## Davos Declaration on Urban Heart Health

A call to promote heart health for all by reducing overall cardiovascular risk in urban populations.

Launched in Davos, Switzerland, on January 21, 2025



## Our Pledge

We hereby declare our intention to promote cities as drivers of heart health by reducing overall cardiovascular risk in urban populations.

We commit to the following actions to make our cities more heart healthy and more prosperous:

- O1 Set ambitious targets to bend the curve on cardiovascular disease: of all the people in the city who have any of the leading cardiovascular risk factors (hypertension, hypercholesterolemia, or diabetes), 90% are diagnosed, 80% treated, and 70% has their risk factor(s) under control.
- O2 Design a population health roadmap with concrete city-wide actions that improve heart health.
- O3 Implement global evidence and best practices and evidence for detecting, managing and preventing cardiovascular risk.
- O4 Continuously improve the roadmap towards precision population health by integrating new data and Al-driven insights as they become available, enabling decision makers to target interventions and allocate resources to where and whom they are needed most.
- O5 Regularly report on progress towards target achievement to share lessons learned with other cities.

Reducing overall cardiovascular risk will contribute to overall well-being of our urban populations.

We pledge to make this declaration a living instrument that guides our actions and inspires our vision, and to renew it periodically to reflect achievements and challenges.





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Cardiovascular disease (CVD) has been, for the last 30 years, the most common cause of death globally for both women and men and, despite being mostly preventable, imposes a heavy burden on individuals, families, communities, and health systems. Although ample evidence exists on how to improve management of the disease, the world seems unable to bend the curve of CVD. Its overall burden and mortality are even set to rise in the coming decades, and disproportionally so in underserved populations. Low and middle-income countries are increasingly affected, with 4 out of 5 cardiovascular deaths occurring there, many prematurely before the age of 60.

As 70% of the world's population will live in cities by 2050 and cities have proven to be drivers of population health, urban settings are the place to start addressing this urgent issue.<sup>2</sup>

We affirm that addressing CVD in cities is a public health imperative and a strategic investment that can improve urban populations' quality of life, productivity, and sustainability.

Cities have a unique opportunity and responsibility to lead action towards the targets and bend the curve of CVD by implementing validated population health approaches such as CARDIO4Cities.

- O1 Improve quality of CARE by simplifying cardiovascular risk factor management aligned with existing evidence and global best practices, 3 and by optimizing health system performance through task shifting and sharing, coordinated care, and tools that empower people to take more responsibility in the management of their own health.
- O2 ACCELERATE early detection and prompt management of cardiovascular risk
  - a. by optimizing detection of cardiovascular risk within and outside health facilities and bring health services closer to where people live, work and play
  - b. by assuring diagnosis is systematically followed by prompt adequate management of cardiovascular risk and disease
  - c. by designing tailored strategies for population groups with worse outcomes for CVD
  - d. by assuring regular and affordable supplies of medicines that control the cardiovascular risk factors
- Q3 REFORM policies with proven health benefits, such as those promoting smoking cessation, reducing trans-fat and salt in processed food, increasing access to green spaces and clean air, and task shifting in health system workflows.
- O4 Leverage <u>D</u>ATA and <u>D</u>IGITAL technology:
  - a. data to continuously monitor progress towards the targets and periodic review by city authorities to redesign interventions where needed
  - b. digital technology to address gaps in the population health roadmaps
- O5 Ensure INTERSECTORAL collaboration by working with education, work, sports, transport, housing, food and other sectors to integrate interventions and policies in all relevant sectors that influence urban heart health.
- Ensure OWNERSHIP of local authorities and health system managers who take the driver's seat in the roll out of the cardiovascular population health approaches, aligning the roadmaps with local priorities and working hand-in-hand with communities and partners to bend the curve on CVD while narrowing health equities.

## List of References

(1) World Heart Report 2023: Confronting the World's Number One Killer. Geneva, Switzerland. World Heart Federation. 2023. Online. Accessed June 14, 2024.; (2) The World Bank Urban development. www.worldbank.org/en/topic/urbandevelopment overview#1. Published April 20, 2020. Accessed July 7, 2024.; (3) HEARTS technical package for cardiovascular disease management in primary health care: risk based CVD management. Geneva: World Health Organization; 2020. 9789240001367-eng.pdf journal.pgph.0001480.