



Croatian network “Healthy Cities”

## ***PROGRAMME DECLARATION***

ADOPTED AT THE BUSINESS MEETING OF CHCN  
November 2003

### ***Mission of the Croatian network:***

to support the member cities (municipalities and counties) of the Network in their efforts to establish and conduct respectable projects of Healthy city (Healthy county), projects that would be able to influence and help in the promotion of the social policy of health both locally and nationally. Our aim is to expand the Network and include each community/city/county in Croatia in the project, and act in a united manner in the recognition of values and significance of health and act until health is not recognised as a potential for the development of the country as a whole.

The project and movement “Healthy city” is a development project – established for the connection of all the society’s development systems and activating of the inhabitants themselves in the creation of “healthy” settlements - places in which life quality worthy of man will be ensured to all the inhabitants. Therefore, exactly this is the project and movement that can contribute to the quality of urban reconstruction, post-war and post-transitional development of Croatia in a crucial manner.

***Fundamental principles of operation of the Croatian network*** are contained in the documents:

- **Universal Declaration on Human Rights** (Human Rights, Compilation of International Instruments; United Nations, New York, 1988.);
- **Health for All for 21<sup>st</sup> Century** (Health for All for 21<sup>st</sup> Century; World Health Organization, Regional Office for Europe, Copenhagen, 1998.);
- **19 objectives of the Social Charter** (European Social Charter, European Parliament, Strasbourg, 1989.)
- **Düsseldorf Declaration on Human Environment** (Charter on Health and Environment, WHO, Regional Office for Europe, Copenhagen, 1990.)
- **Aalborg Charter** on sustainable development (European Sustainable Cities and Towns Campaign, 1994., Aalborg, Denmark)
- **Programme Declaration of the Croatian Healthy Cities Network** (revised wording 2003)
- **Partnership for Health**

***Key activities for the next four-year period*** that shall bring us to approaching the mission are:

- a) a better **connection of structures horizontally** – strengthening of cooperation of the city/county administration with institutes for public health, other institutions and non-government sector, stimulation of a more active participation of citizens,
- b) a better **connection of structures vertically** – improvement in cooperation with the relating ministries, Croatian public health institute, other institutions and representatives of the non-government sector at the national level,
- c) the **promotion of practices of public health at local and national level** (consulting for health – development of City and County health overviews, usage of tried and tested models of good practices, fast exchange of information and experiences, systematic monitoring and evaluation of project successfulness), development of a national strategy of health promotion,
- d) the **strengthening of importance and role of local communities in the creation of a national health policy,**
- e) **solving of problems that represent the heaviest loads to local communities,** by solving of which we can we can mostly promote the life quality in them as for example family health, unemployment, economy development, environment, town planning and housing, children and youth (leisure time, risk behaviour prevention, development of volunteer work), democratisation of society, mental health, adequate care for senior citizens, promotion of work quality for individuals with special needs, violence (community safety) and others.

**Criteria for membership in the Croatian Healthy Cities Network are:**

***For member cities and counties of the network***

1. **existence of political support for the project on the city/county level** means adherence to principles and objectives of the "Health for All in the 21<sup>st</sup> century", and other fundamental documents of the network; and political support to development and implementation of the project "Healthy city"/"Healthy county" in one's environment

TO BE PROVED:

I Phase:

- Declaration on health adopted on the level of city council/county assembly
- Decision on initiation of the project and entering into membership of the Croatian healthy cities network adopted on the level of city government and/or council, or county government and/or assembly

II Phase:

- adoption of strategic documents: City/County overview and City/County health plan on the level of city government and/or council, or county government and/or assembly

### III Phase:

- Mayor/County mayor submits to the council/assembly (but also wider public) an annual report on the condition of health
- adoption of the revision of strategic documents (if necessary)

**2. existence of infrastructure for conducting of project** means ensuring the necessary organisational and financial resources for the realisation of the policy "Healthy city "/"Healthy county"

#### TO BE PROVED:

##### I Phase:

- appointment of a city/county project coordinator
- ensuring financial funds for project start-up

##### II Phase:

- appointment of an inter-sector Healthy city/Healthy county coordination committee: a person politically responsible for the project and cooperating expert institutions, and administrative support to the project (of the department/office in the city/county administration responsible for project enforcement)
- passage of activity programme for the enforcement of the project and allocation of funds for project realisation

##### III Phase:

- special item "Healthy city"/"Healthy county" in the budget that shall cover all the necessary funds for project function

### **3. achieved results and outcomes**

#### TO BE PROVED:

##### I Phase:

- project activity in own city/county environment
- obligation of inter-sector approach and work on the project (within the framework of the project of networking of various sectors, representatives of city/county administration and policy with the profession and citizens)
- annual report to the national network on project operation in the passed year

##### II Phase:

- existence of a City/County health overview (participative estimation of the community's health needs) and City/County plan for health (priorities and strategy of health promotion)
- project activity in own city/county environment – ensure permanence of operation, project continuity, use all the resources at disposal in a rational and efficient manner, perform the programme practically,
- obligation of informing one's own environment on the work of others (enable information transfer within the project and from the Network towards own environment)

### III Phase:

- evaluate successfulness of operation (success and failure analysis, operation quality assessment) within own project – if necessary, re-define priorities and strategies
- ensure publicity of operation: present results to the city council/ county assembly once yearly, be open to media and citizens
- open the project for active participation of citizens– through the "Health assembly"

## **4. networking**

### TO BE PROVED:

#### I Phase:

- by entering the Croatian network "Healthy cities " particular cities/counties take on the obligation to adhere to the agreed commitments and participate financially in the work of the Network and Support Centre (annual membership fee of 5000 Kuna is to be paid to the CHCN account)
- participation in business meetings and other yearly activities (Health fair, Motovun summer health promotion school) of the national network

#### II Phase:

- active participation in experience exchange within national and regional network, i.e. active participation in the network's operation through the exchange of ideas, information, experts, regular reporting on work,

#### III Phase:

- thematic group operation coordination at CHCN level
- conducted success and failure analysis, and problems relating to other network members
- release of a good practice model and other from own environment
- active participation in experience exchange within the European network

## **Membership in the network – levels of inclusion**

**Cities and counties observers** – those only acceding to network and not meeting even the minimum set of criteria

**Healthy cities/Healthy counties – beginners - I phase** – for network membership it is sufficient that they meet basic membership criteria and make a commitment to achieving improvement in the next 4 years and meet the criteria for entrance to II phase

### **Healthy cities / Healthy counties**

**II phase** – cities and counties meeting the criteria of CHCN for II phase

**III phase** – cities meeting the so-called optimum set of criteria of the CHCN (and the EU WHO)

## ***Long-term benefits from network membership***

### ***Organisation and function of the network:***

- Membership consists of cities/counties who have met the basic criteria for membership in the Croatian healthy cities network
- According to the statute of the Network, accepted in 1992 (revised in 1997), the Assembly consists of all the members of the Network, while executive activities between the two sessions of the Assembly are performed by the Executive committee (Presidency of the network)
- The network's function is gathering of cities/municipalities/counties and their connection to the Network for better mutual cooperation, easier exchange of experience, knowledge, ideas and activities, and mutual support and practical help
- Through the Network, Croatian cities/counties, members of the Network, can cooperate and connect with relating ministries, institutions and representatives of the non-government sector at the national level, other project cities in Europe, other national networks (NETWORK – European network of national networks of healthy cities) and the European office of the World health organisation
- Cities/counties within the network gather thematically around particular themes that they recognise as significant in their own environment (e.g. youth and children's health, mental health, environmental health, life quality of individuals with special needs, senior citizens, preventive medicine and health education, women's health, nutrition etc.) and exchange their experience nationally and internationally (Multi-City Action Groups).

***The support centre of the Croatian Healthy Cities Network located at the «Andrija Štampar» school of public health, of the University of Zagreb Medical School, is the residence of the Association*** coordinating enforcement of the agreed programme activities. The Centre's function is to:

- advocate interests of the Network's members towards other networks and cities/counties and relating ministries, institutions and representatives of the non-government sector at national and international level
- connect members mutually and coordinate their common appearance at national and international gatherings of "Healthy cities» (like e.g. Conference of the European Network of Healthy Cities, Congress of prevention)
- stimulate activities of the network members and act on movement expansion
- conduct education for work on the project "Healthy city» (Course: "Health in the Community" in February every year in Zagreb, Motovun Health Promotion Summer School 1 – 15 July every year)

- assist in the exchange of experiences and interactive learning (through the Health fair, Business meeting of the Croatian Healthy Cities Network, organisation of visits to cities where good practice models have been developed etc.)
- enable obtaining of expert help in initiating and development of projects, project conduction monitoring, evaluation and analysis of achieved results
- act as mediator in the search for expert services
- provide help in the organisation of working meetings, thematic and educational gatherings, seminars, workshops, provide technical help in the work of thematic groups
- organize translation of key documents and literature
- establish a data base, i.e. functions as a centre for collection of expert information (creation of a "data bank» - literature, text books, good practice models, project work technology etc.),
- give insight to the wider public regarding work achievements of the network by means of print and electronic publications, video cassettes and thematic CDs

## ***Direct benefits from network membership***

### **Cities / Counties members**

- receive information on yearly events within the national network of healthy cities and the European network of healthy cities of the World Health Organisation
- receive an annual report regarding the network's work
- have the opportunity to participate in all network educational gatherings, free of participation fees (February – Course Health in the community, July – Thematic gatherings within the Motovun Health Promotion Summer School, September – business meeting of the network)
- have the opportunity to participate, with minimum participation fee, in the Health fair (April) and Courses of the Motovun Health Promotion Summer School
- participating in the network Assembly's work influence the creation of the network's strategy, have the opportunity to be elected into the network Presidency and working bodies of the Assembly
- receive free of charge space on CHCN web pages for the presentation of their healthy city/healthy county project and activities
- receive free of charge a minimum of 2 copies of all the printed materials of the network produced in the current year (bulletins, Motovun reports, Reports, posters, leaflets, books) and video materials

- for a minimal fee, receive expert help in the realisation of the project (development of the City health overview and City health plan, project realisation, supervision of the conducting of the projects, and evaluation and analysis of the results achieved)

**Observers**

- receive information on annual activities within the network
- receive annual report on the network's operation
- have the opportunity to participate in the network's events for a small participation fee
- receive guidelines for project start-up and development

CRITERIA	PROVES		
	I phase	II phase	III phase
<p><b>existence of political support for the project on city/county level</b> means adherence to principles and objectives of the strategy "Health for All for in the 21<sup>st</sup> Century", and other fundamental network documents; and political support for development and implementation of the project "Healthy city" / "Healthy county" in one's own environment</p>	<p><b>Declaration on health</b> adopted at the level of city council/county assembly</p>	<p><b>adoption of strategic documents:</b> City/County overview and City/County plan for health on the level of city /county government and/or council /assembly</p>	<p>Mayor/County mayor submits to the council/assembly (but also to broad public) <b>annual report on health situation</b></p>
	<p><b>Decision on project start-up and membership into the Croatian healthy cities network</b> adopted at the level of city/county government and/or council/assembly</p>		<p>adoption of <b>revision of strategic documents</b> (if necessary)</p>
<p><b>existence of infrastructure for project conducting</b> means ensuring necessary organisational and financial resources for realisation of "Healthy city/Healthy county" policy</p>	<p>appointment of the city/county project <b>coordinator</b></p>	<p><b>appointment of inter-sector coordination committee of Healthy city /county:</b> persons politically responsible for the project and cooperating expert institutions, and administrative support to the project (department/office in the city/county administration responsible for enforcement of the project</p>	<p><b>special item «Healthy city »Healthy county”</b> in the budget that would cover all the funds necessary for project operation</p>
	<p><b>ensuring of funds</b> for the project start-up</p>	<p>passage of <b>activities programme</b> for project enforcement and allocation of funds for project realisation</p>	
<p><b>achieved results and outcomes</b></p>	<p><b>activity</b> of the project in own city/county environment</p>	<p>existence of <b>City/County health overview</b> (participative estimation of the community's health needs) and <b>City/County plan for health</b> (priorities and strategies of health promotion)</p>	<p><b>evaluate</b> successfulness of work (successfulness and failure analysis, evaluation of work quality) within own project if necessary, redefine priorities and strategies</p>
	<p>obligation of <b>inter-sector approach</b> and work on the project (networking of various sectors, representatives of city/county administration and policy with professionals and citizens)</p>	<p>Ensure permanency of work, project <b>continuity</b>, efficient and rational usage of all the available resources, perform programme in practice,</p>	<p>ensure <b>publicity of work:</b> present the work results to city council/county assembly once a year, be open to media and citizens</p>

	<b>annual report to national network</b> on project activities in the past year	obligation of <b>informing</b> one's own environment on work of others (enable information transfer <b>within the project</b> and <b>from the Network</b> towards own environment)	open project for <b>active participation of citizens</b> – through "Health assembly"
<b>networking</b>	adherence to agreed commitments with the CHCN and payment of yearly <b>membership fee</b>	<b>active participation in experience exchange within national and regional network</b> , through exchange of ideas, information, experts, regular reporting on work	<b>work coordination of thematic group</b> on CHCN level conducted failure and success analysis ,and problems relating to other network members
	<b>participation in business meetings and other annual activities</b> (Health fair, Motovun health promotion summer school) of national network		release of good practice models et. of one's own environment active participation in experience exchange within European network