCAP representative in the city;
- (c) assist in securing political commitment from the city for MCAP work;

- (d) where appropriate assist in carrying out MCAP action;
- (e) inform the national network coordinator of the progress of each MCAP in which it participates;
- (f) be actively involved in securing funding for each MCAP in which it participates.

6. The WHO focal point

The role of the WHO focal point is to provide technical input and to assist the MCAP to maximize its impact on public health in Europe.

Responsibilities include:

- (a) informing the MCAP coordinating city about relevant developments within WHO and other international bodies or agencies;
- (b) working with cities to develop the objectives and workplan of the MCAP;
- (c) providing ongoing support and encouragement to the MCAP to assist it to implement its objectives;
- (d) working with the coordinator of the MCAP to organize MCAP activities;
- (e) agreeing a joint approach to the MCAP with the WHO healthy cities project;
- (f) assisting in the dissemination of the products of the MCAP;
- (g) evaluation.

7. WHO Healthy Cities project office

The role of the WHO healthy cities project office is to:

- (a) establish, maintain and develop the MCAP mechanism;
- (b) provide strategic coordination;
- (c) exchange information between MCAPs;
- (d) provide relevant support to MCAP groups in developing strategies;
- (e) negotiate and establish the involvement of WHO technical units;
- (f) explore links between MCAPs and European organizations or programmes outside the Healthy Cities network;

- (g) negotiate funding for the work of the MCAPs from relevant programmes of the Regional Office;
- (h) provide technical support (such as the preparation of agendas, and other organizational help) for meetings of MCAP coordinators and focal points;
- (i) be responsible for the terms of reference of MCAPs and their duration;
- (j) where possible link new MCAP coordinators with an existing coordinator willing to provide support.

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