Intersectoral Action in Abha City, Saudi Arabia – A Healthy City Tackling NCDs (Noncommunicable Diseases)

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INTRODUCTION

• A case study on the experience of Abha City in combating NCDs through intersectoral action under the Healthy Cities Programme (HCP) between 2007-2011. The study was conducted by the Ministry of Health, Saudi Arabia.

• Intersectoral Action for Health (ISA) means working together across sectors to improve health and influence its determinants. One general ISA strategy is to integrate a systematic consideration of health concerns into other sectors’ policy processes (e.g. “Health in All Policies”). In an issue-centred ISA strategy the goal is to integrate a specific health concern into other relevant sectors’ policies.1

• NCDs and ISA: 63% of global deaths are due to NCDs.2 The causes of NCDs (risk factors: tobacco use, harmful use of alcohol, unhealthy diet and physical inactivity) are profoundly influenced by factors outside the realm of the health sector. Thus effective responses require the support and engagement of other sectors.

REFERENCES:

1. World Health Organization Centre for Health Development, Kobe, Japan 2. Ministry of Health, Kingdom of Saudi Arabia

METHODS:

The study was conducted in 2011 and is based on interviews with key stakeholders, a stakeholder questionnaire and a meeting, and review and analysis of national and local government records, and the WHO Community Based Initiative website.

WHO KOBE CENTRE (WKC) ISA PROJECT: In order to identify evidence/mechanisms to promote ISA, WKC has initiated a project that has included organizing expert consultations and conducting case studies on experiences of cities taking this approach. This has lead to development of recommendations e.g. a guidance booklet Intersectoral Action on Health (including 10 steps on how to effectively implement ISA). The EXPERIENCE OF ABHA CITY IS one of four case studies1 conducted on local government level ISA. It is an example of a wider intersectoral approach in which the Healthy City –structure was used to create ISA responses to the rising NCD problem.

BACKGROUND

• Abha City is located in the Southern Region of Asir in Saudi Arabia. Population is 203,678 (2011).

• NCDs are a major source of mortality and morbidity in Saudi Arabia, and their severity and duration of impact are likely to have large economic implications. In Abha City the prevalence of NCDs or NCD risk factors is also alarming e.g. overweight and obesity rate is 30.75%, smoking rate 11% and physical inactivity rate 67.7%.

• Abha joined the Healthy City Programme (HCP) in 2002, and after an approval by the Prince of Abha, the Governor and the Ministry of Health, an official agreement was reached to use an ISA approach within the HCP structure to tackle the problem of NCDs. An intersectoral HCP main committee was formed, representing several different sectors, and several ISA programmes have since been implemented.

EXAMPLES OF INTERSECTORAL PROJECTS INITIATED UNDER THE HCP:

HCP has successfully implemented intersectoral programmes on healthy lifestyle, obesity control, tobacco consumption, road safety, breast cancer and osteoporosis. Examples of two successful programmes:

• “Stop smoking - programme” to reduce smoking in schools and the community. An HCP initiative in collaboration with the Ministry of Islamic, Endowments and Guidance Affairs, Ministry of Health, Ministry of Education and Ministry of the Interior. The project got funding from the local government and received support from the community, including the local Imam, and led to banning of sale of tobacco products close to schools and the creation of no-smoking zones in schools, as well as in public and work places. Teachers were also trained on how to deliver health education messages.

• “Physical activity promotion”. A walking track was created and promoted in collaboration between the Directorates of Health, Agriculture, Water and Electricity and the Governorate. The walking track was made more attractive, safe and secure by adding green areas, street lights, drinking water supplies, and park benches. The Prince of Abha inaugurated the track and participated in a walking event with 1700 community members. Media also covered the walk. The number of people using the track has been continuously growing.

RESULTS AND LESSONS LEARNT

• The role of the Healthy City Programme (HCP) in facilitating collaboration between different sectors has been a key for the success of health promotion activities in Abha. Particularly the multisectoral composition of the HCP Main Committee and its Sub-committees has facilitated ISA.

• Given its multisectoral structure, the HCP can offer a good framework for ISA in many cities.

• The experience of Abha City is a good example of local government level ISA.

• Support from higher authorities/political support (e.g. Prince of Abha in the physical activity project) for ISA was considered a key success factor.

• Intersectoral NCD programmes benefit from community participation (e.g. Imam and religious community in the Stop-smoking programme) and also collaboration with the private sector (e.g. how food and drink industry can support existing programmes). The latter has proved challenging in Abha - rules for engagement should be set.

• Intersectoral NCD programmes should be sustained over extended periods of time to have a substantial impact on health. No evaluations on the long-term health impact of Abha’s intersectoral programmes have been conducted to date.

• Monitoring and evaluation of the intersectoral NCD programmes, for instance through support of research institutions, was recommended.

REFERENCES:

1. World Health Organization [2011]. Intersectoral Action on Health: A path for policy-makers to implement effective and sustainable action on health


4. Other case studies are: Liverpool (UK), Vardo (Denmark) and London/New York (US) ISA comparative study

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