WORLD HEALTH DAY: A GLOBAL CHALLENGE FOR HEALTH AWARENESS

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ABSTRACT

The World Health Day is a global health awareness day celebrated every year on 7th April, under the sponsorship of the World Health Organization (WHO). In 1948, the WHO held the First World Health Assembly. The Assembly decided to celebrate 7th April of each year, with effect from 1950, as the World Health Day. The World Health Day is held to mark WHO's founding, and is seen as an opportunity by the organization to draw worldwide attention to a subject of major importance to global health each year. The WHO organizes international, regional and local events on the Day related to a particular theme. Resources provided continue beyond 7th April, that is, the designated day for celebrating the World Health Day.

KEYWORDS: WHO, Food safety, Vector-borne diseases, Healthy heart beat, Good health, Anti-microbial resistance, Urbanization and health, Hospitals for safe in emergencies, Climate change, International health security, Team work, Child count, Road safety, Healthy environments for children, Move for health, Mental Health, Blood donation, Anti ageing, Motherhood, Infectious diseases, Green cities, Global Polio Eradication.
INTRODUCTION

World Health Day is acknowledged by various governments and non-governmental organizations with interests in public health issues, who also organize activities and highlight their support in media reports, such as through press releases issued in recent years. World Health Day is one of eight official global public health campaigns marked by WHO, along with World Tuberculosis Day, World Immunization Week, World Malaria Day, World No Tobacco Day, World Blood Donor Day, World Hepatitis Day, and World AIDS Day.

World Health Day is celebrated each year on 7th April globally. The day marks the founding of World health Organization (WHO) and aims to draw attention to important health issues facing the world each year. WHO, or World health Organization, is a working body under the UN which aims to address issues and emergencies pertaining to health on a global scale. The body was founded on 7th April 1948 and is headquartered in Geneva. WHO is the successor of the health Organization which came under the League of the United Nations. Ever since the creation of the organization, it has played a major role in addressing serious health issues such as polio, smallpox, chickenpox etc. which were earlier seen in epidemic proportions in several developing countries. Apart from global health concerns, the organization is also responsible for producing the World Health report, which gives an account of overall health of people in UN member nations. The decision to have a day dedicated to World health was taken at the first conference of WHO in 1948 in Geneva. It was decided that the first World Health Day would be celebrated in 1950 every year in order to raise awareness among people pertaining to health issues and concerns. Ever since, WHO has come with various themes for the day which have also become its purpose for the rest of the year. One of its most effective World Health day themes has been Global Polio Eradication which it adopted in 1995. Ever
since, the awareness level of people towards polio has risen considerably and most parts of
the world have been freed from the dreaded disease. Other important themes adopted by
WHO for the day have been Safe Motherhood in 1998; Emerging Infectious Diseases in
1997; Move for Health in 2002; International Health Security in 2007 etc.

Since the World Health Day is concerned with global health issues, the focus of the day is
just that. Apart from having a theme for the day, several programs are arranged by WHO and
related organizations in schools, colleges as well as other places. Different organizations,
government as well as non-government, help in raising awareness among people towards
health issues on the day by organizing awareness drives. Different governments too come out
with their pledges and supports on health issues concerning the world. The focus of the
World Health Day in 2012 was increasing life expectancy. According to WHO data, the
world is ageing and thus, ways need to be devised in order to increase the global life
expectancy. Thus, the theme of the day in 2012 was "Good health adds lives to years."
Through this theme, the World Health Organization aims to promote healthier living habits
among people in order to help them live longer. Apart from life expectancy issues, there has
been an increased focus on issues particularly concerning the youth, such as AIDS and
HIV.\(^1\)

**World Health Day 2015: Food safety**

![Figure-2: Theme 2015](image)

The WHO is promoting improvement of food safety as part of the 2015 World Health Day
campaign. Unsafe food is food containing harmful bacteria, viruses, parasites or chemical
substances is responsible for more than 200 diseases and is linked to the deaths of some 2
million people annually, mostly children. Changes in food production, distribution and
consumption; changes to the environment; new and emerging pathogens; and antimicrobial resistance all pose challenges to food safety systems. Food safety is a scientific discipline describing handling, preparation and storage of food in ways that prevent food borne illness. This includes a number of routines that should be followed to avoid potentially severe health hazards. The tracks within this line of thought are safety between industry and the market and then between the market and the consumer. In considering industry to market practices, food safety considerations include the origins of food including the practices relating to food labeling, food hygiene, food additives and pesticide residues, as well as policies on biotechnology and food and guidelines for the management of governmental import and export inspection and certification systems for foods. In considering market to consumer practices, the usual thought is that food ought to be safe in the market and the concern is safe delivery and preparation of the food for the consumer.

Food can transmit disease from person to person as well as serve as a growth medium for bacteria that can cause food poisoning. In developed countries there are intricate standards for food preparation, whereas in lesser developed countries the main issue is simply the availability of adequate safe water, which is usually a critical item. In theory, food poisoning is 100% preventable. The five key principles of food hygiene, according to WHO, are:

(1) Prevent contaminating food with pathogens spreading from people, pets and pests
(2) Separate raw and cooked foods to prevent contaminating the cooked foods
(3) Cook foods for the appropriate length of time and at the appropriate temperature to kill pathogens
(4) Store food at the proper temperature
(5) Do use safe water and raw materials.

2014: Small bite, big threat

Figure 3: Theme 2014
World Health Day 2014 put the spotlight on some of the most commonly known vectors – such as mosquitoes, sand-flies, bugs, ticks and snails – responsible for transmitting a wide range of parasites and pathogens that can cause many different illnesses. Mosquitoes, for example, transmit malaria – the most deadly vector-borne disease, causing an estimated 660000 deaths annually worldwide – as well as dengue fever, lymphatic filariasis, chikungunya, Japanese encephalitis and yellow fever. More than half of the world’s population is at risk of these diseases.

The goal of the World Health Day 2014 campaign was better protection from vector-borne diseases, especially for families living in areas where diseases are transmitted by vectors and travelers to countries where they pose a health threat. The campaign advocated for health authorities in countries where vector-borne diseases are a public health problem or emerging threat, to put in place measures to improve surveillance and protection.

**2013: Healthy blood pressure**

Specific objectives of the World Health Day 2013 campaign were to:

![Figure-4: Theme 2013](image)

The theme of World Health Day 2013, marked on 7th April 2013, was the need to control raised blood pressure (hypertension) as a "silent killer, global public health crisis". The slogan for the campaign was "Healthy Heart Beat, Healthy Blood Pressure". The WHO reports hypertension – which is both preventable and treatable – contributes to the burden of heart disease, stroke and kidney failure, and is an important cause of premature death and disability. The organization estimates one in 3 adults has raised blood pressure.

Specific objectives of the World Health Day 2013 campaign were to:

1. Raise awareness of the causes and consequences of high blood pressure
2. Provide information on how to prevent high blood pressure and related complications
3. Encourage adults to check their blood pressure and follow the advice of healthcare professionals
4. **
Encourage self care to prevent high blood pressure (5) To make blood pressure measurement affordable to all (6) To incite national and local authorities to create enabling environments for healthy behaviors.

2012: Ageing and health

![Figure-5: Theme 2012](image)

World Health Day 2012 was marked with the slogan "Good health adds life to years". Life expectancy is going up in most countries, meaning more and more people live longer and enter an age when they may need health care. Meanwhile birth rates are generally falling. Countries and health care systems need to find innovative and sustainable ways to cope with the demographic shift. As stated by John Beard, director of the WHO Department of Ageing and Life Course, "With the rapid ageing of populations, finding the right model for long-term care becomes more and more urgent." Different activities were organized by WHO as well as non-governmental and community organizations around the world to mark World Health Day 2012. For example, Yogathon (an Art of Living Initiative) – a marathon of Surya Namaskar – happened in 100+ cities across the globe. Millions of people participated in that event to make awareness of Yoga as a part of healthy living. The event focused on prevention and not just medical treatment of chronic diseases, which remain unaffordable to many people.

2011: Anti-microbial resistance

![Figure-6: Theme 2011](image)
The theme of World Health Day 2011, marked on 7th April 2011, was "Antimicrobial resistance and its global spread" and focused on the need for governments and stakeholders to implement the policies and practices needed to prevent and counter the emergence of highly resistant microorganisms.

When infections caused by resistant microorganisms fail to respond to standard treatments, including antibiotics and other antimicrobial medicines – also known as drug resistance – this may result in prolonged illness and greater risk of death. On World Health Day 2011, WHO called for intensified global commitment to safeguard antimicrobial medicines for future generations. The organization introduced a six-point policy package to combat the spread of antimicrobial resistance.

(1) Commit to a comprehensive, financed national plan with accountability and civil society engagement (2) Strengthen surveillance and laboratory capacity (3) Ensure uninterrupted access to essential medicines of assured quality (4) Regulate and promote rational use of medicines, including in animal husbandry and ensure proper patient care; reduce use of antimicrobials in food-producing animals (5) Enhance infection prevention and control (6) Foster innovations and research and development for new tools. [2]

2010: Urbanization and health

With the campaign "1000 cities, 1000 lives", events were organized worldwide during the week starting 7th April 2010. The global goals of the campaign were.

- **1000 cities**: to open up public spaces to health, whether it is activities in parks, town hall meetings, clean-up campaigns, or closing off portions of streets to motorized vehicles.
- **1000 lives**: to collect 1000 stories of urban health champions who have taken action and had a significant impact on health in their cities.

**2009: Save lives. Make hospitals safe in emergencies**

![Figure 8: Theme 2009](image)

World Health Day 2009 focused on the safety of health facilities and the readiness of health workers who treat those affected by emergencies. Health centers and staff are critical lifelines for vulnerable people in disasters – treating injuries, preventing illnesses and caring for people's health needs. Often, already fragile health systems are unable to keep functioning through a disaster, with immediate and future public health consequences. For this year's World Health Day campaign, WHO and international partners underscored the importance of investing in health infrastructure that can withstand hazards and serve people in immediate need, and urged health facilities to implement systems to respond to internal emergencies, such as fires, and ensure the continuity of care.

**2008: Protecting health from the adverse effects of climate change**

![Figure 9: Theme 2008](image)

In 2008, World Health Day focused on the need to protect health from the adverse effects of climate change and establish links between climate change and health and other development areas such as environment, food, energy, transport. The theme "protecting
health from climate change” put health at the centre of the global dialogue about climate change. WHO selected this theme in recognition that climate change is posing ever growing threats to global public health security.[3]

2007: Invest in health, build a safer future

![Figure 10: Theme 2007](image)

**Key messages for World Health Day 2007**

(1) Threats to health know no borders (2) Invest in health, build a safer future (3) Health leads to security; insecurity leads to poor health (4) Preparedness and quick response improve international health security (5) The World Health Organization is making the world more secure.

2006: Working together for health

![Figure 11: Theme 2006](image)

In 2006, World Health Day was devoted to the health workforce crisis, or chronic shortages of health workers around the world due to decades of underinvestment in their education, training, salaries, working environment and management. The day was also meant to celebrate individual health workers – the people who provide health care to those who need
it, in other words those at the heart of health systems. The Day also marked the launch of the WHO's World Health Report 2006, which focused on the same theme. The report contained an assessment of the current crisis in the global health workforce, revealing an estimated shortage of almost 4.3 million physicians, midwives, nurses and other health care providers worldwide, and further proposed a series of actions for countries and the international community to tackle it.

**2005: Make every mother and child count**

![Figure-12: Theme 2005](image.png)

The World Health Report 2005 – Make Every Mother and Child Count, says that this year almost 11 million children under five years of age will die from causes that are largely preventable. Among them are 4 million babies who will not survive the first month of life. At the same time, more than half a million women will die in pregnancy, childbirth or soon after. The report says that reducing this toll in line with the Millennium Development Goals depends largely on every mother and every child having the right to access to health care from pregnancy through childbirth, the neonatal period and childhood.

**2004: Road safety**

![Figure-13: Theme 2004](image.png)
Road traffic safety refers to methods and measures for reducing the risk of a person using the road network being killed or seriously injured. The users of a road include pedestrians, cyclists, motorists, their passengers, and passengers of on-road public transport, mainly buses and trams. Best-practice road safety strategies focus upon the prevention of serious injury and death crashes in spite of human fallibility (which is contrasted with the old road safety paradigm of simply reducing crashes assuming road user compliance with traffic regulations). Safe road design is now about providing a road environment which ensures vehicle speeds will be within the human tolerances for serious injury and death wherever conflict points exist. Furthermore, the highest possible degree of safety shall be ensured when transporting goods by road. It is of vital importance to monitor and validate the road transportation safety, including comprehensive checks on drivers, vehicles and safety processes. 

Pedestrians and cyclists are among the most vulnerable road users and in some countries constitute over half of all road deaths. Interventions aimed at improving safety of non-motorised users.

(1) Sidewalks of suitable width for pedestrian traffic (2) Pedestrian crossings close to the desire line which allow pedestrians to cross roads safely (3) Segregated pedestrian routes and cycle lanes away from the main highway. Over bridges (tend to be unpopular with pedestrians and cyclists due to additional distance and effort) (4) Underpasses (these can pose heightened risk from crime if not designed well, can work for cyclists in some cases) (5) Traffic calming and speed humps (6) Low speed limits that are rigorously enforced, possibly by speed cameras. Shared space schemes giving ownership of the road space and equal priority to all road users, regardless of mode of use (7) Pedestrian barriers to prevent pedestrians crossing dangerous locations.

Pedestrians' advocates question the equitability of schemes if they impose extra time and effort on the pedestrian to remain safe from vehicles, for example over-bridges with long slopes or steps up and down, underpasses with steps and addition possible risk of crime and at-grade crossings off the desire line. Make Roads Safe was criticised in 2007 for proposing such features. Successful pedestrian schemes tend to avoid over-bridges and underpasses and instead use at-grade crossings (such as pedestrian crossings) close to the intended route. Successful cycling scheme by contrast avoid frequent stops even if some additional distance is involved given that the main effort required for cyclists is starting off.
2003: Shape the future of life: healthy environments for children

![Figure-14: Theme 2003]

World Health Day 2003 was a call to do more to protect three of our greatest assets: health, the environment and our children. Every year, more than 5 million children under the age of 15 die from diseases and conditions caused by the environments in which they live, learn and play. Many of these deaths could be prevented through the creation of healthy environments in the home, the school and the community at large.\[^5\]

2002: Move for health

![Figure-15: Theme 2002]

World Health Day 2002 stimulated a global debate on the shift in the global burden of disease and the factors that are fuelling this process of change. In most parts of the world, non-communicable diseases have become a major epidemic. This is due, in part, to a rapid change in lifestyles leading to reduced physical activity, changing diets and increased tobacco use. This trend is present in all societies, rich and poor, developed and developing. To draw the attention of policy-makers, the public health community and civil society to these issues, World Health Day 2002 emphasized the importance of fitness and a healthy lifestyle.
2001: Mental Health: stop exclusion, dare to care

![Figure-16: Theme 2001]

World Health Day 2001 was dedicated to influencing public opinion and stimulating debate on how to improve the current condition of mental health patients around the world. Nobody is immune to mental disorders, and their impact in psychological, social and economic terms is very high.\(^6\)

Advocacy activities focused on the key concerns of care and exclusion as demonstrated by depressive disorders, schizophrenia, Alzheimer's disease, alcohol dependence, epilepsy and mental retardation. Countries and organizations adapted activities to focus on the problems and disorders which have a significant impact in their communities.

2000: Safe Blood starts with me

![Figure-17: Theme 2000]

Blood can be donated by any person
- aged between 18 and 65,
• weighing over 50kg or with a blood volume exceeding 3500ml, as calculated based on body height and body mass,
• in good health and well-being,
• with a haemoglobin value of 135g/l (male) and 125g/l (female).
• Men can donate blood every 3 months.
• Women can donate blood every 4 months.

Who is not allowed to donate blood?
• Persons infected with HIV virus and their intimate partners.
• Persons who have at any time during their lives injected drugs.
• Men who had sex with men.
• Persons who receive payment or drugs for sex.
• Persons infected with the jaundice virus (hepatitis B and C).
• You can donate blood following an invitation of the Red Cross within the scope of regular blood drives or during the working hours of the Blood Transfusion Centre.
• If you decide to donate blood within the frame of any of the blood drives, you are kindly asked to check the current situation of blood stocks and the operating hours of your closest blood transfusion centre.

1999: Active aging makes the difference

Active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age. It applies to both individuals and population groups. Active ageing allows people to realize their potential for physical, social, and mental well-being throughout the life course and to participate in society, while providing them with adequate protection, security and care when they need. The word “active” refers to
continuing participation in social, economic, cultural, spiritual and civic affairs, not just the ability to be physically active or to participate in the labour force. Older people who retire from work, ill or live with disabilities can remain active contributors to their families, peers, communities and nations. Active ageing aims to extend healthy life expectancy and quality of life for all people as they age. “Health” refers to physical, mental and social well being as expressed in the WHO definition of health. Maintaining autonomy and independence for the older people is a key goal in the policy framework for active ageing. Ageing takes place within the context of friends, work associates, neighbours and family members. This is why interdependence as well as intergenerational solidarity are important tenets of active ageing.[7]

1998: Safe motherhood

Figure-19: Theme 1998

In 1998, the Safe Motherhood Initiative is celebrating its 20th anniversary. Many countries have been able to improve the health and well-being of mothers and newborns over the last 20 years. However, countries with the highest burdens of mortality and illness have made the least progress, and inequalities between countries are increasing. In many places, inequalities within countries are increasing too, between those who live in better conditions and have access to care, and those who for a variety of reasons are excluded. Globally, the numbers remain staggering: each year there are at least 3.2 million stillborn babies, 4 million neonatal deaths and more than half a million maternal deaths. The majority of these deaths are avoidable. HIV/AIDS and malaria in pregnancy are having an impact on maternal mortality and could reverse the progress that has been made. A total of 11–17% of maternal deaths occurs during childbirth itself; 50–71% occurs in the post-partum period. The time spent in labor and giving birth, the critical moments when a joyful event can suddenly turn into an unforeseen crisis, needs more attention, as does the often-neglected post-partum period. These periods account not only for the high burden of post-partum maternal deaths, but also for the associated large number of stillbirths and early newborn deaths.
A total of 98% of stillbirths and newborn deaths occur in low- and middle-income countries: obstetric complications, particularly in labor, are responsible for perhaps 58% of them. The care that can reduce maternal deaths and improve women’s health is also crucial for newborns’ survival and health. During the early years of the 20th century, standard maternity care in Europe, North America and Japan consisted of a home delivery with regular, frequent visits by an obstetric specialist. The advent of modern obstetric care in the late 1930s did not alter this practice, but gradually moved the process to institutional settings, with post-partum follow-up and care by a skilled health-care provider.

Antenatal care is a relatively new concept, and pregnant women in most developed countries now receive an integrated package of antenatal, childbirth and post-partum care. This contrasts with the situation in developing countries, where antenatal care tends to be the first service to receive resources and is commonly widely implemented within maternal health programmes. Most pregnant women in developing countries visit antenatal care services at least once. Far less available and accessible is provision of professional childbirth care, either institutional or at home, and of emergency obstetric and newborn care services. In many settings, systematic and regular post-partum follow-up care is rarely available. Even women who deliver in a health facility are often discharged within hours post-partum and are not seen again until some considerable time afterwards.\[8\]

Very few developing countries have accurate data on maternal and newborn deaths and morbidities, and less than one developing country in three reports national data on post-partum care. Unlike the situation for disease-specific programmes, for maternal and child health very little attention has been paid to monitoring progress and evaluating programmes, even for the analysis and use of existing data. Policy decisions and programme planning are therefore often carried out without evidence-based information and programme evaluation. This issue of the Bulletin contains several papers that focus on important technical areas, particularly the management of post-partum complications and saving pregnant women’s and newborns’ lives by providing evidence and recommendations for policy changes and programme implementation.

Other papers provide evidence that simple but effective monitoring of programmes in developing countries is possible. However, the challenges to be met are not new technologies nor new knowledge about effective interventions, because we mostly know what needs to be done to save the lives of mothers and newborns. The real challenges are how to deliver...
services and scale up interventions, particularly to those who are vulnerable, hard to reach, marginalized and excluded. Effective health interventions exist for mothers and babies such as those described in this issue of the Bulletin, and several proven means of distribution can be used to put these in place. However, none will work if political will is absent where it matters most: at national and district levels.

A key constraint limiting progress is the gap between what is needed and what exists in terms of skills and geographical availability of human resources at local, national and international levels. Other challenges are how to address deteriorating infrastructures; how to maintain stocks of drugs, supplies and equipment in the face of increased demand; lack of transport; ineffective referral to and inadequate availability of 24-hour quality services – particularly emergency obstetric care services – and weak management systems. We need to challenge our policy-makers and programme managers to refocus programme content and to shift focus from development of new technologies towards development of viable organizational strategies that ensure a continuum of care and account for every birth and death.

1997: Emerging infectious diseases

Nosocomial infections, such as MRSA are emerging in hospitals, and extremely problematic in that they are resistant to many antibiotics.

An emerging infectious disease (EID) is an infectious disease whose incidence has increased in the past 35 years and could increase in the near future. Emerging infections account for at least 12% of all human pathogens. EIDs are caused by newly identified species or strains (e.g. SARS, AIDS) that may have evolved from a known infection (e.g. influenza) or spread to a new population (e.g. West Nile virus) or area undergoing ecologic transformation (e.g. West Nile virus) or area undergoing ecologic transformation (e.g. West Nile virus) or area undergoing ecologic transformation (e.g.
Lyme disease), or be reemerging infections, like drug resistant tuberculosis. Nosocomial infections, such as MRSA are emerging in hospitals, and extremely problematic in that they are resistant to many antibiotics.\cite{3} Of growing concern are adverse synergistic interactions between emerging diseases and other infectious and non-infectious conditions leading to the development of novel syndemics.\cite{9}

**Contributing factors**

1. Microbial adaption; e.g. genetic drift and genetic shift in Influenza A
2. Changing human susceptibility; e.g. mass immunocompromisation with HIV/AIDS
3. Climate and weather; e.g. diseases with zoonotic vectors such as West Nile Disease (transmitted by mosquitoes) are moving further from the tropics as the climate warms
4. Change in human demographics and trade; e.g. rapid travel enabled SARS to rapidly propagate around the globe
5. Economic development; e.g. use of antibiotics to increase meat yield of farmed cows leads to antibiotic resistance
6. Poverty and social inequality; e.g. tuberculosis is primarily a problem in low-income areas
7. War and famine
8. Bioterrorism; e.g. 2001 Anthrax attacks
9. Dam and irrigation system construction; e.g. malaria and other mosquito borne diseases.

**1996: Healthy Cities for better life**

The Alliance for Healthy Cities (AFHC) is a cooperative international alliance aimed at protecting and enhancing the health and health care of city dwellers. It is composed of groups of cities, urban districts and other organizations from countries around the world in exchanging information to achieve the goal through a health promotion approach called...
Healthy Cities. The chair city for the alliance is Ichikawa, Japan. The alliance and its members work in favour of the healthy city, defined by the World Health Organization (WHO) as "one that is continually creating and improving those physical and social environments and expanding those community resources which enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential".

1995: Global Polio Eradication

A public health effort to eliminate all cases of poliomyelitis (polio) infection around the world, begun in 1988 and led by the World Health Organization (WHO), UNICEF and the Rotary Foundation, has reduced the number of annual diagnosed cases from the hundreds of thousands to 291 in 2012. This represents a 99.9% reduction, but recently there has been an alarming bounce back in some countries towards more cases. Of the three types of polio, the last recorded wild case of type 2 was in 1999. The last recorded case of type 3 was on 11 November 2012. All reported cases since 11 November 2012 have been of type 1. If polio is the next disease to be successfully eradicated, this will represent only the third time this has ever been achieved, after smallpox and rinderpest. The goal of eradicating polio worldwide has attracted international and media attention, but since 2001 progress has been erratic in reducing the number of cases, which has led to getting rid of the last 1% being described as "like trying to squeeze Jell-O to death". However, in 2011 incidence rates of the disease were dramatically reduced, and with large reduction again in 2012, hopes for eliminating polio have been rekindled. India is the latest country to successfully stop transmission of polio. May 2014, WHO declared a global health emergency for only the second time since regulations permitting it to do so were adopted in 2007, due to a spread of polio. Per the
WHO, Pakistan, Syria and Cameroon have recently allowed the virus to spread—to Afghanistan, Iraq and Equatorial Guinea, respectively.\textsuperscript{[10]}

### Themes of World Health Days

<table>
<thead>
<tr>
<th>Year</th>
<th>Theme</th>
<th>Year</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>Food safety</td>
<td>2004</td>
<td>Road safety</td>
</tr>
<tr>
<td>2014</td>
<td>Vector-borne diseases: small bite, big threat</td>
<td>2003</td>
<td>Shape the future of life: healthy environments for children</td>
</tr>
<tr>
<td>2013</td>
<td>Healthy heart beat, Healthy blood pressure</td>
<td>2002</td>
<td>Move for health</td>
</tr>
<tr>
<td>2012</td>
<td>Good health adds life to years</td>
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<td>Mental Health: stop exclusion, dare to care</td>
</tr>
<tr>
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<td>Anti-microbial resistance: no action today, no cure tomorrow</td>
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<td>Safe Blood starts with me</td>
</tr>
<tr>
<td>2010</td>
<td>Urbanization and health: make cities healthier</td>
<td>1999</td>
<td>Active aging makes the difference</td>
</tr>
<tr>
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<td>Save lives, Make hospitals safe in emergencies</td>
<td>1998</td>
<td>Safe motherhood</td>
</tr>
<tr>
<td>2008</td>
<td>Protecting health from the adverse effects of climate change</td>
<td>1997</td>
<td>Emerging infectious diseases</td>
</tr>
<tr>
<td>2007</td>
<td>International health security</td>
<td>1996</td>
<td>Healthy Cities for better life</td>
</tr>
<tr>
<td>2006</td>
<td>Working together for health</td>
<td>1995</td>
<td>Global Polio Eradication</td>
</tr>
<tr>
<td>2005</td>
<td>Make every mother and child count</td>
<td>1995: Implementation year of theme</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2015: Current year theme</td>
<td></td>
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### CONCLUSION

Each year, the organization marks World Health Day and other observances focusing on a specific health promotion topic. World Health Day falls on 7\textsuperscript{th} April each year, timed to match the anniversary of WHO's founding. Recent themes have been vector-borne diseases (2014), healthy ageing (2012) and drug resistance (2011). The other official global public health campaigns marked by WHO are World Tuberculosis Day, World Immunization Week, World Malaria Day, World No Tobacco Day, World Blood Donor Day, World Hepatitis Day and World AIDS Day. The World Health Organization supports work towards the Millennium Development Goals of the eight Millennium Development Goals, three – reducing child mortality by two-thirds, to reduce maternal deaths by three-quarters, and to halt and begin to reduce the spread of HIV/AIDS – relate directly to WHO's scope; the other five inter-relate and have an impact on world health. Every year on the occasion of the International Happy World Health day, The World health Organization gives a one Slogan in every year. The beginning of the slogan is since 1995. After it in 1996 the slogan about the Health id given i.e. “Healthy Cities for Better Life”. So after it every year one slogan is given to the health so that people can also make their Health better. As everyone knows that health
is one of the best things in the Worlds & the better health means better life & life style. In the 1995, The 1st slogan was given as “Global Polio Eradication” and 21st slogan is for the year 2015 is “Food safety”. The entire slogan given by the WHO since 1995.

YEARS    SLOGANS
IN 1995    GLOBAL POLIO ERADICATION
IN 1996    HEALTHY CITIES FOR BETTER LIFE
IN 1997    EMERGING INFECTIOUS DISEASES
IN 1998    SAFE MOTHERHOOD
IN 1999    ACTIVE AGING MAKES THE DIFFERENCE
IN 2000    SAFE BLOOD START WITH ME
IN 2001    MENTAL HEALTH: STOP EXCLUSION, DARE TO CARE
IN 2002    MOVE FOR HEALTH
IN 2003    SHAPE THE FUTURE OF LIFE: HEALTHY ENVIRONMENTS OR CHILDREN
IN 2004    ROAD SAFETY
IN 2005    MAKE EVERY MOTHER AND CHILD COUNT
IN 2006    WORKING TOGETHER FOR HEALTH
IN 2007    INTERNATIONAL HEALTH SECURITY
IN 2008    PROTECTING HEALTH FROM THE ADVERSE EFFECTS OF CLIMATE CHANGE
IN 2009    SAVE LIVES, MAKE HOSPITALS SAFE IN EMERGENCIES
IN 2010    URBANIZATION & HEALTH
IN 2011    ANTI-MICROBIAL RESISTANCE
IN 2012    GOOD HEALTH ADDS LIFE TO YEARS
IN 2013    HEALTHY HEART BEAT, HEALTHY BLOOD PRESSURE
IN 2014    VECTOR-BORNE DISEASES
IN 2015    FOOD SAFETY

REFERENCES


