

City Profile

Seongdong-Gu

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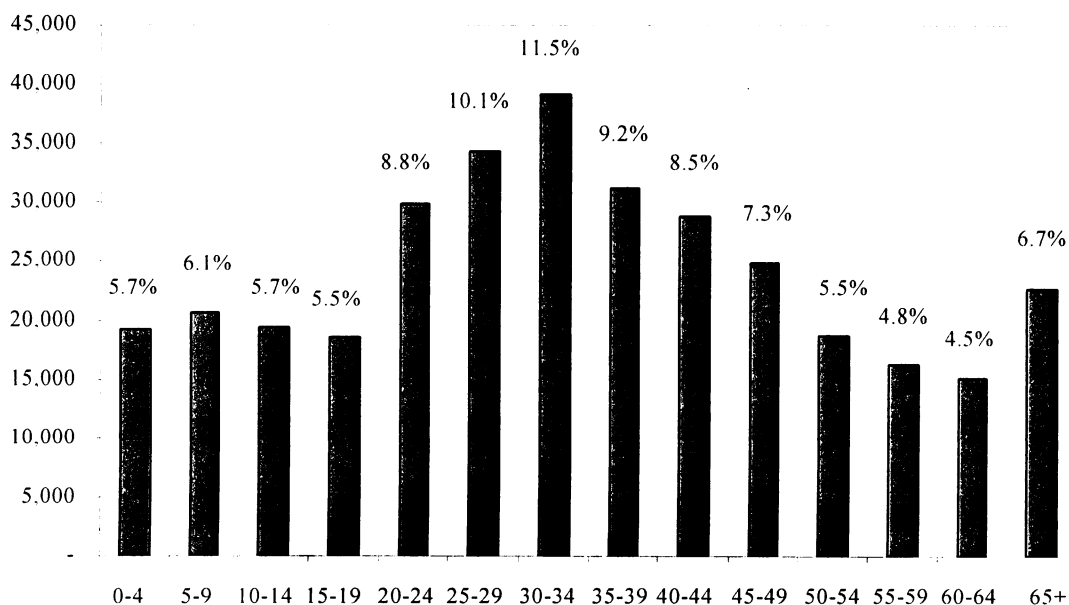
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I. Demographic Characteristics

1. Current Population

According to the statistics from Dec. 2004, the population of Seongdong-Gu is 343,992, which is about 3.3% of the total population of Seoul, which is 10,276,968. The population density is 20,423 persons/km², which is higher than that of Seoul, which is 16,978 persons/km². The gender distribution is almost equal, with 50.4% of Seongdong-Gu's population being male and 49.6% of the population being female. The following chart shows the distribution of the population in five-year age brackets.

Chart 1. Population by age groups



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

According to the population structure by age and gender groups, economically active population (persons aged 20-64) was about 238,797 persons in 2003, which account for 69.4% of the population. It was followed by adolescents 19 years old and under about 22.6% (male 23.1%, female 22.2%) and senior citizens (aged 65 and over) about 6.7% (male 5.3%, female 7.9%).

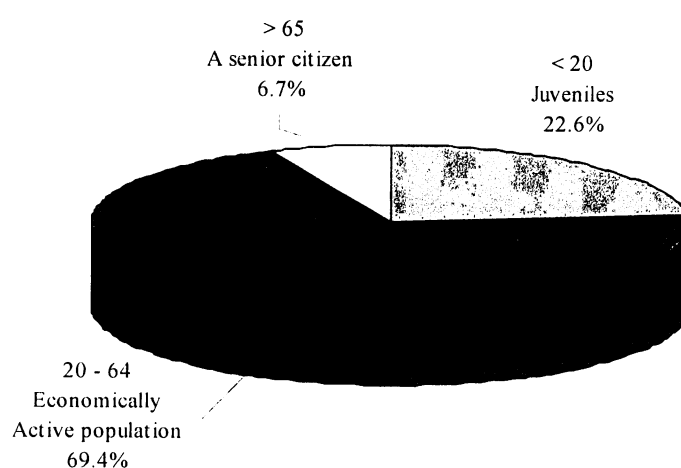
Table 1. Population Structure

Age Group	Total	Male	Female
19 years and under	77,848(22.6%)	39,946(23.1%)	37,902(22.2%)
20-64 years	238,797(69.4%)	121,623(70.2%)	117,174(68.6%)
65 years and over	22,723 (6.7%)	9,248 (5.3%)	13,475 (7.9%)

Source : Seongdong-Gu Health&Medical Plan. Seongdong-Gu Public Health Center. 2003-2006

The following charts show the percentage of the population by age and gender groups.

Chart 2. Population Structure

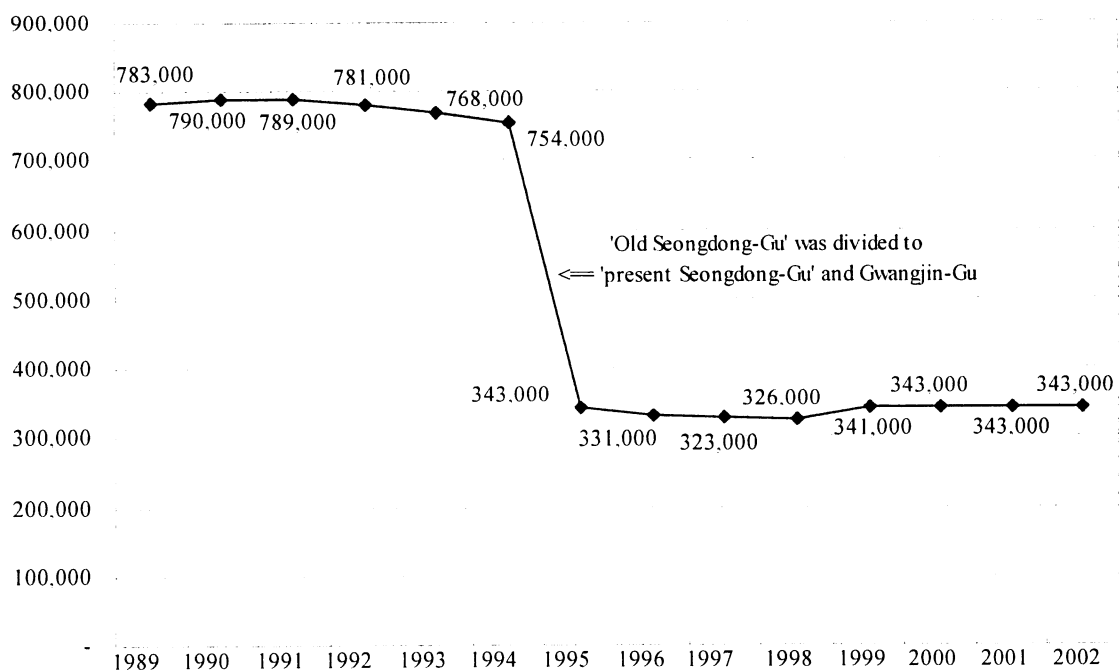


Source : Seongdong-Gu Health&Medical Plan. Seongdong-Gu Public Health Center. 2003-2006

2. Population Changes

Based on 2003 Seongdong statistical yearbook, the population of Seongdong-Gu increased continuously after the 1950s. After implementing a family planning policy to reduce the population increase, a successful decline in population growth was observed. The current population is about 343,992 persons, which was made in 1995 separating Seongdong-Gu and Kwangjin-Gu from 'old Seongdong-Gu', one of the municipalities of Seoul. There were no distinct changes in the population since 1995.

Chart 3. Trends in the total population

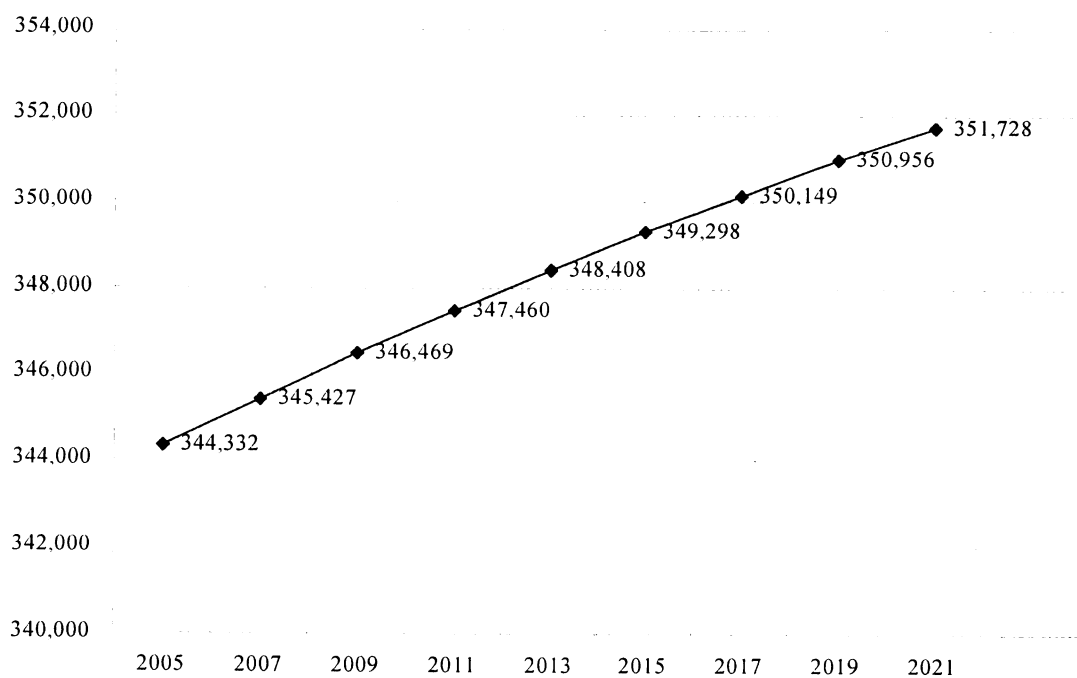


Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Seongdong-Gu Master Plan. Seongdong-Gu. 2005

The population of Seongdong-Gu was 343,992 persons in March. 2005. As a result of the Government's strict family planning policy and the changing lifestyles, the most striking demographic condition in Korea today is the country's low fertility rate, which is one of the lowest in the world. In light of the population trends, the government policy is to promote births. The estimated Seongdong-Gu population in 2021 is 351,728 persons.

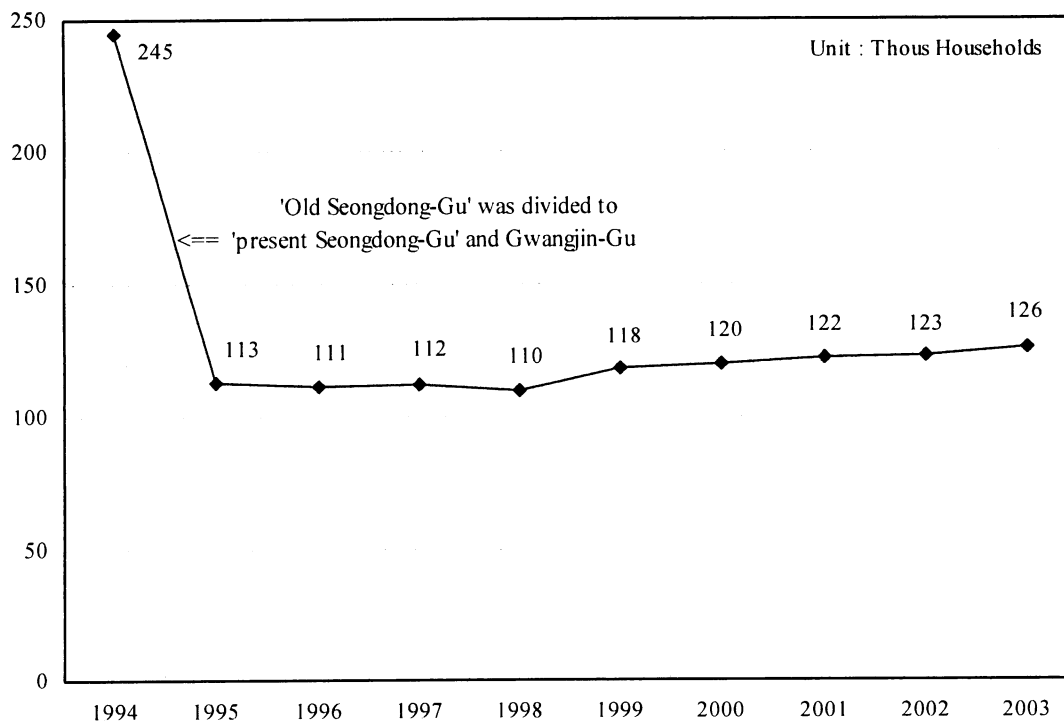
Chart 4. Estimated Population



Source : Seongdong-Gu Master Plan. Seongdong-Gu. 2005

The number of households in Seongdong-Gu was 128,964 households in Dec. 2004. It is gradually increasing due to two-generation family preferred.

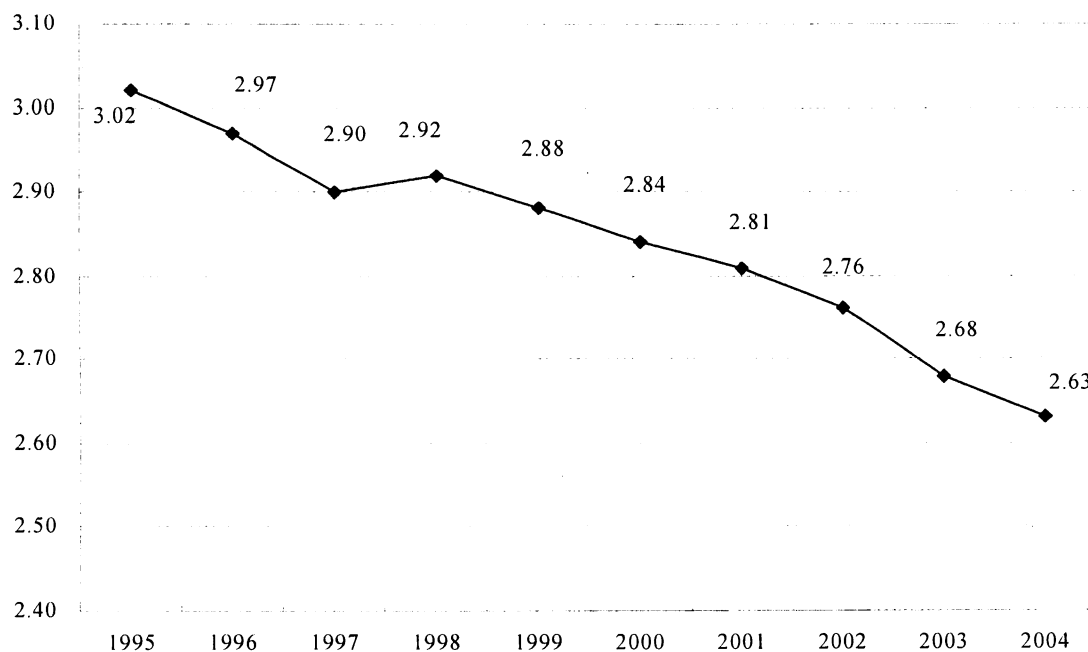
Chart 5. Trends in the number of household



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003
Seongdong-Gu Master Plan. Seongdong-Gu. 2005

The number of household is increasing but the average number of household is annually decreasing. The figure was 3.02 in 1995, while it was 2.63 in 2004.

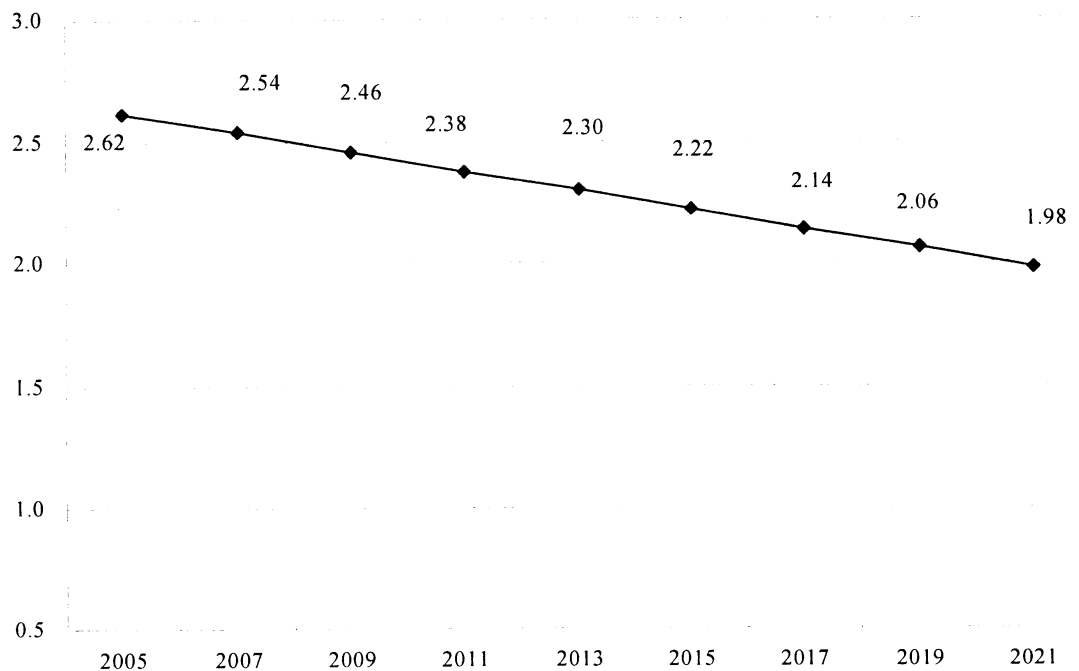
Chart 6. Trends in the number of household member



Source : Seongdong-Gu Master Plan. Seongdong-Gu. 2005.04

At present, the average size of Seongdong-Gu's household is 2.62 persons. The average number of household has decreased due to reconstruction of family. The average number of household estimated by linear regression model is 1.98 persons in 2021.

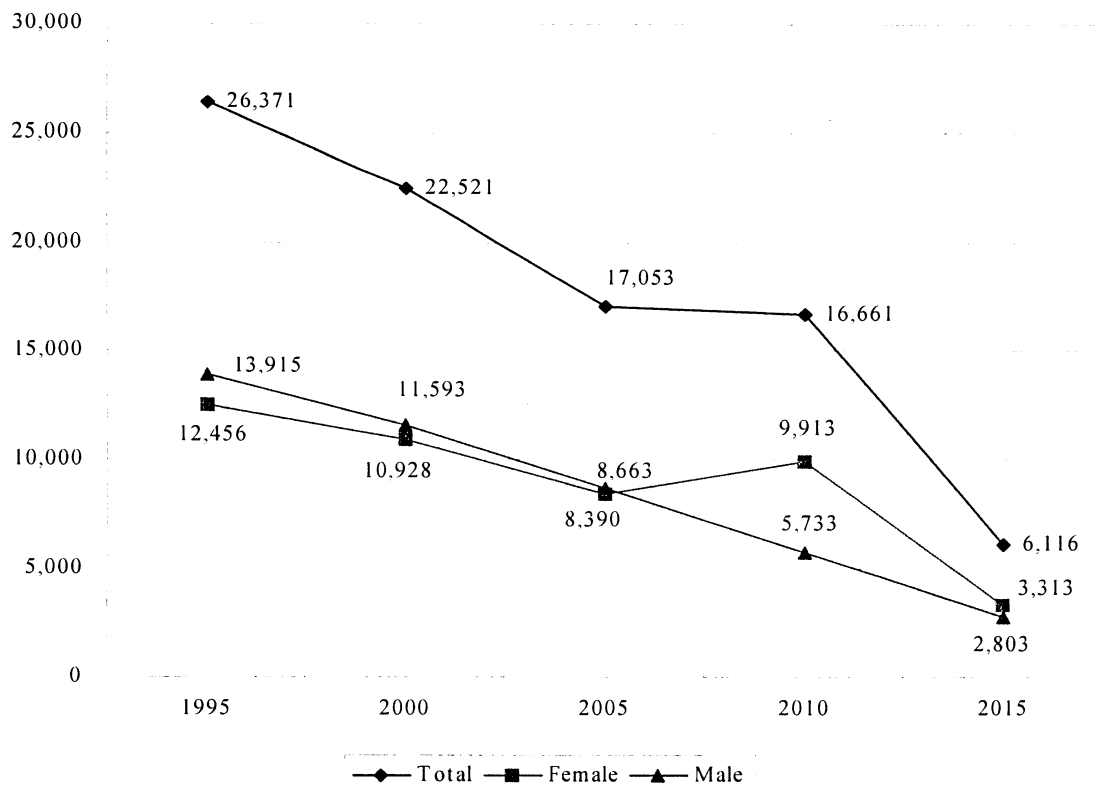
Chart 7. Estimated number of household member



Source : Seongdong-Gu Master Plan. Seongdong-Gu. 2005.04

The number of infants under five in of Seongdong-Gu is decreasing. During past 10 years, the rate of male was higher than that of female, but it will be changed within 10 years. It is estimated that the population of infants in 2015 will come up to a third of the current population.

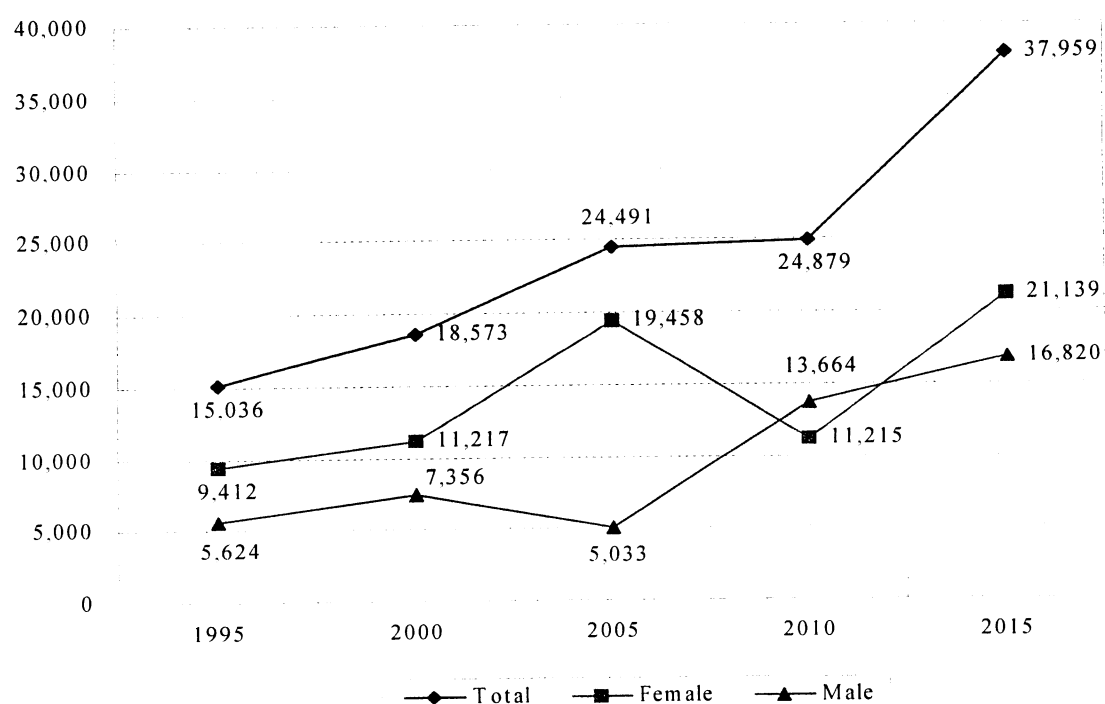
Chart 8. Changes in the Number of infants Under 5 years



Source : Seongdong-Gu Annual Report. Seongdong-Gu. 2005

The percent of persons over 65 years of age in Seongdong-Gu is increasing and has reached 7.1% in the year 2005. Seongdong-Gu is expected to become an 'aged society' defined as a society in which 14% of the population is over 65 years, by the year 2021.

Chart 9. Changes in the Number of person 65 years and over

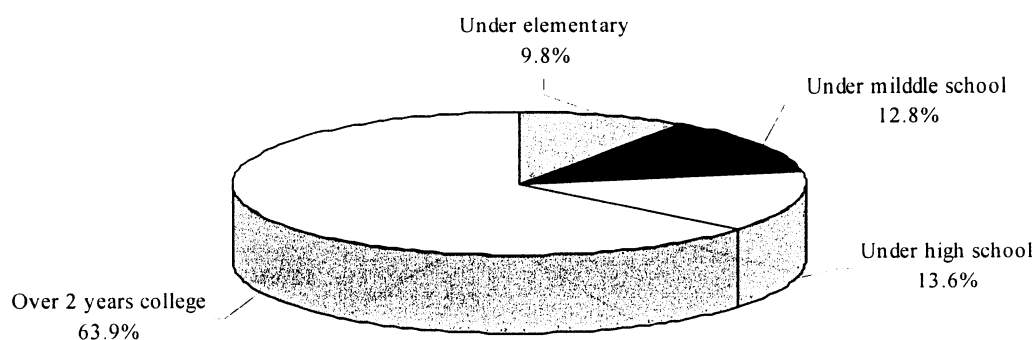


Source : Seongdong-Gu Annual report. Seongdong-Gu. 2005

3. Education Status

According to the distribution of education status of Seongdong-Gu, the percent of education status of more than two years college made up about 63.9% among the population, followed by about 13.6% in high school.

Chart 10. Education status

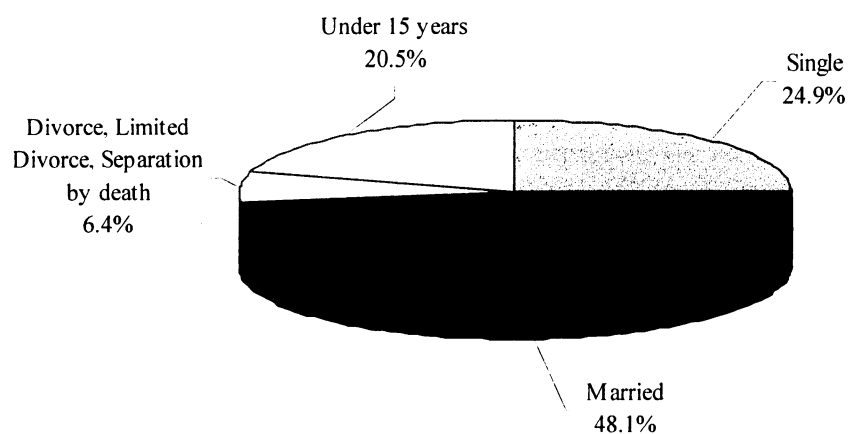


Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

4. Marriage Status

The percent of married people reported in Seongdong-Gu was 48.1%, followed by single people. Divorces, limited divorces and separation by death was about 6.4%. The number of divorces is on the rise, resulting in more and more single households and single parent families. The following chart shows the distribution of marriage status in 2003.

Chart 11. Marriage Status



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

National Statistical Yearbook. National Statistical Office. 2003

5. Vital Statistics

The number of births reported in Korea was 31.2 per 1,000 persons of the population in 1970, and has dropped to 10.3 in 2003. The crude birth rate for Seongdong-Gu is slightly higher than the national average in 2003.

Table 2. Crude Birth Rate

	Gender	Number of Births	Per 1,000 Population
Seongdong-Gu	Male	1,971	11
	Female	1,847	

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The crude death rate for Seongdong-Gu, which was 8 per 1,000 of the population, has dropped to 4 per 1,000 people in 2003. A total of 1,266 deaths were reported in 2003. The following graph shows the number of deaths by gender group per 1,000 people in 2003.

Table 3. Crude Death Rate

	Gender	Number of Deaths	Per 1,000 Population
Seongdong-Gu	Male	715	4
	female	551	

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The World Health Organization (WHO) defined low birth weight (LBW) infants as infants born with weight of less than 2500g. LBW is a significant factor associated with infant mortality and linked to maternal smoking, alcohol drinking, drug use and socio-economic indicators. LBW infants are more likely to experience long-term disabilities or die during the first year of life than infants with normal birth weight. The rate of low birth weight for Seongdong-Gu was about 3.2%. The following table shows the statistics of LBW.

Table 4. Low Birth Weight

Total infant population	Number of low birth weight	Rate of low birth weight
3,956	128	3%

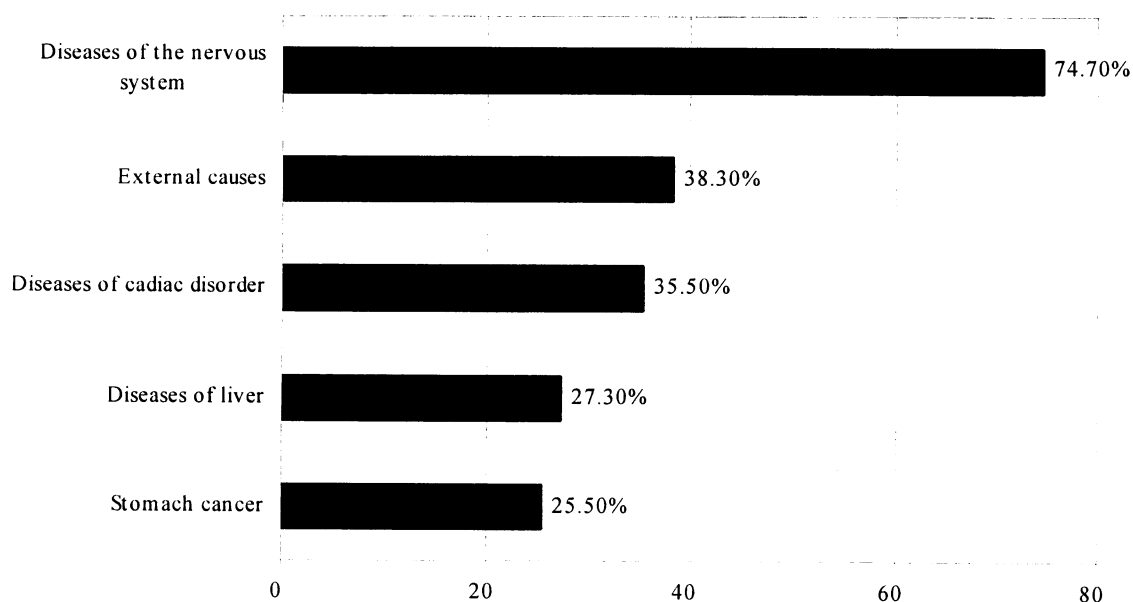
Source : Seongdong-Gu Health&Medical Plan. Seongdong-Gu Public Health Center. 2003~2006

II. Health Indicator

1. Mortality

In 2003, Seongdong-Gu had the highest death rate for diseases of the nervous system (Male 71.0%, Female 78.4%) in both male and female. The five major chronic diseases listed in descending order of mortality rates were: diseases of the nervous system, external causes, diseases of cardiac disorder, diseases of liver, stomach cancer. The following graph shows the mortality rates for leading causes of death in Seongdong-Gu.

Chart 12. Mortality



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Gender specific data shows that among men diseases of the liver or bile ducts accounted for 32.6%, while diabetes accounted for 17.3% for women.

Table 5. Leading causes of mortality

Rank	Male	Female
1	Diseases of the nervous system (71.0%)	Diseases of the nervous system (78.4%)
2	External Causes (56.6%)	Diseases of cardiac disorder (32.9%)
3	Diseases of liver (44.0%)	External Causes (19.9%)
4	Diseases of cardiac disorder (38.4%)	Cancer of stomach (18.3%)
5	Cancer of liver or bile ducts (32.6%)	Diabetes (17.3%)

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

2. Life Expectancy

Based on national data, the life expectancy was 72.84 years old in male and 80.01 years old in female. The following tables provide information on life expectancy for men and women at each age in Seongdong-Gu. About 42.9% of men and 39.5% of women is expected to be alive until they are 80 years old and over. The population of aged 30 to 40 had higher life expectancy than other age groups.

Table 6. Life expectancy

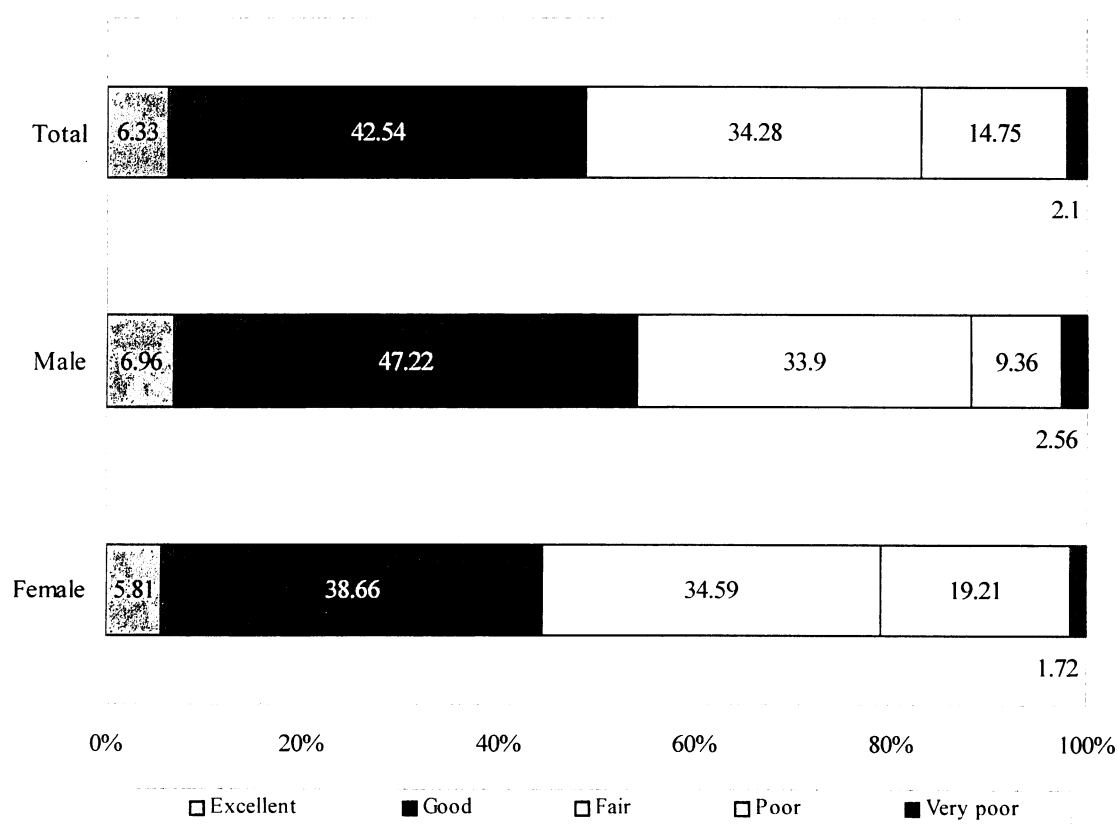
Age Group	Male			Female		
	10 to 20	30 to 40	>50	10 to 20	30 to 40	>50
>70 years old	21.7%	15.3%	2.5%	26.1%	18.1%	5.7%
>80 years old	13.9%	27.7%	18.9%	8.8%	21.4%	19.9%
Total	35.6%	42.9%	21.5%	34.9%	39.5%	25.6%

Source : Seongdong-Gu Health Insurance Source. Seongdong-Gu Public Health Center. 2003

3. Perceived Health Status

When asked about their subjective health status, most citizens (48.67%) consider themselves to be in 'good health'. About twice as many men than women perceive their health status to be 'excellent'.

Chart 13. Perceived health status

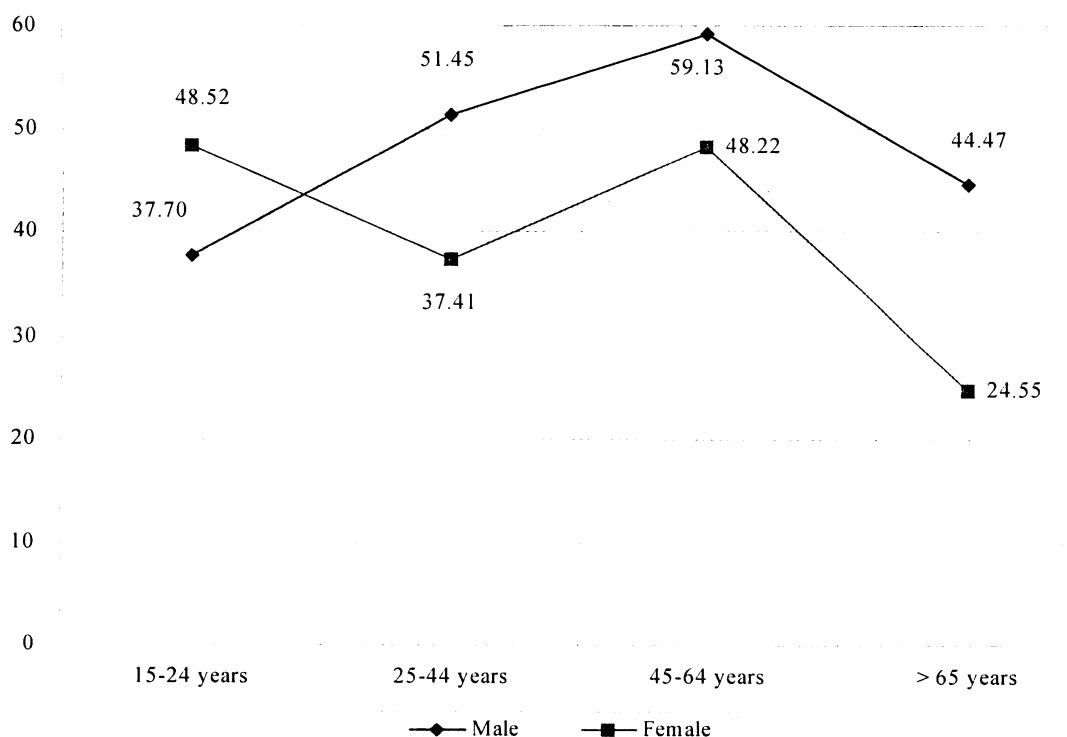


Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

3. Screening

The following graph presents the age-specific rate of general screening in aged 15 years and over during the recent two years. It was higher in the women throughout all age groups. The rate of men aged 45 to 64 was highest, accounting for 59.13%, while there was a relatively low rate (44.47%) in men aged 65 and over. However, the figure in men aged 65 and over was high as 1.8 fold, compared by about 24.55% of women in the same age.

Chart 14. Rate of general screening



Source : Seongdong-Gu, Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

Based on the survey on blood pressure measure, it was reported that about 89.5% of the residents experienced to measure blood pressure. The following table shows the percent of people to experience to measure blood pressure during lifetime in Seoul and Seongdong-Gu. It is said that nine of ten in men and 8.8 of 10 in women experienced it. There were no big difference between Seoul and Seongdong-Gu.

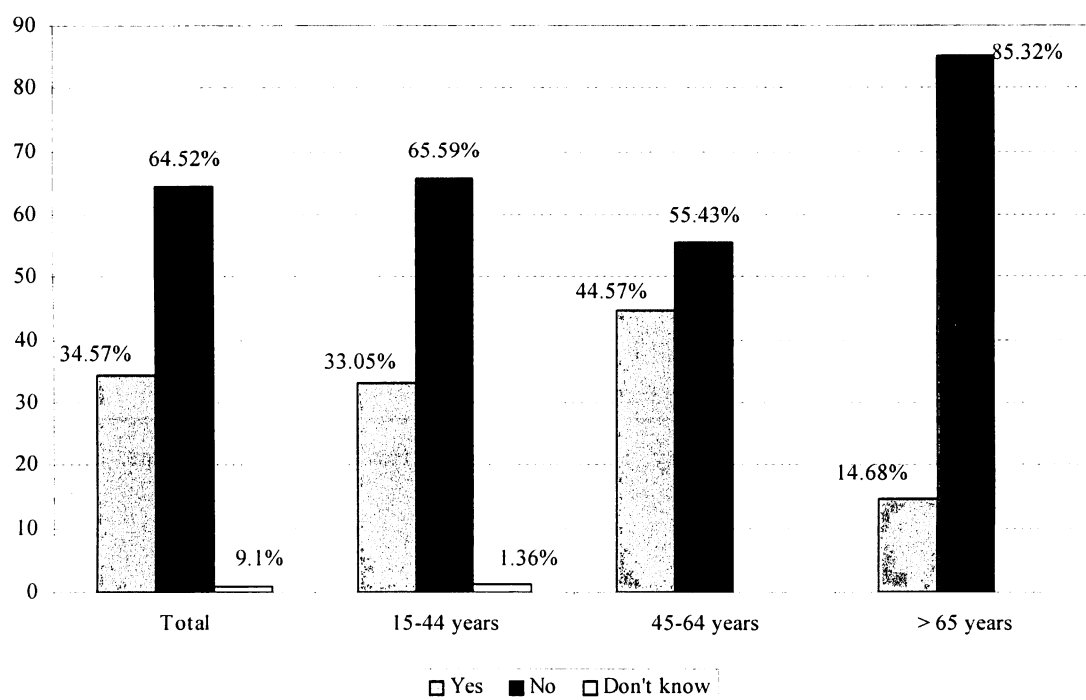
Table 7. Percent of people experienced to measure blood pressure

	Gender	Yes(%)	No(%)
Seongdong-Gu	Male	90.23	9.77
	female	88.76	11.24
Seoul	Male	89.50	10.50
	female	90.43	9.57

Source : Seongdong-Gu, Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

According to the statistics for the recent two years from 2003, the percent of screening in women aged 45-64 in the time of menopause was relatively high, compared to other age groups. 85.32% of women residents aged 65 and over remained to be screened.

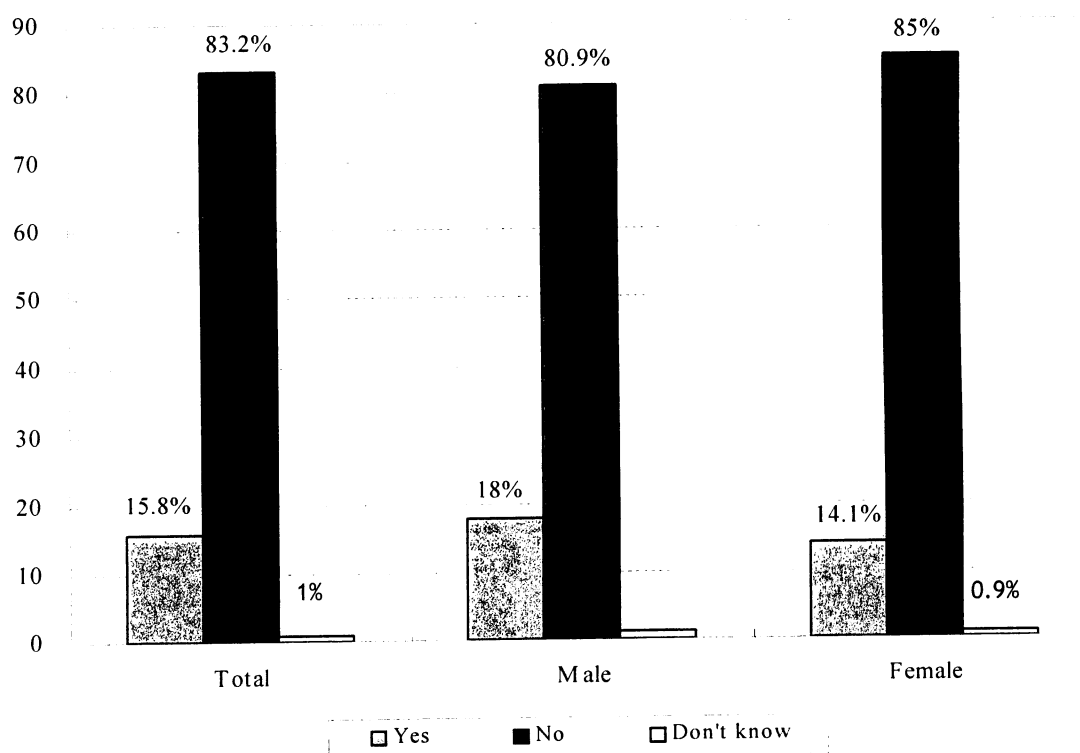
Chart 15. Screening for Uterine cancer



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

According to the statistics from the Seoul Survey 2003, the rate of screening for stomach cancer in Seongdong-gu was very low throughout all the ages. However stomach cancer was ranked as fourth in the leading causes of mortality, only a few people were screened for stomach cancer.

Chart 16. Screening for Stomach cancer

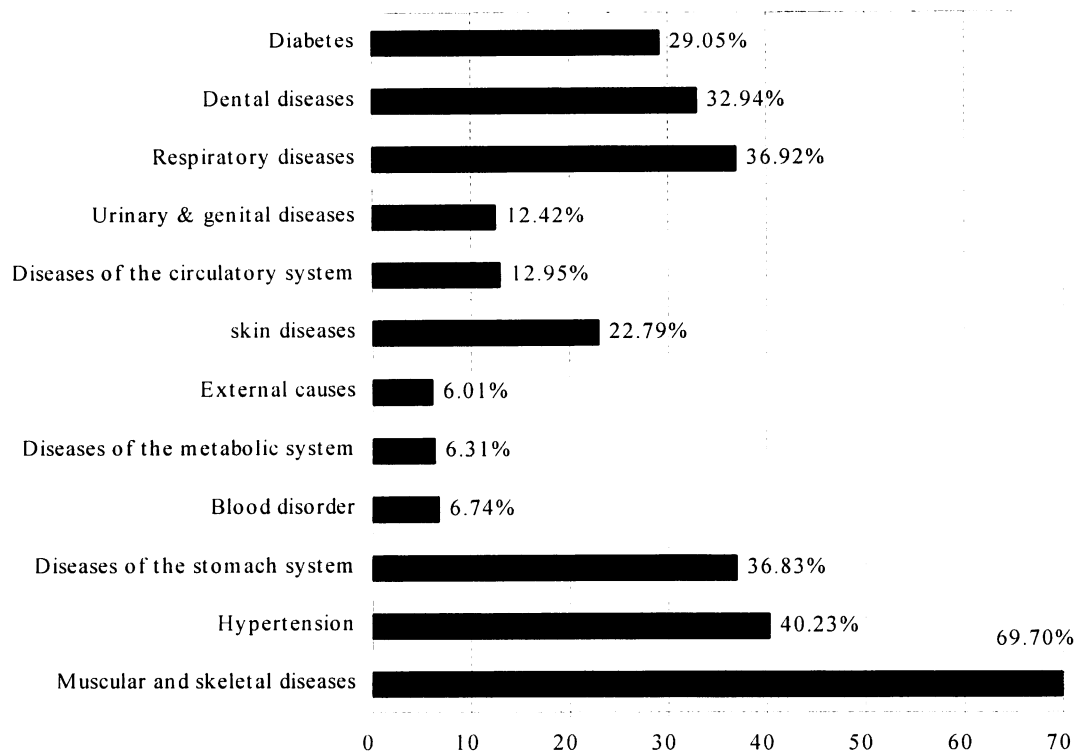


Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

4. Morbidity

The chronic diseases with the highest prevalence rate in 2003 were muscular and skeletal diseases, accounting for 69.70%. Hypertension was 40.23%, diseases of the respiratory system was 36.92%, diseases of the digestive system was 36.83%, diseases of dental carries, periodontal was 32.94% and diabetes was 29.05%.

Chart 17. Morbidity of perceived chronic diseases



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

5. Mother and Child Health

It is reported on live birth delivery type (except abortion) of married women in 2003. In aged 15 to 44 married women, the rate of Caesarean birth was 49.32% and the rate of natural childbirth was 50.86%. In other words, it shows one of two in Seongdong-Gu is born by surgery. Whereas in Seoul, natural childbirth accounted for 61.57%, Caesarean birth.

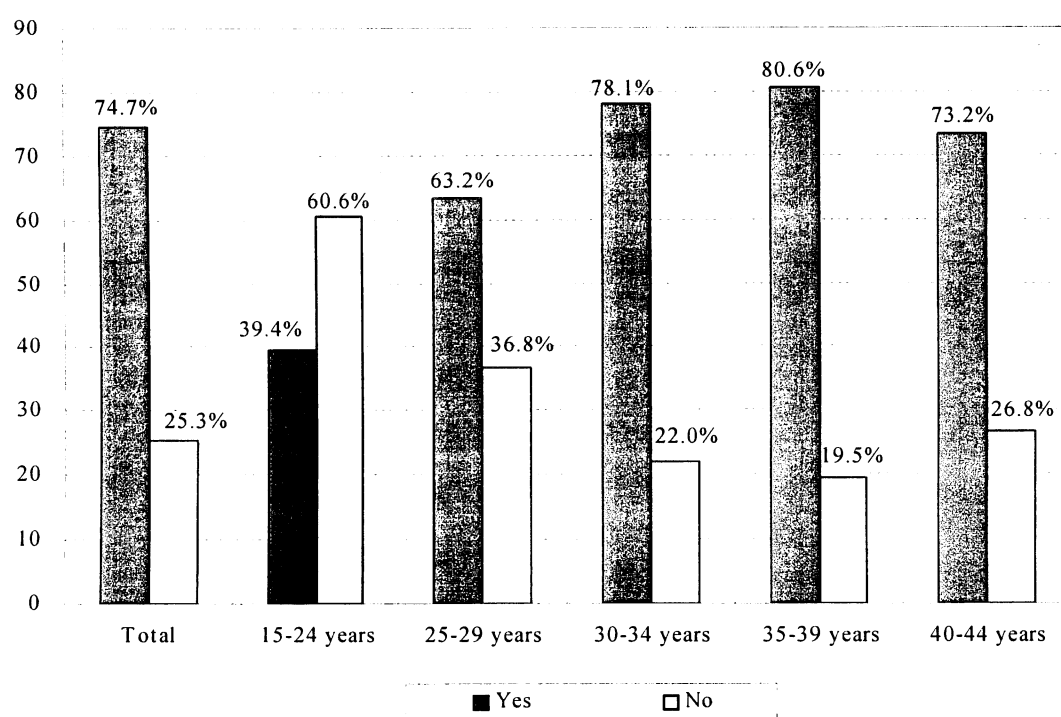
Table 8. Delivery types of 15-44 years married women

	Natural childbirth	Caesarean birth
Seoul	61.57(%)	38.43(%)
Seongdong-Gu	50.68(%)	49.32(%)

Source : Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

It is reported that the percent of contraception of married women of aged 15 to 44 was 74.69%. The following graph presents the rate of contraception in the married women of 15 to 44 years old. The married women of aged 35 to 39 had the highest rate (80.6%) and the contraception rate was the lowest, accounting for 39.4% in 15 to 24 years. Teenagers are less likely to practice contraception than older women.

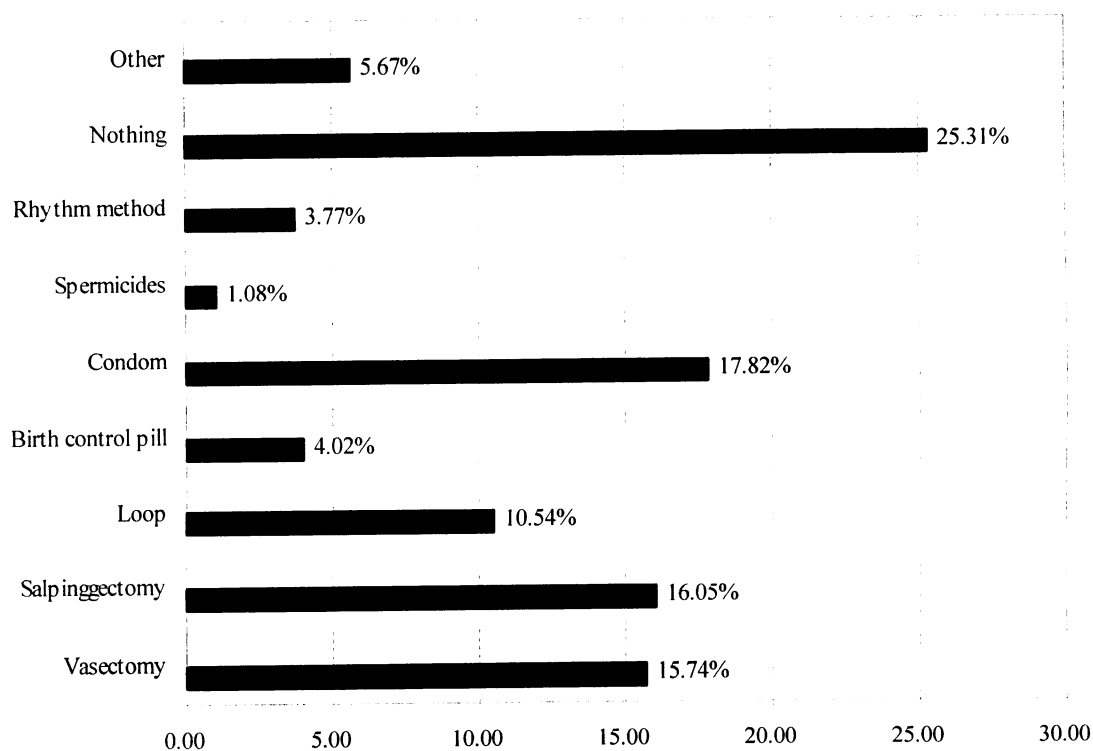
Chart 18. Percent of Contraceptions



Source : Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

The following graph shows the methods of contraception of married women in 15 to 44 years old. Among the methods of contraception, the percent of using condom accounted for 17.82%, followed by vasectomy 16.05%, salpingectomy 15.74%, loop 10.54%. People who did not use contraceptives were 25.31% among the population. There were additional methods of contraception such as birth control pill (4.02%), spermicide (1.08%), and rhythm Method (3.77%).

Chart 19. Types of Contraception



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

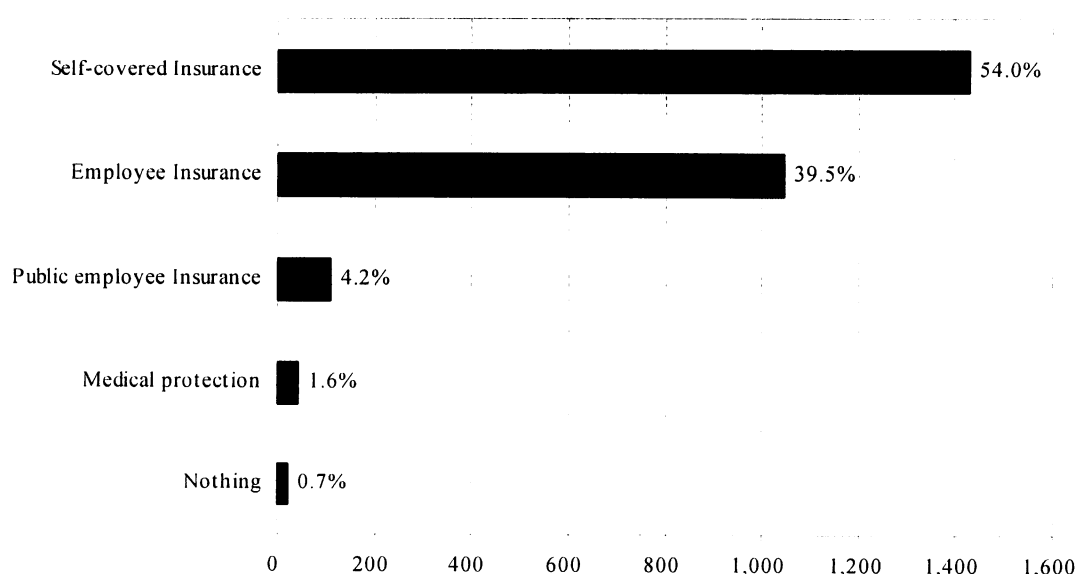
III. Medical Service Indicator

1. Medical Service System

The social security system of Korea is, broadly speaking, composed of the social insurance programs including national health insurance program, the public assistance programs, and the social welfare service programs. The main objectives of the National Health Insurance are to integrate multiple insurance societies into a single insurer system as one of the Social Security Systems, to enhance operation efficiency and equity of financing, and to provide comprehensive health care services including health prevention and promotion for the people. All Koreans have been covered as insurer or dependents by 'employee insurance', 'self-employed insurance' or 'medical protection'.

According to the statistics from the National Health Insurance Corporation in 2001, 333,812 citizens which was 99.3% of the population, were insured in Seongdong-Gu. Of these, 54% had 'self-employed insurance', and 39.5% had 'employee insurance'. Uninsured persons were 0.7% of the population.

Chart 20. Percentage of population covered by health insurance



Source : Seongdong-Gu Health Insurance. National Health Insurance Corporation. 2001.12.

Up to the end of June 2004, Seongdong-Gu has 233 medical facilities (general hospital 1, hospital 6, Korean traditional medicine 64, clinic 160). The number of general hospital and hospitals has not been changed but clinics increased as many as 30 since 1998.

Table 9. Number of medical facility

Medical Facility	Number
General Hospital	1
Hospital	6
Clinics	160
Korean traditional medicine clinics	64
Public Health Center	2
Total	233

Source : Seongdong-Gu Health Education Report. Seongdong-Gu Public Health Center. 2004

The hospitals in the city provide 1,814 sickbeds, including 970 for general hospital, 501 for hospitals, 313 for clinics and 30 for Korean traditional medicine. The total number of sickbeds has decreased as many as 289, compared to the statistics in 1998. The number of beds per 100,000 persons was 527, which was higher than 363 of Seoul.

Table 10. Number of beds

General Hospital	Hospitals	Clinics	Korean Traditional medicine Clinics	Total
970	501	313	30	1,814

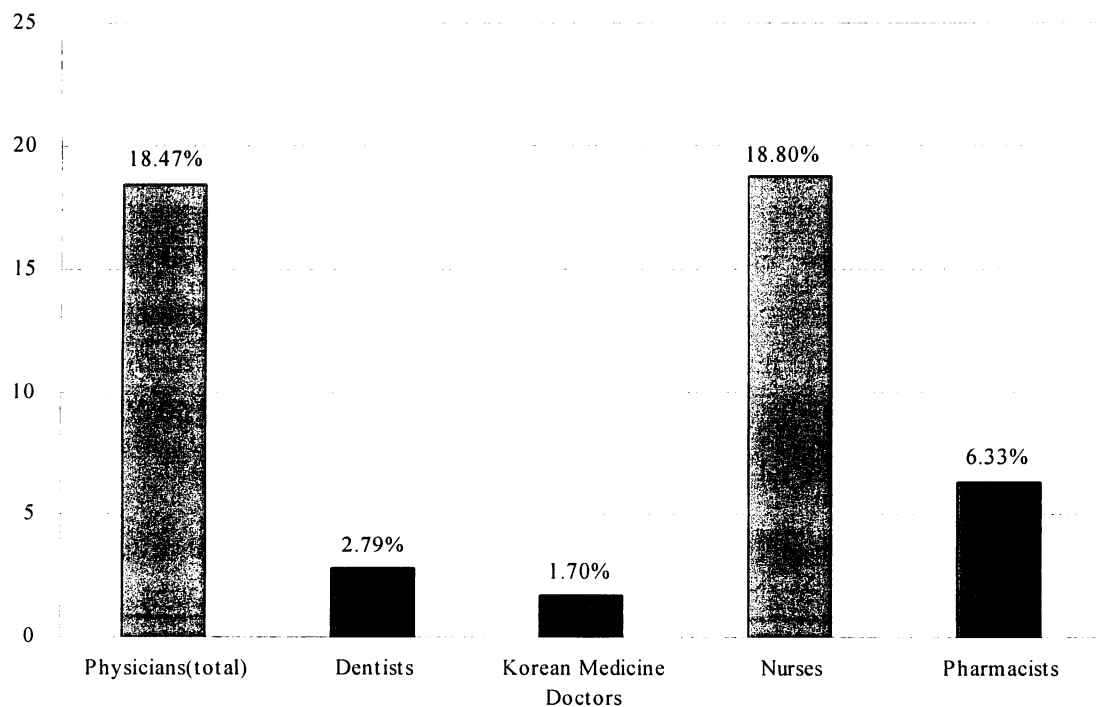
Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

2. Medical Personnel

There are 1,628 medical personnel in total (628 physicians, 85 dentists, 58 Korean medicine doctors, 641 nurses, and 216 pharmacists). Chart 22 shows the number of medical personnel per 10,000 population. With 18.80 nurses, 18.47 physicians, 6.33 pharmacists per ten thousand persons, the city is provided with more enriched medical resources compared to Seoul.

In the light of the number of citizens per medical personnel, there were 533 nurses per person, 1,580 pharmacists per person, 3,593 dentists per person and 5,886 Korean medicine doctors per person.

Chart 21. Number of medical personnel



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

3. Social Welfare Facility

According to the survey on poverty in Seongdong-Gu, the number of the poor was 17,476 persons, which was 5.1% of the population. That is, 2,699 households with only an older people, accounting for 0.8% of the population, 6,680 households with handicapped person, which is taken up 2.0%, 5,458 households receiving basic livelihood security (1.6%), and 2,637 households with only old couples (0.8%). The rest were two households with only children. At present, the Seongdong-Gu is implementing 'Health Project for Poor People' to raise the poor group-specific approach for medical service.

Table 11. Number of poverty

Poverty Group	Number	Percentage among the population
Household with only an older person	2,699	0.8%
Household with handicapped person	6,680	2.0%
Household receiving basic livelihood security	5,458	1.6%
Household with only older couples	2,637	0.8%
Household with only children	2	
Total	17,476	5.1%

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Based on the Seongdong-gu Health & Medical Plan 2005, there were 214 social welfare facilities for children, the old, the handicapped and so forth in Seongdong-Gu. It is reported that the average number of user per day in these facilities was 2,405 persons. At present, there are under construction three institutions for infant and child and 21 institutions for the old.

Table 12. Number of social welfare institutions

Institution	Number of institution	Number of user(per day)
Institution for infant and child	101	5
Institution for the old	101	800
Institution for handicapped person	1	300
Other Institution	11	1,300
Total	214	2,405

Source : Seongdong-Gu Health & Medical Plan. Seongdong-Gu. 2003~2006

There are 146 day-care centers in total (27 public centers, 86 private centers including individual and corporation, 2 workplaces, and 31 houses). The following table shows the number of day-care centers. As the female participation rate is increasing, the community needs more and more day-care centers. However, most residents in Seongdong-Gu still depend on the private facilities.

Table 13. Number of day-care centers

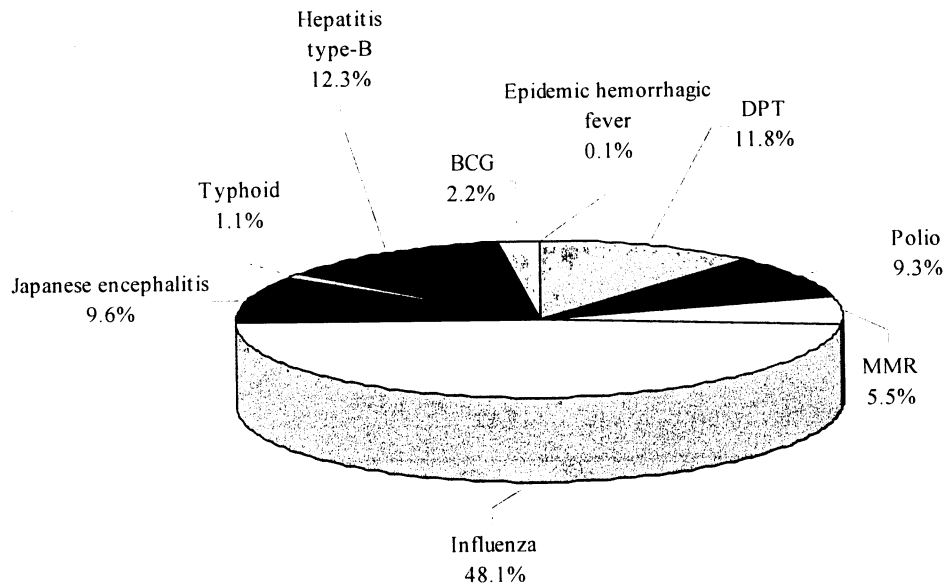
Types of day-care centers	Public	Private		Workplace	House
		Individual	Corporation		
Number of day-care centers	27	83	3	2	31

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

4. Immunization

Immunization services in Seongdong-Gu are primarily provided by the Public Health Center. Among the immunization services provided by the Public Health Center, Influenza is 48.1%, which is the biggest one. It is followed by Hepatitis type-B 12.3%, DPT 11.8%, Japanese encephalitis 9.6%, and Polio 9.3%.

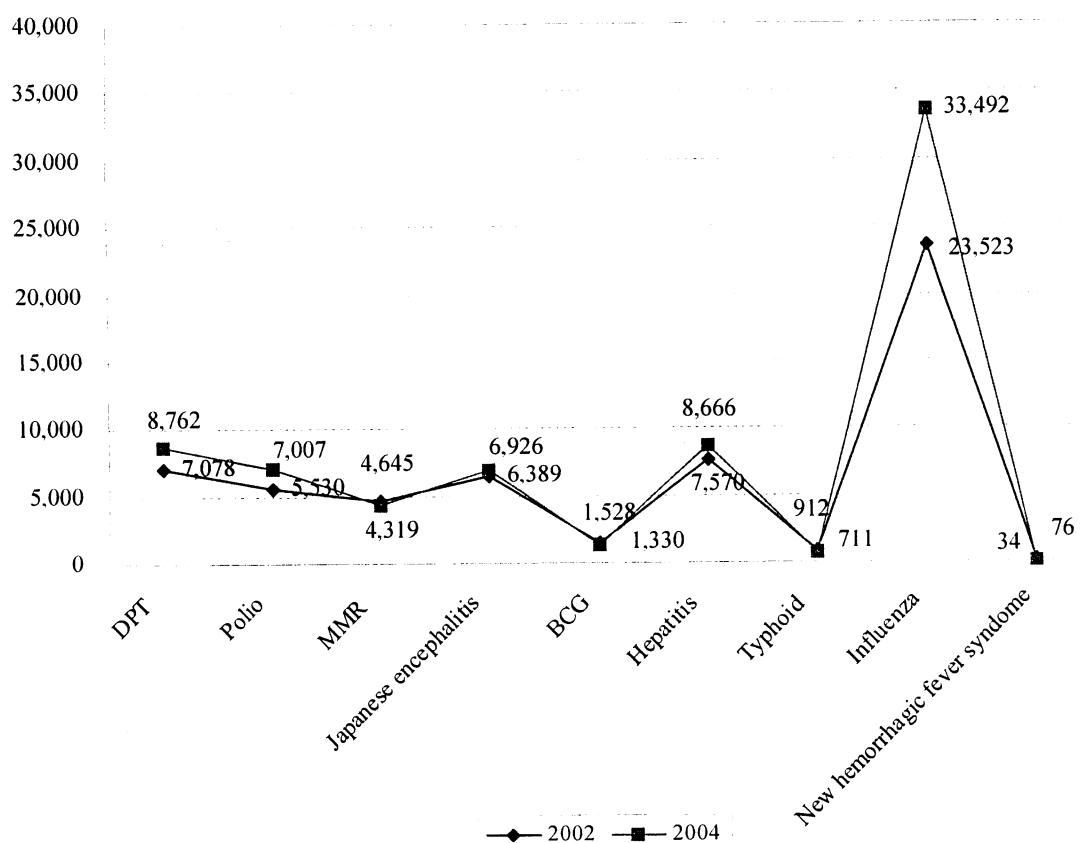
Chart 22. Types of immunization services



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The following chart shows the changes in the number of immunization between 2002 and 2004. There was an increase in the number of almost all immunization except MMR, BCG, Typhoid fever, and new hemorrhagic fever syndrome.

Chart 23. Rate of immunization services



Source : Medicine Monthly Report. Seongdong-Gu Public Health Center. 2003

5. Public Health Center Services

Seongdong-Gu has one Public health center and one Public health subcenter. According to the income-specific rate of using the Public Health Center, the households of the income less than 1 million (won) was 29.72%, 101 to 200 million (won) 28.95%, 201 to 300 million (won) 27.19%. There was a relative low rate (12.21%) in households of the income more than 300 million (won). The table 14 shows as the income is higher, the rate of using the Public Health Center is decreasing.

Table 14. Distribution of people to use the Public Health Center

Monthly income per household	No(%)	Yes(%)
1 million and under	29.72	62.79
1 - 2 million	28.95	71.05
2 - 3 million	27.19	72.81
3 million and over	12.21	87.79

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The table 15 presents the leading causes using the Public Health Center in Seongdong-Gu. Most residents of Seongdong-gu use the Public Health Center owing to cheap cost, accounting for 70.72%. 10.21% uses it due to easy access or close location. 10.21%, strong belief on medical services 5.43%, Good facility 1.68%, and kindness of official 1.38%.

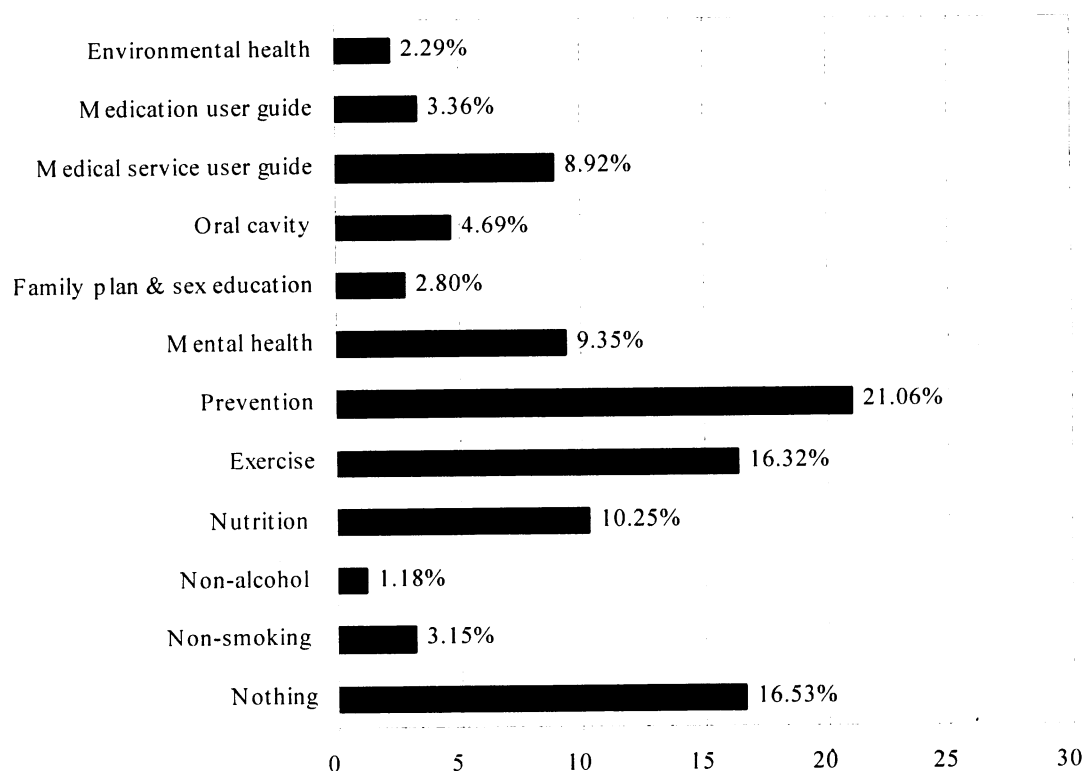
Table 15. Leading causes using the Public Health Center

Leading Causes	Percentage
Easy access(location...)	10.21
Cheap Cost	70.72
Strong belief on medical services	5.43
Good facility	1.68
Kindness of official	1.38
Other	10.58
Total	100

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The following chart shows the programs of Public Health Center demanded by users. Among these programs, the Prevention program was 21.06%, which was the highest demand of users. Followed by exercise 16.32%, nutrition 10.25%, mental health 9.35%, and medical service user guide 8.92%. There were additional programs which were related to oral cavity, drug use, non-smoking, sex education.

Chart 24. The Public Health Center programs demanded by users



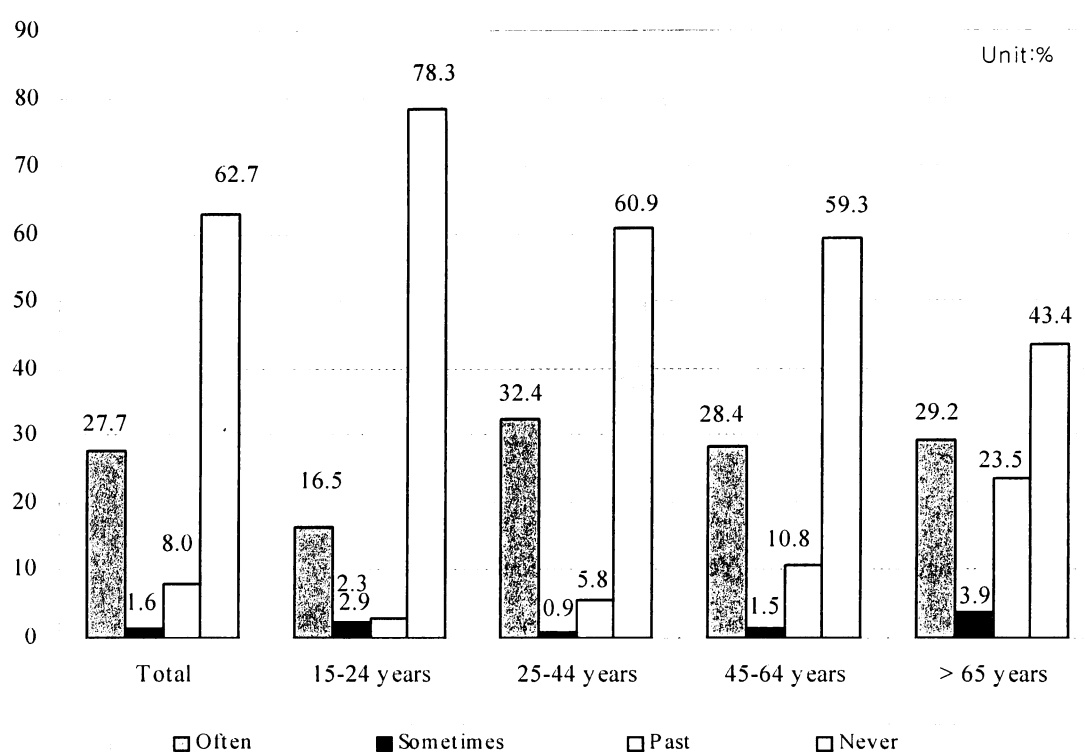
Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

IV. Lifestyle Indicator

1. Smoking

Smoking is the single most preventable cause of disease and death in South Korea. Among the population, 18.8% of aged 15-24, 33.3% of aged 25-44, 29.9% of aged 45-64 and 33.1% of age 65 and over was current smokers. The rate of previous smokers in Seongdong-Gu was the highest in the 'aged 65 and over' group and non-smokers accounted for 62.7% among the population. The Seongdong-Gu Public Health Center is implementing tobacco use prevention and control program to promote tobacco-free living and to reduce morbidity and mortality from tobacco use and exposure to second-hand smoke.

Chart 25. Prevalence of smoking



Source : Seongdong-Gu Health&Medical Plan. Seongdong-Gu Public Health Center. 2003~2006

In 2003, alcohol consumption per capita per day was surveyed. Most smokers (56.48%) had about 11-20 cigarettes a day and about 17% of aged 25-44 smoked 1 pack and more per day.

Table 16. Average consumption of current smoker per day

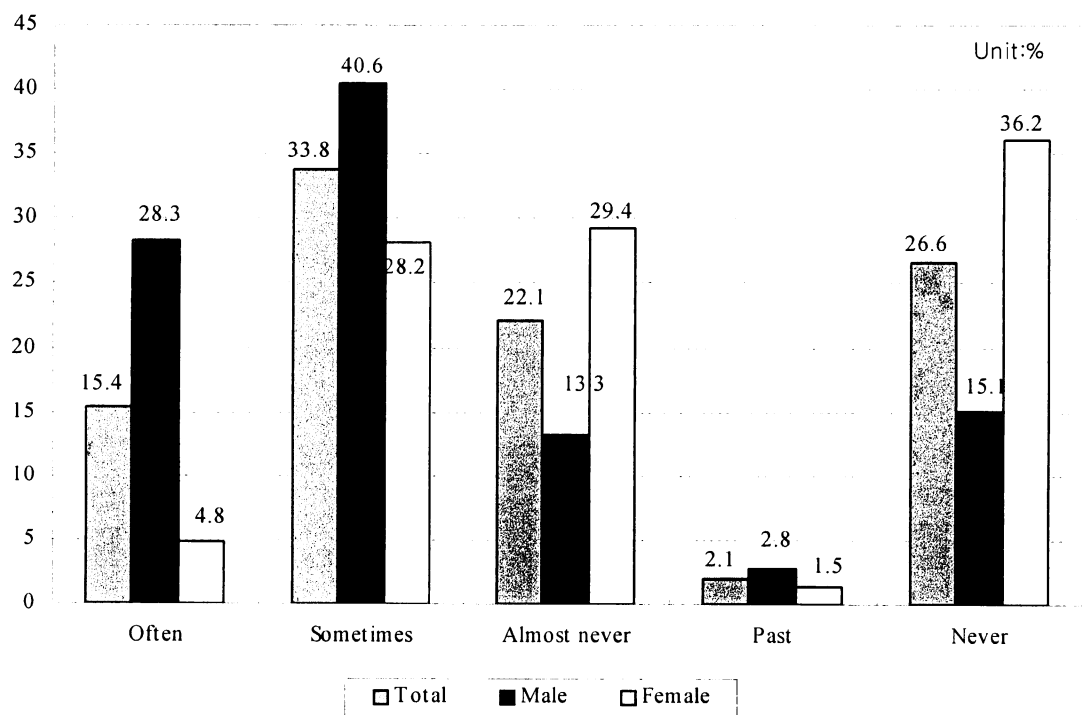
	Under 10 cigarettes	11-20 cigarettes	1 pack (20) & more
15-24 years	50.11	57.90	-
25-44 years	26.59	56.42	17.00
45-64 years	30.26	60.96	8.78
> 65 years	48.36	51.64	-
Total	32.38	56.48	11.03

Source : Seongdong-gu, Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

2. Alcohol Consumption

According to the statistics from the 'National Health and Nutrition Survey' in 2001, the rate of alcohol consumption of residents aged 15 and over increased to 69.8%. In addition to, the alcohol consumption of teenagers is increasing from 82.98% in 1998 to 86.0% in 2001. Seongdong-Gu residents have a higher tendency toward drinking than the national average. More males than females were current smokers. Excess alcohol consumption may increase the risk of chronic and be due to drunken driving. So, the Seongdong health service center has several health promotion programs to decrease the consumption.

Chart 26. Alcohol consumption



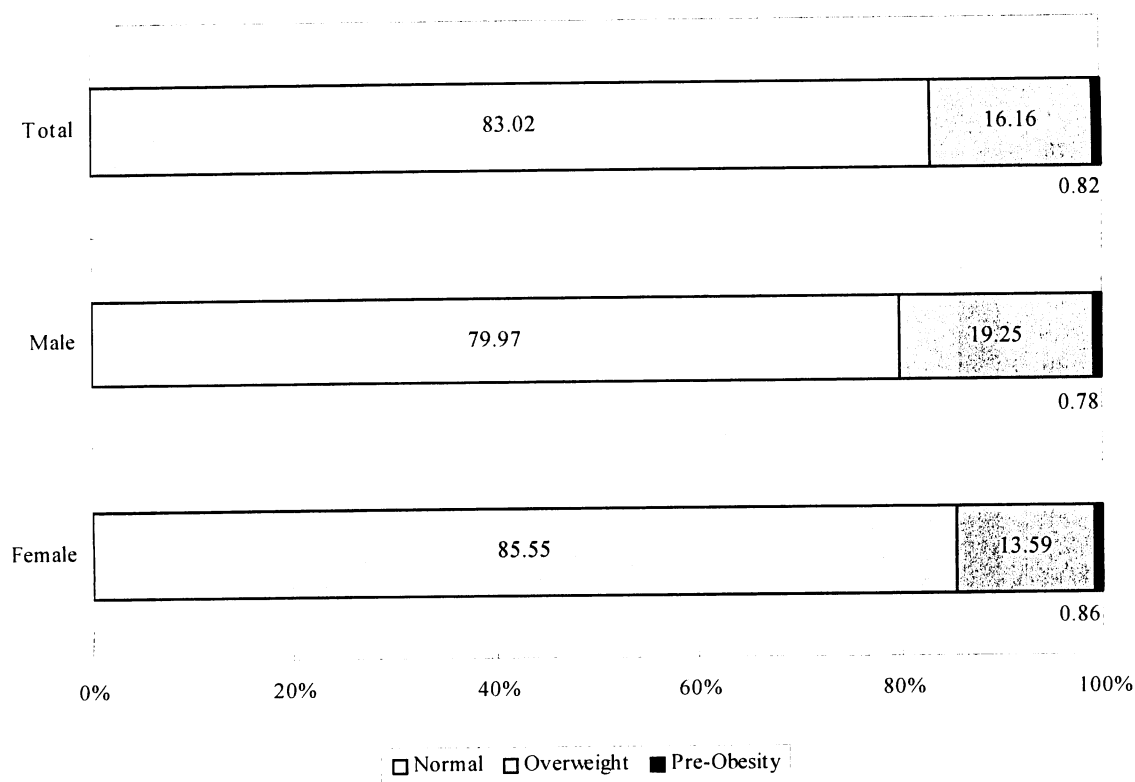
Source : Seongdong-Gu Health&Medical Plan. Seongdong-Gu Public Health Center. 2003-2006
National Health and Nutrition Survey. Ministry of Health & Welfare. 2001

3. Obesity

Body Mass Index is a measure of body fat based on height (kg) and weight (m) that applies to both adult men and women. It is closely associated with obesity and generally used to assess under-weight (18.5 and under), normal (18.5-24.9), over-weight (25-29.9), and risk for obesity (30 and over). The following chart shows the Body Mass Index of residents aged 15 and older in Seongdong-Gu.

In overweight, the percent of male is higher than that of female.

Chart 27. Body Mass Index (BMI)

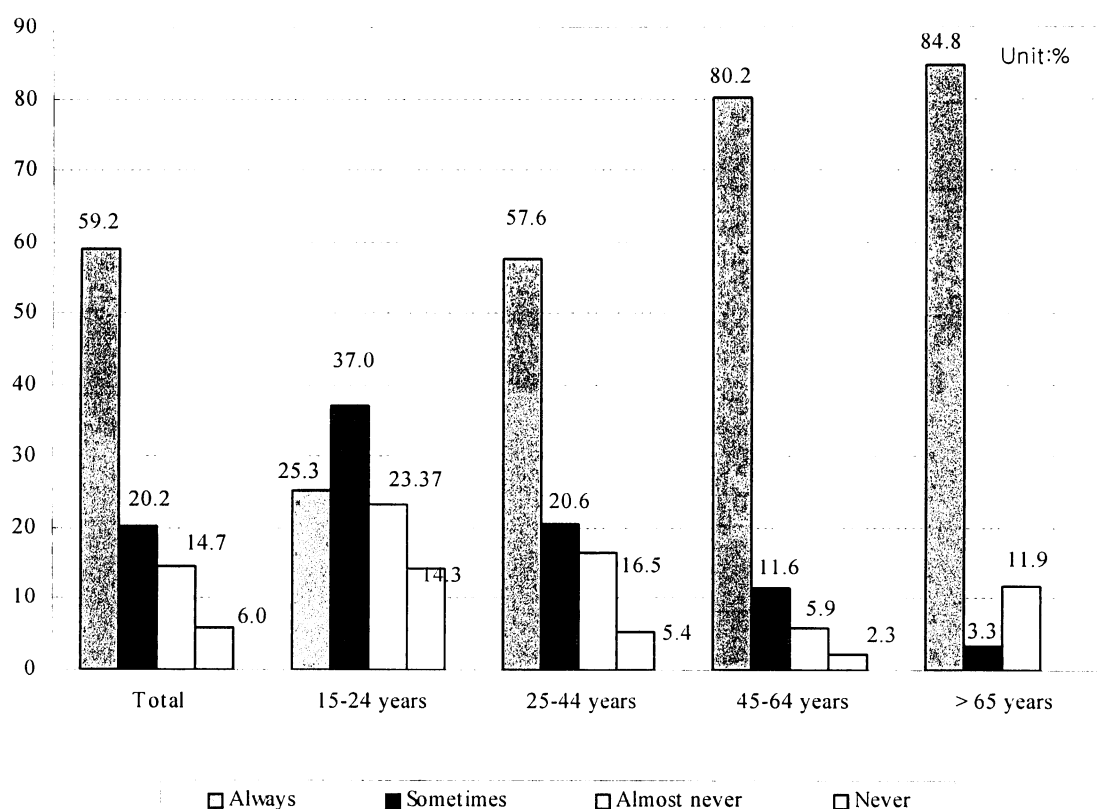


Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

4. Dietary Habits

Good dietary habits to have breakfast regularly or keep within the recommended amount of intake are closely related to good health. In 2003, based on survey on the life style of residents in Seongdong-Gu, 40.8% of residents were reported to have their breakfast regularly. Residents both aged 45-64 and aged 65 over had a tendency to have meals in the morning, accounting for 80.2% and 84.8% each. The rate was higher as age increased, especially 84.8% of 65 and older.

Chart 28. The percent of people to have breakfast

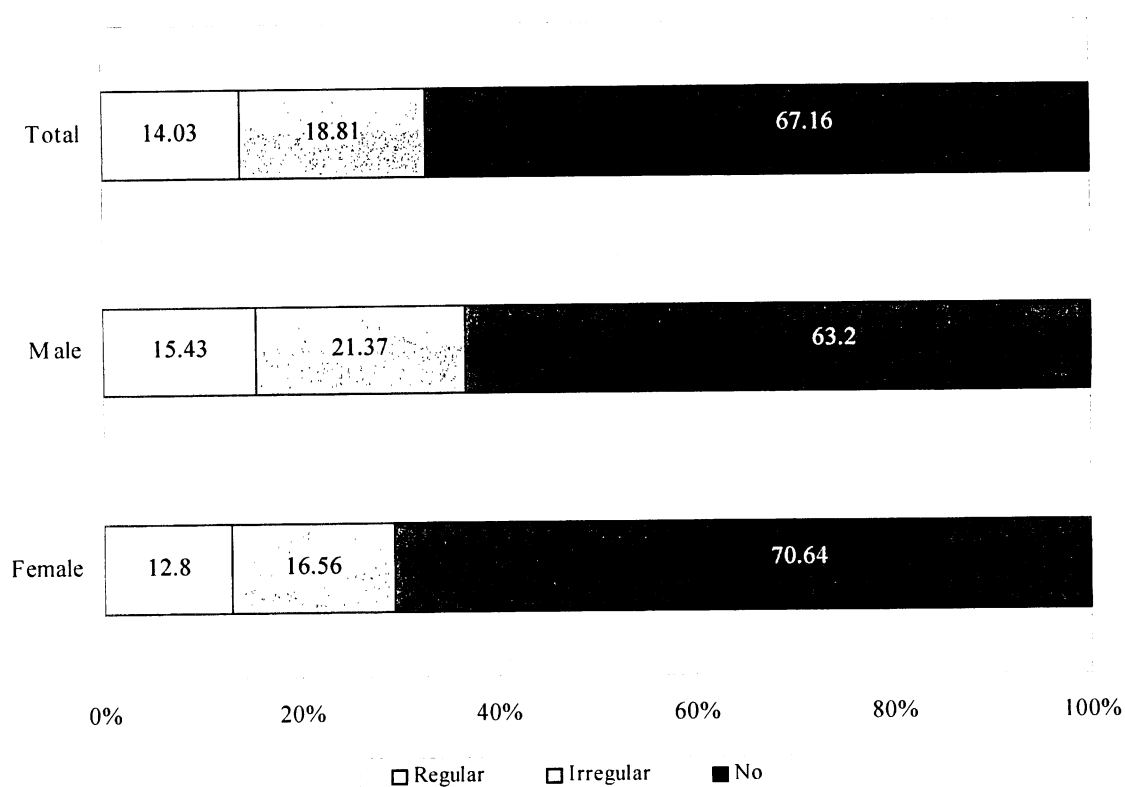


Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.06

5. Physical Activity

Both frequency and quantity is important for exercise to be effective. 'Regular' is defined as at least three times per week for at least 20 minutes and 'Irregular' means less than twice a week for at least 20 minutes. Most Seongdong-Gu residents show a physically inactive tendency. Only 14.03% of residents indicated that they exercise regularly.

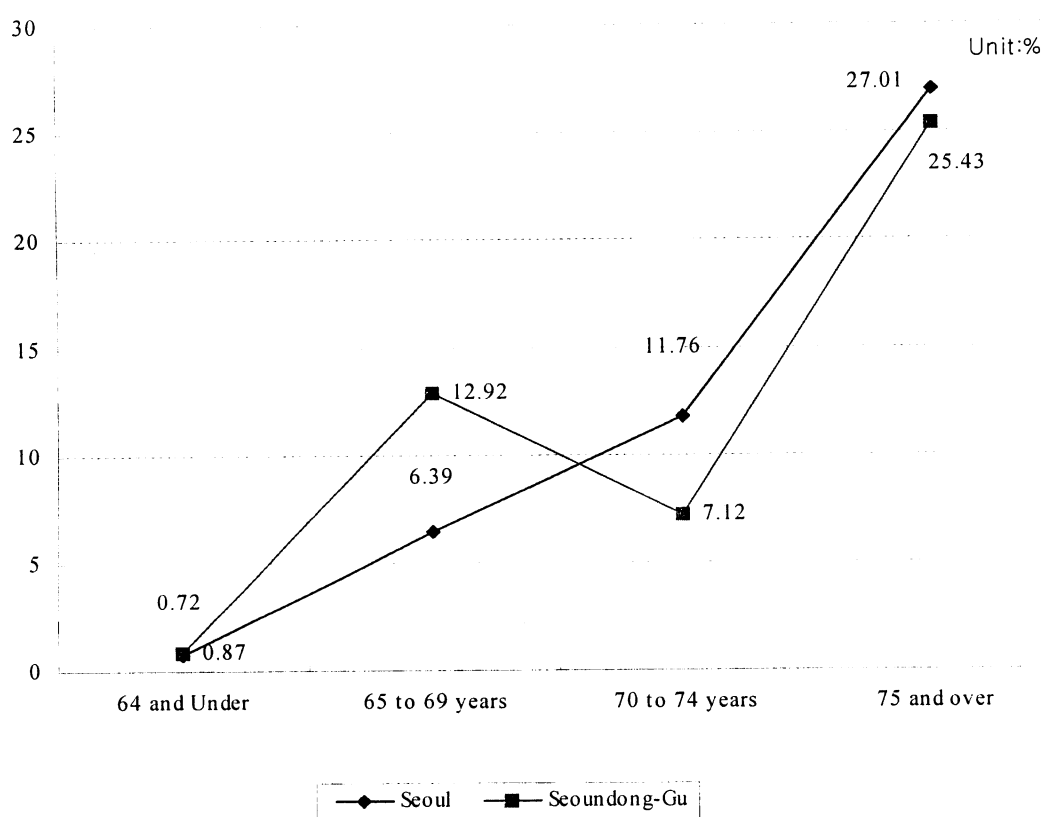
Chart 29. Prevalence of exercising



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

The degree of limit activity is an indicator related to the quality of life. The period of limit activity includes the days on bed, but not the hours on activity decrease. The following chart shows the percent of long-term limit activity in Seongdong-gu. As people are getting older, the rate of long-term limit activity is increasing. The aged 75 and over was 25.43%, which was the highest in Seongdong-Gu but lower than that of Seoul.

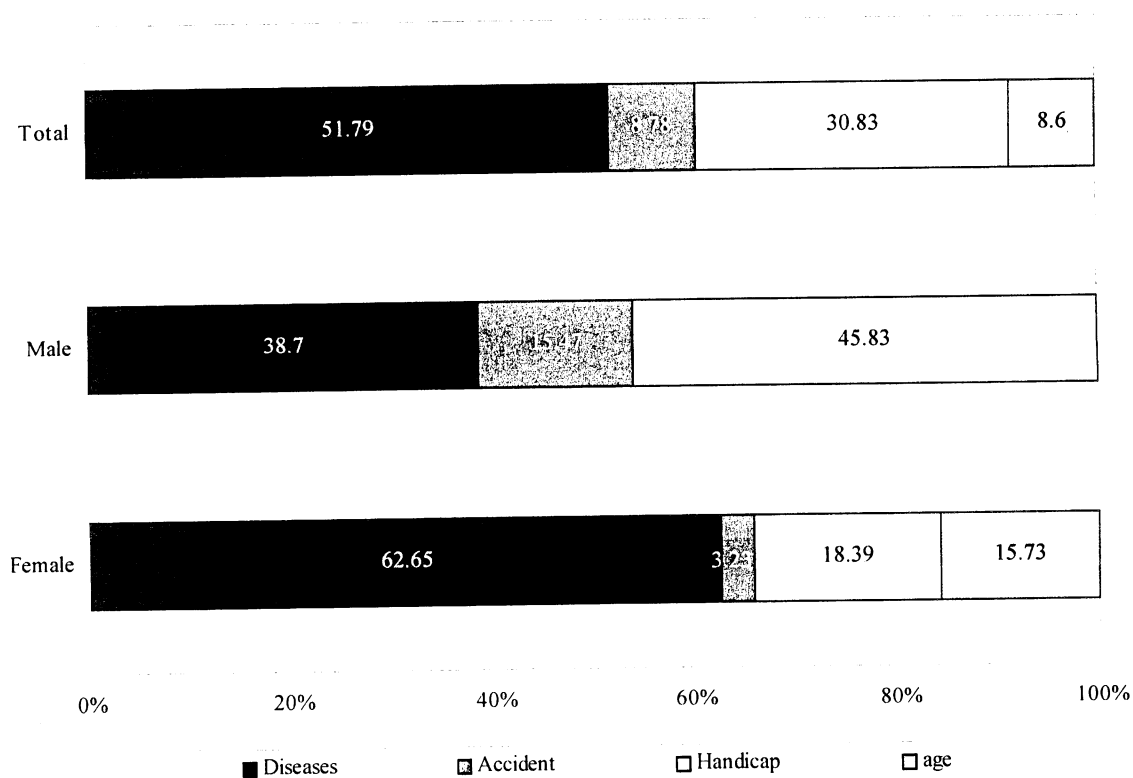
Chart 30. Percent of long-term activity limit



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

The main causes of long-term activity limit were diseases, handicap, accident, and age. Among these causes, diseases were 62.7% in female and handicap 18.39% and age 15.73%, whereas, the handicap accounted for 45.83% in male, diseases 51.79%, and accidents 15.47%.

Chart 31. Causes of long-term activity limit

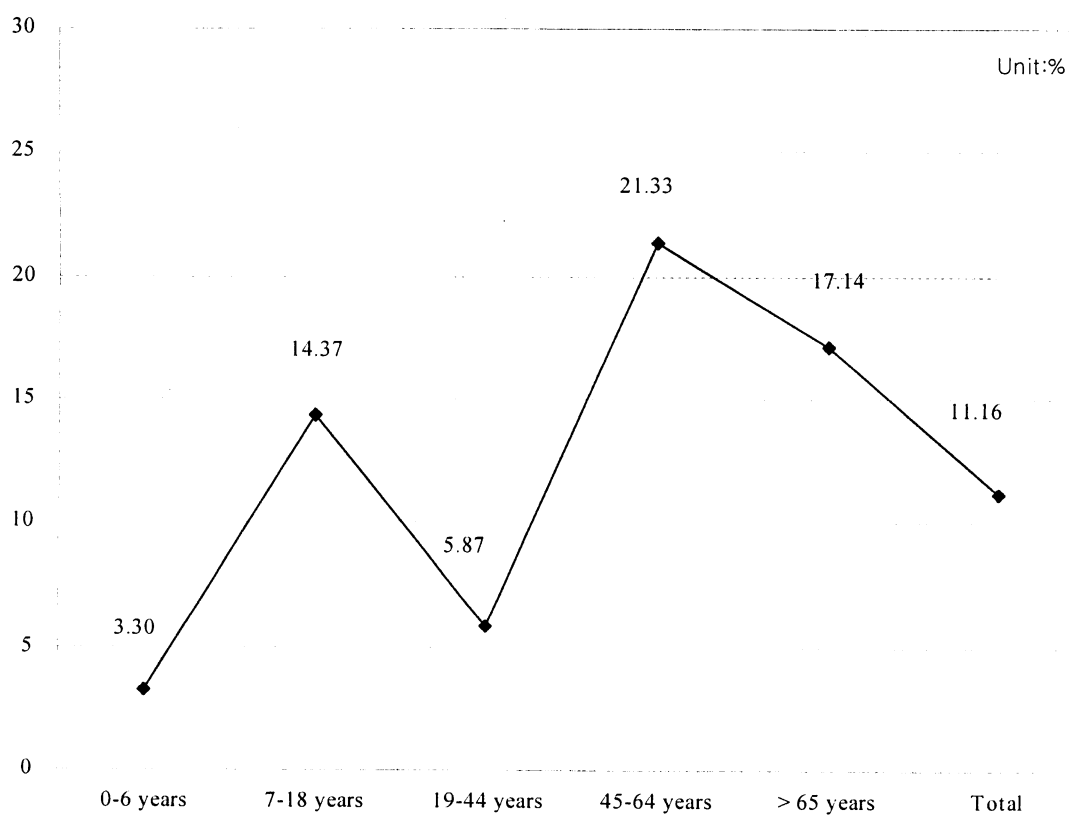


Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

6. Accident

According to the survey on total accidents in Seongdong-Gu, there were relatively high incidence(21.33%) of accidents in aged 45 to 64, but the incidence in the aged 64 and over decreased to 17.14%. The incidence of accident in adolescents was accounting for 14.37%.

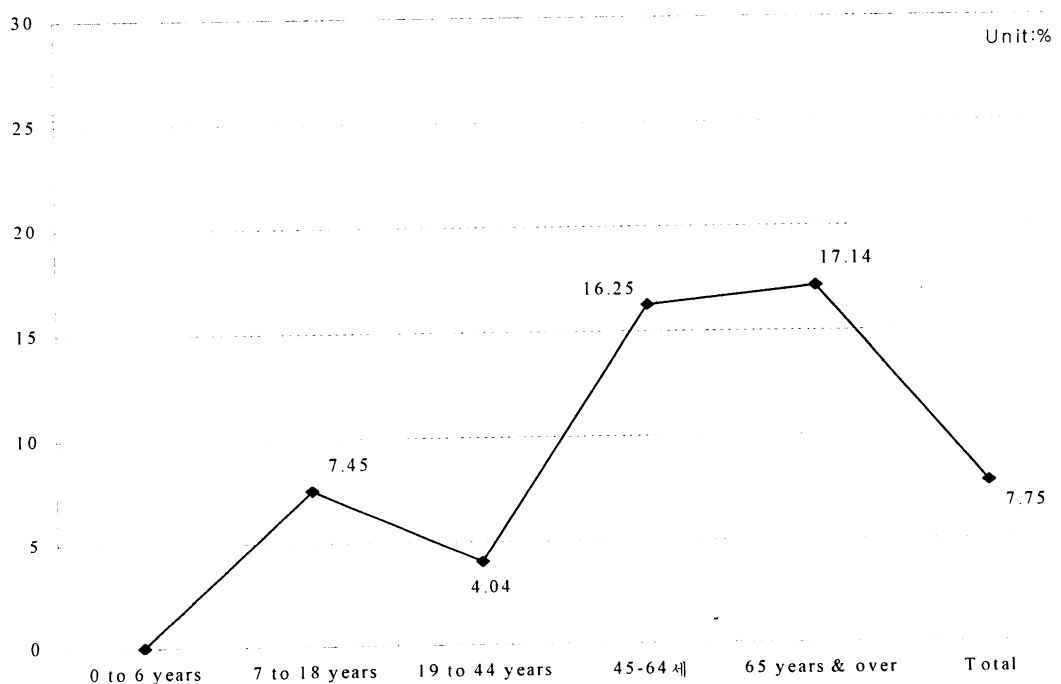
Chart 32. The incidence of total accidents



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

The chart 33 presents the age specific incidence of a traffic accident in Seongdong-Gu was at 17.14% in aged 65 and over, and 16.25% in aged 45 to 64, which was relatively high. Whereas, the population in less than 45 years showed a low rate.

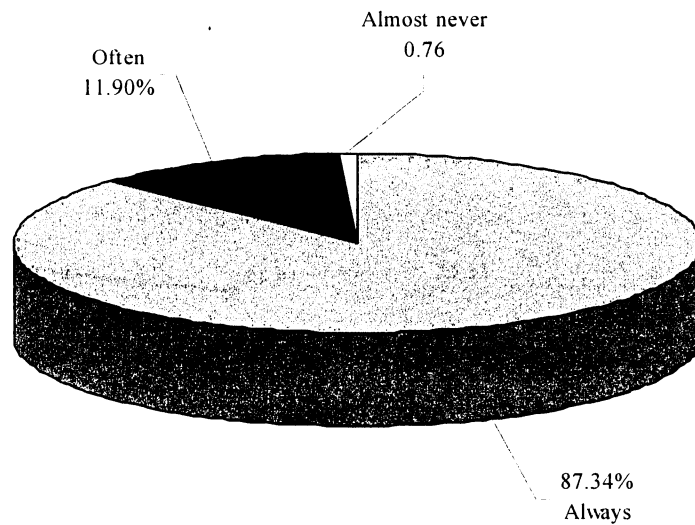
Chart 33. Incidence of traffic accidents



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

The following chart shows the percent of wearing a safety belt in Seongdong-Gu. 87.34% responded as 'Always' and 'often' was 11.9%. It shows the citizens know the importance of fastening a safety belt. The rate of 'almost never' was only 0.76% of the population.

Chart 34. Percentage of people wearing a safety belt



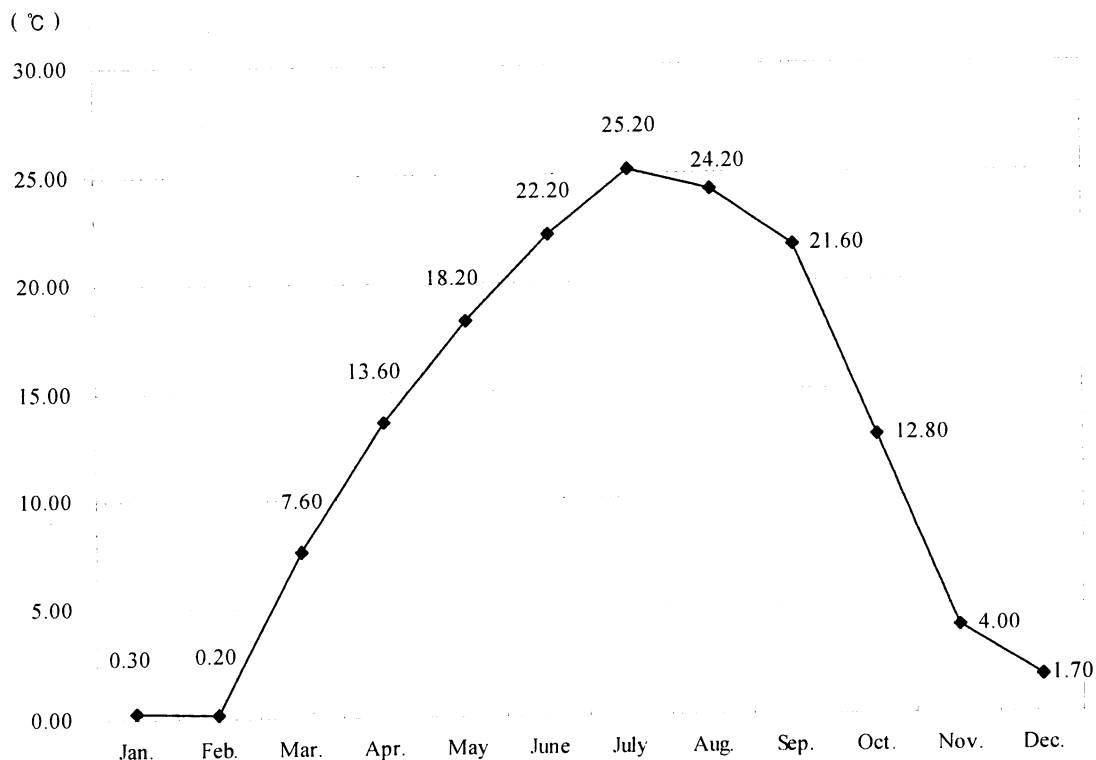
Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

V. Environment Indicator

1. Temperature and Precipitation

The variation of the annual mean temperature ranges from 10°C to 16°C except for the mountainous areas. The mean annual temperature of Seongdong-Gu is 12.9°C, which is lower than 11.8°C of Seoul. Temperatures in all seasons are somewhat (2~3°C) lower than those at the corresponding latitudes in eastern areas. Winter is bitterly cold and is influenced primarily by cold Siberian fronts. January is the coldest month. Summer is hot and humid due to the maritime pacific high. August is the hottest month.

Chart 35. Temperature

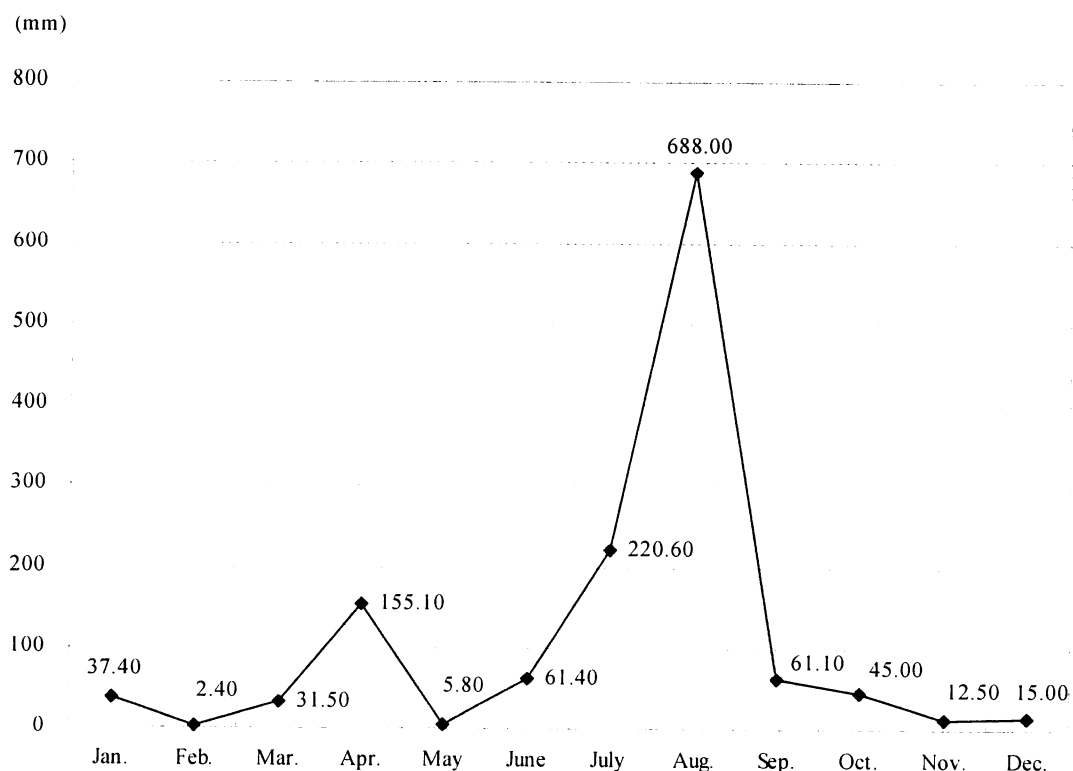


Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Seongdong-Gu, one of the municipalities of Seoul Metropolitan, which is located in the center of the Korean Peninsula has an unique climate called 'Heat Island' such as other urban areas. Dome of warm polluted air covers the urban area and in which the temperature is higher than in the surroundings. It appears as an 'island' in the pattern of isotherms on a surface map.

Annual precipitation is about 1,300mm in the central region. More than half of the total rainfall is concentrated in summer, while precipitation in winter is less than 10 percent of the annual total.

Chart 36. Precipitation



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

2. Air Pollution

According to the statistics in 2003, the mean levels of some selected air pollutants such as SO₂, CO, NO₂, Dust, O₃ were somewhat lower than the air quality standards, so not much concerned in Seongdong-Gu. However, the level of dust of Seongdong-Gu shows the higher figure than both Seoul and the environmental standard. Air pollution should be continuously monitored and controlled due to the increasing number of automobiles and emissions from industries.

Table 17. Annual mean of air pollutants

Air quality standard	SO ₂ (ppm/year)	CO (ppm/8hour)	NO ₂ (ppm/year)	Dust (μg/m ³ /year)	O ₃ (ppm/8hour)
Environmental Standard	0.02	9.0	0.05	70	0.06
Seoul Standard	0.01	9.0	0.04	60	0.06
Seongdong-Gu	0.005	7.0	0.036	76	0.014

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

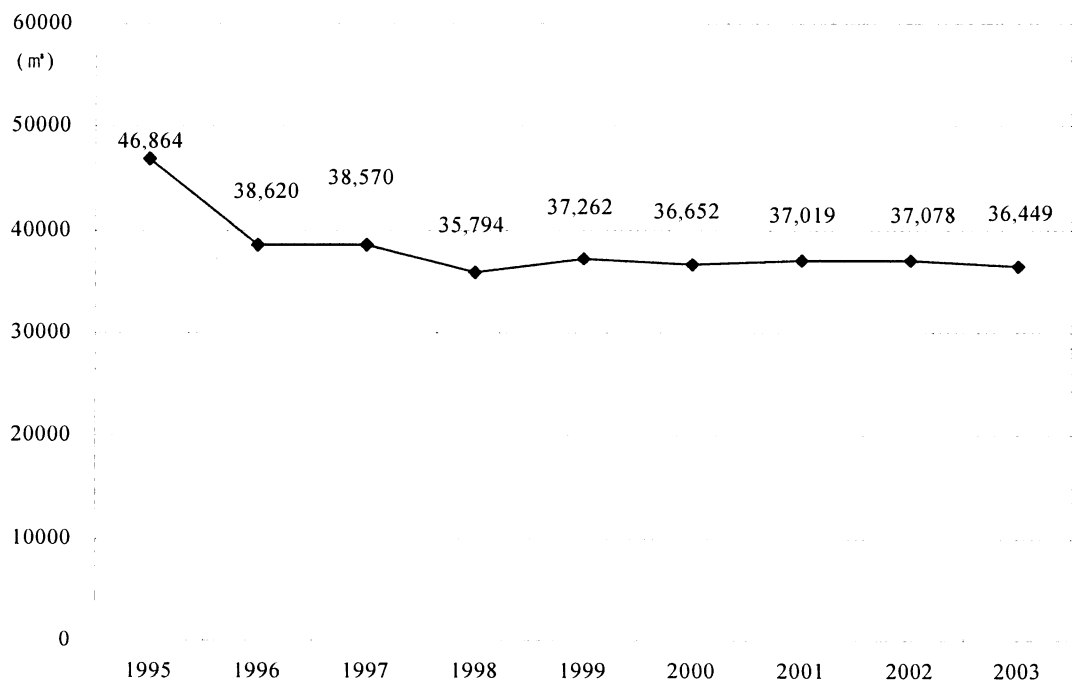
3. Water Supply and Consumption

In Korea, more than two third of annual precipitation is concentrated in summer and flowed into the ocean as it rains due to steep mountain. 12% of the national still remains not to provide tap water. To solve the shortage of tap water, the government is nationally building a 'Wide Water Provide System' and each of local government is promoting to reduce waste.

Ttukseom Water Purification Plant offers water to people of five districts including Seongdong-gu in Seoul. It has a historical importance as the first modern purification plant built in Seoul.

The following graph shows the amount of yearly supplied water from 1995 to 2003 in Seongdong-Gu. There were no distinct changes in water supplied since 1996. In 2003, public water system supplied a total of 36,449,000 m³/year.

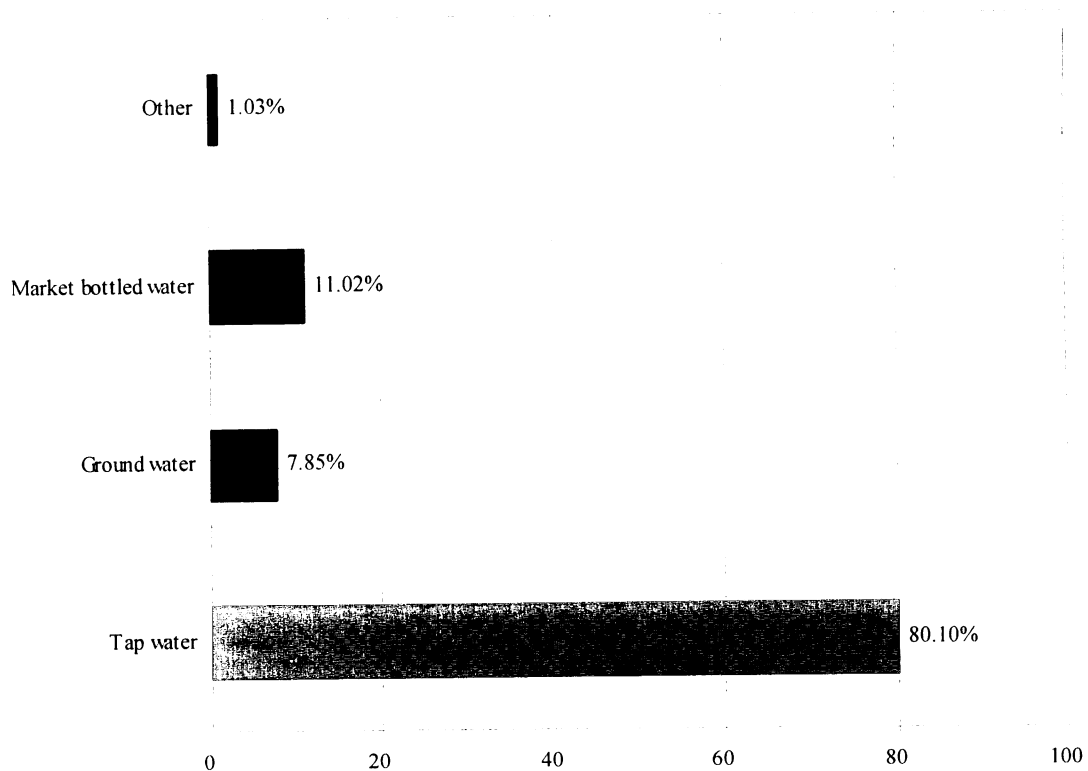
Chart 37. Amount of supplied water



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Among the amount of water supplied to the city, 80.10% is tap water. Followed by market-bottled water 11.02% and ground water 7.85%. The following chart shows the percent and types of drinking water.

Chart 38. Types of drinking water



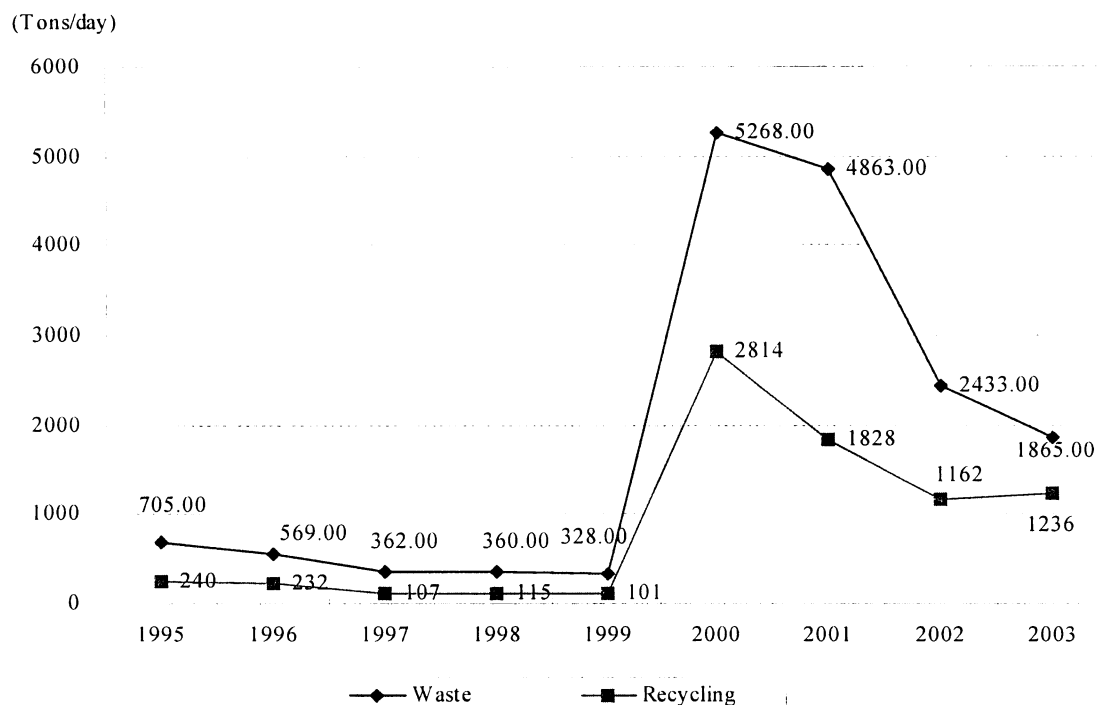
* Other : Well, Pump, temporary tap water, etc

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

4. Waste Management

According to the statistics in 2003, the amount of waste produced in Seongdong-Gu is gradually decreasing after 1995. In 1995, a regulation that requires all households and businesses to buy standardized district-specific waste bags, which facilitate waste recycling, was passed. As the regulation is getting settled, an increase in the amount of recycled waste is observed for household, commercial, and construction waste.

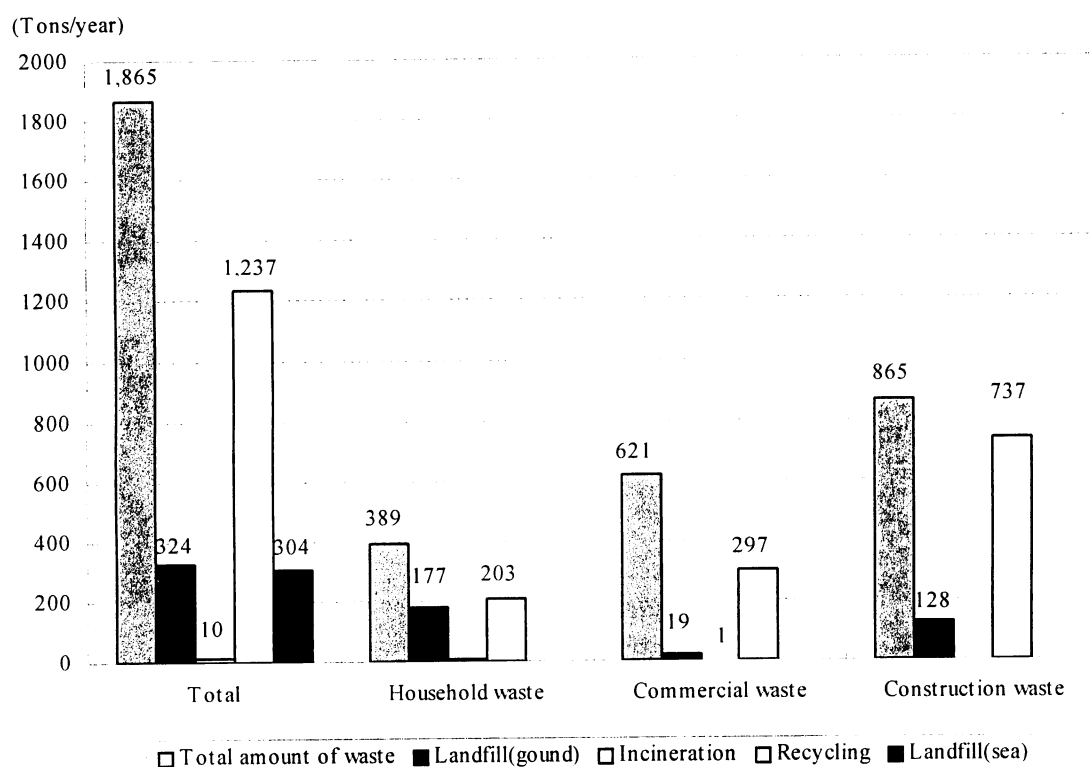
Chart 39. Amount of Waste Produced & Recycling per day



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The following chart shows the amount of waste, which was recycled, burned and dumped into landfill sites. Of the domestic waste produced in 2003, about 20.8% was household waste, 33.1% was commercial waste and 46.1% was construction waste.

Chart 40. Waste Management



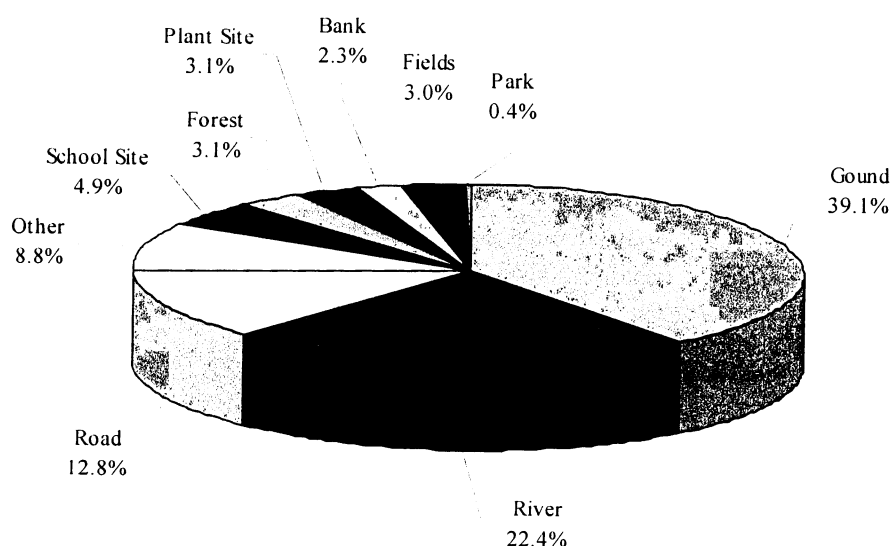
Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

5. Green Space

The main slogan of Seongdong-gu government is making Seongdong become the 'Riverside city of dreams and hopes' and one of its major seven projects of Seongdong-gu this year is establishing the infra-structure of the riverside city. The CheongGyeCheon stream, which used to flow through Seoul, was covered in 1960s to make room for roads. Now the Seongdong Government is restoring the CheongGyeCheon stream to revive the old image of the city. The project is due to be completed by this year. Seongdong-Gu is becoming greener and greener.

The total area of Seongdong is 16.84km², which is about 2.8% of that of Seoul. The ground which is 6.59km² occupies about 39.1% of the total area, river (3.78km²) 22.4%, and road (2.16km²) 12.8%.

Chart 41. Distribution of the total area



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

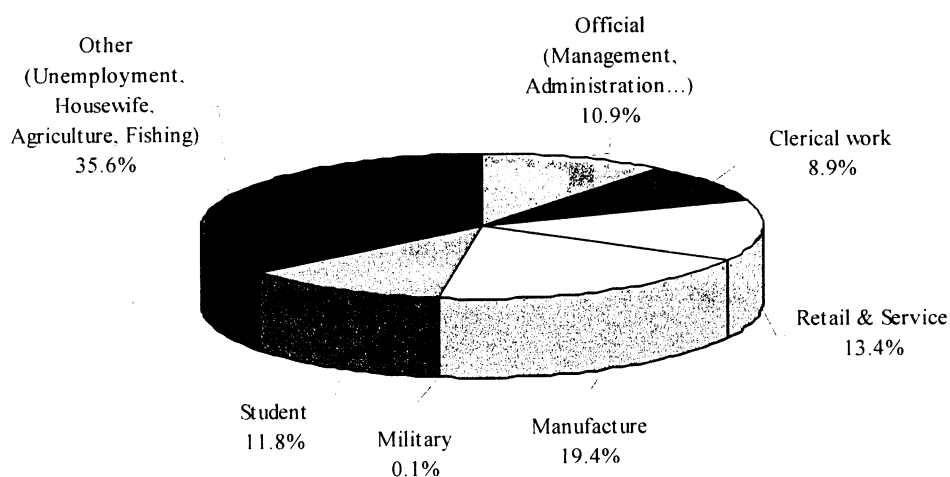
VI. Socioeconomic Indicator

1. Household Economy

Seongdong-Gu is a sub-center functioning as transportation, economy, housing in Seoul capital city. Many small enterprises are concentrated in the east of Seongdong-Gu and the north of Seongdong-Gu is classified as the center of car market in the Seoul.

Based on the survey on occupation of residents in Seongdong-Gu, the percent of others including unemployment, housewife and agriculture & fishing were 35.6%, which was the highest. It was followed by 19.4% manufacture, 13.4% retail & service, 11.8% student, and 10.9% official. A few people engaged in clerical work (8.9%) and Army (0.1%).

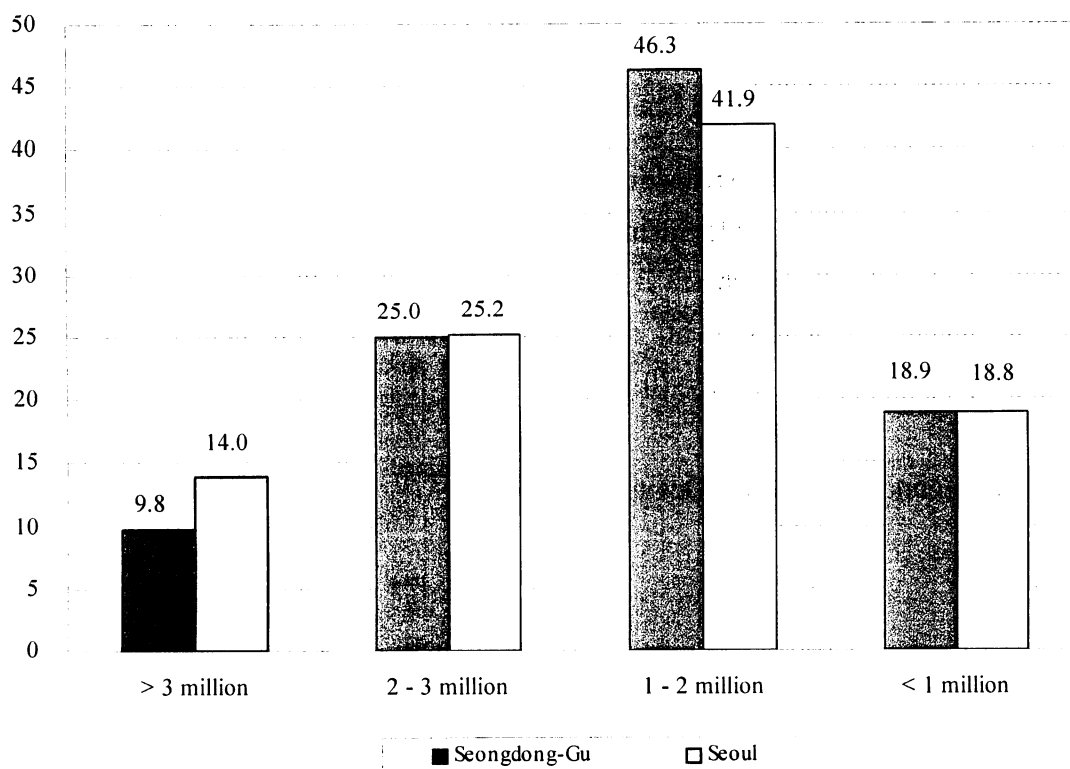
Chart 42. Economic activity(Occupation)



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Most of Seongdong-Gu's households earn between 1 and 2 million won (US \$10,000.00-20,000.00), followed by 25% of households which have an average monthly income between 2 and 3 million won (US \$20,000.00-30,000.00).

Chart 43. Monthly average household income



Source : Seongdong-Gu. Seoul Survey. Korea Institute for Health and Social affairs. 2002.6

2. Poverty

The population receiving 'basic livelihood security' is considered 'poor' by the Seongdong-Gu government. The eligibility is defined by the monthly household income and the number of persons living in the household. For instance, if a household has three persons, a minimum monthly income that the household receives from the government is 838,796 won. A total of 3,606 households and 6,498 persons received 'basic livelihood security' in Jan. 2005, which is about 2.3% of the total population. The near poor are the households having income less than 120% of minimum living standard (for example, 918,000won for household with 3 persons, compared to 838,796 of 'basic livelihood security for household with 3 persons'), but they still remain not to have any benefit from the government.

Table 18. Number of Poverty

Poverty Group		Number
Total	Household	3,606
	Person	6,498
Basic livelihood security	Household	3,462
	Person	6,192
The near poor	Household	144
	Person	306

Source : Seongdong-Gu. Annual Report. Seongdong-Gu Public Health Center. 2005. 1

The economically active population of Seongdong-Gu was about 238,797 persons in 2003, which account for 69.4% of the population. While, the economically active population of Seoul was about 4,992,000 persons, 62.1% of the population. Compared to the figure, male was about 70.2% of the population, female 68.6%. There is no distinct difference between the gender groups.

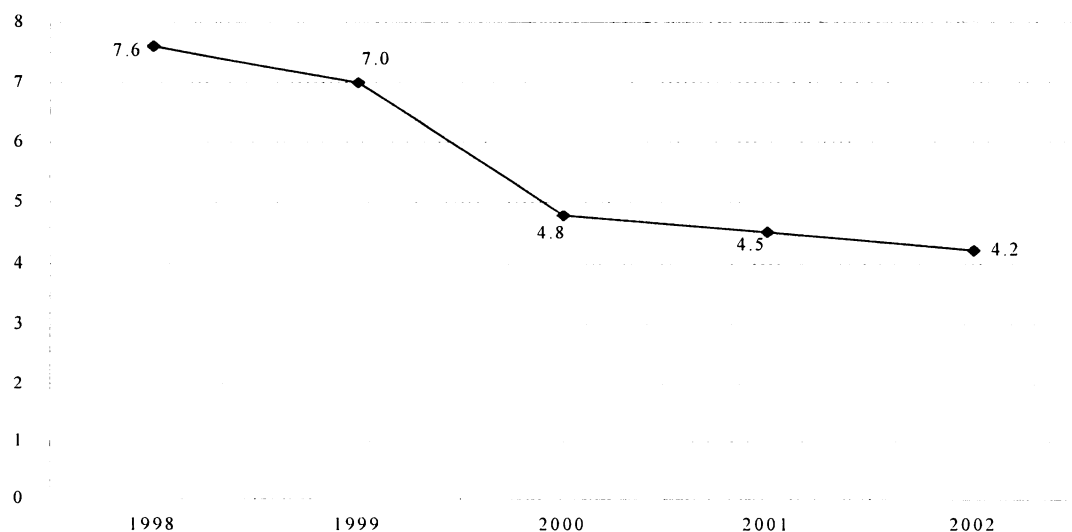
Table 19. Economically active population

Gender	Number	Percentage
Male	121,623	70.2
Female	117,174	68.6
Total	238,797	69.4

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The unemployment rate is on a gradual decrease since the dramatic rise in 1998 during the economic crisis, when the unemployment rate once rose to almost 7.6%. According to the statistics in 2003, the unemployment rate was 4.2%, which was almost the same figure, compared to that of Seoul.

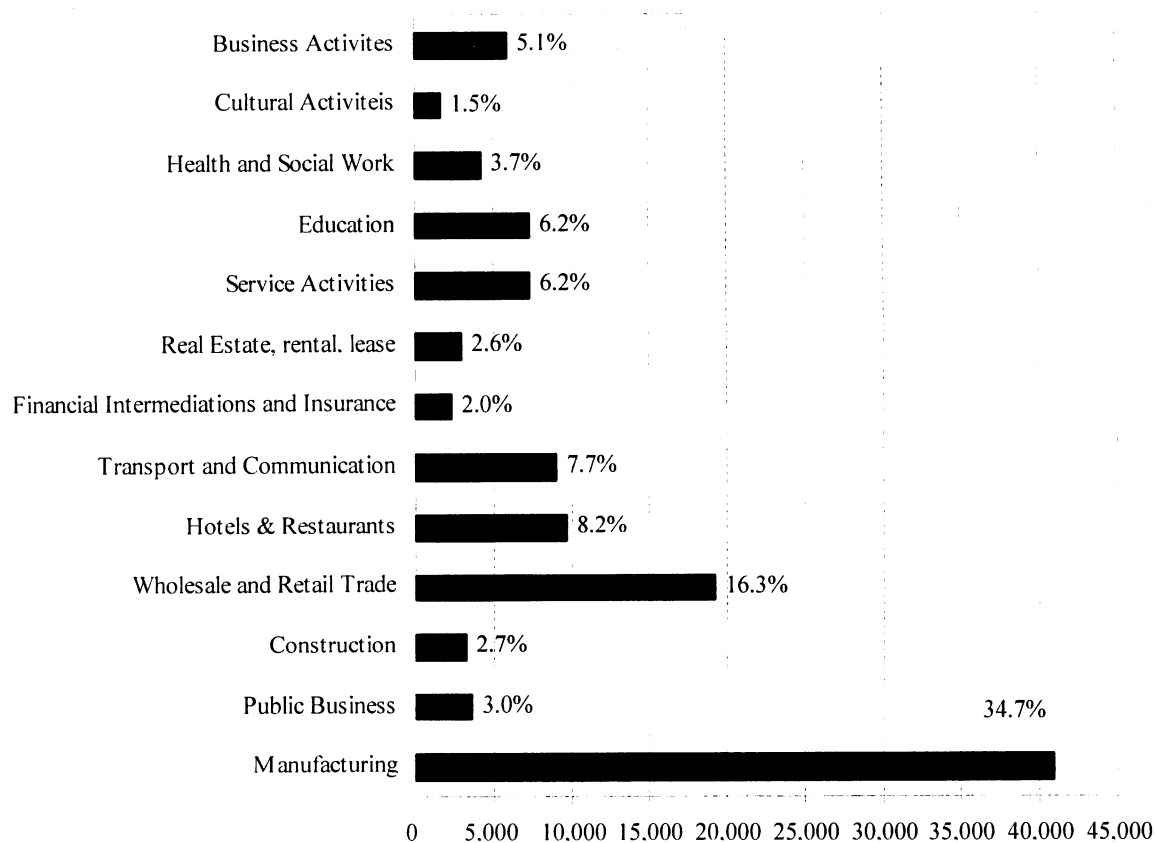
Chart 44. Unemployment rate



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

Seongdong-Gu provides access to a large variety of industries, ranging from wholesale and trade, to real estate, to construction, and to manufacturing. Up to the end of 2003, among all the employed population of Seongdong-Gu, 34.7% were engaged in the 'manufacturing' industry, 19.8% in 'wholesale and retail trade', and a few people are engaged in the hotel and restaurants, transport and communication, education and service activities.

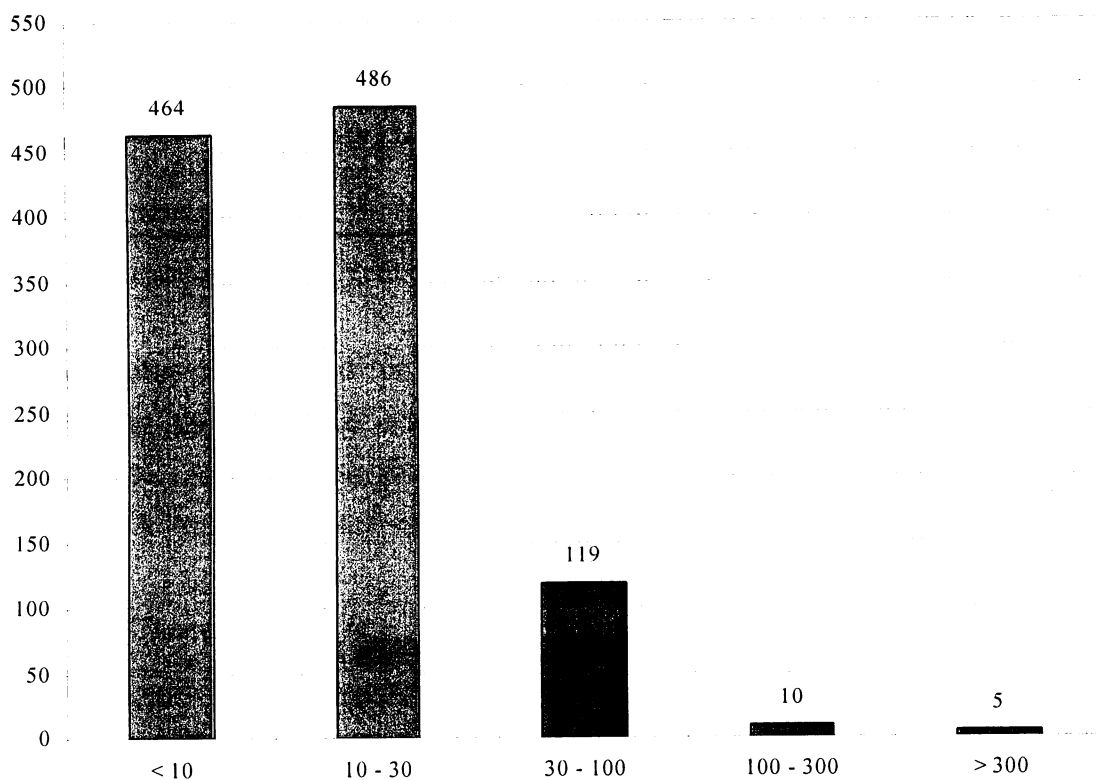
Chart 45. Industry structure



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

There are a total of 1,084 industries in Seongdong-Gu. Small enterprises where 10 to 30 employees are engaged in were 486, which was relatively high. Most of these industries were located in east districts. Followed by 464 workplaces (less than 10 employees), 119 corporations (30 to 100 employees), 10 companies (100 to 300 employees), and 5 companies (more than 300 employees).

Chart 46. Number of industries by the range of employee



Source : Seongdong-Gu registered industry data. Seongdong-Gu. 2003

Total registered foreign residents in Seongdong-Gu were 22,153 persons. The number of registered foreign workers in 2003 were 4,561 persons, 1.3% of the population. The figure will be bigger if illegal foreign labors are included.

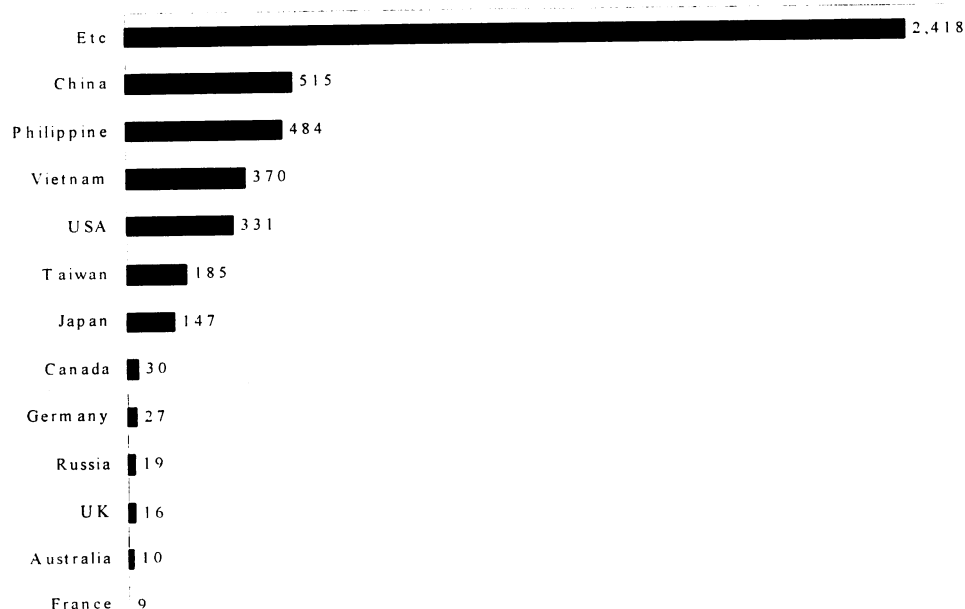
Table 20. Foreign labor force

Seongdong-gu Population	Percentage of Foreign Worker		
	Total	female	Male
343,929	4,561(1.3%)	2,196(1.3%)	2,365(1.4%)

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The workers from China were 515 persons, which made up the largest contribution, were followed by the Philippine 484 persons and Vietnam 370 persons. Foreign workers from the USA accounted for 331 persons.

Chart 47. Number of foreign workers



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

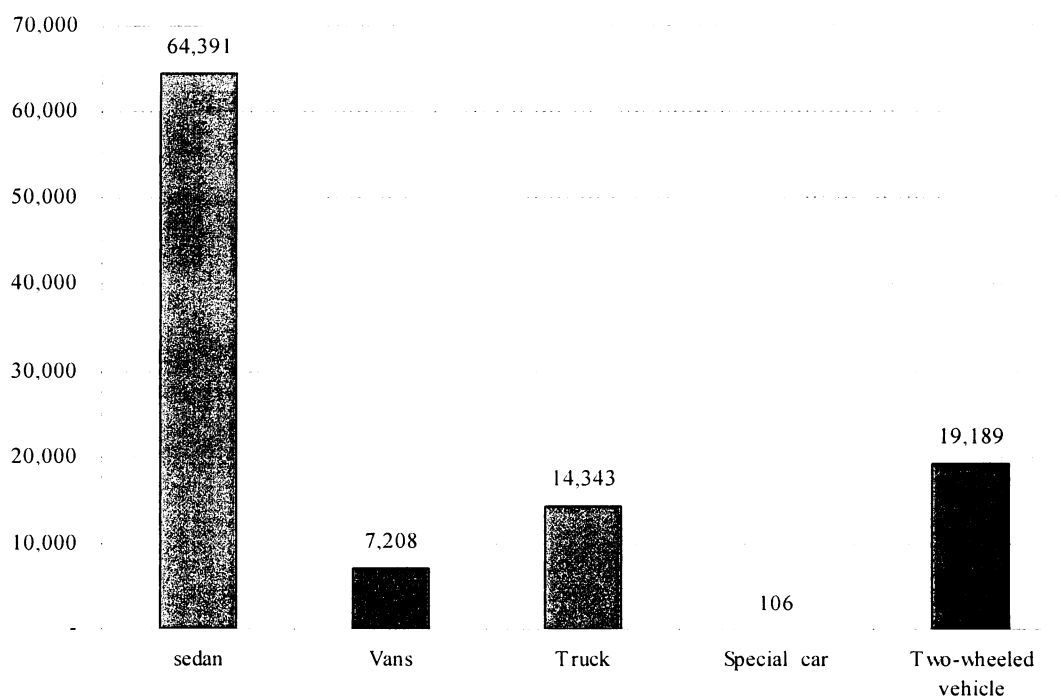
2. Transportation and Communication System

Used Car Dealing Center is located at in Janghanpyong Seongdong-gu and it is the largest one in Korea; with 64 trade stores and 608 related companies, and 110 used car are traded a day.

Seongdong-gu operates "Used Car Registration Office" in Janghanpyong trade center to help transactions of ownership and issuing admission.

The number of registered motor vehicles is increasing in Seongdong-Gu as shown in the following bar chart, while the number of public city buses has been declining. In 2003, a total number of 105,237 motor vehicles were registered in Seongdong-Gu. This number included privately owned, commercial and government vehicles. The main type of vehicles in Seongdong-Gu was the Sedan, which made up to 61.2%.

Chart 48. Number of registered vehicles



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The following table shows the number of subscriber in 2003. The total number of 237,428 households were registered for telephone and computer services in three branches. A total of 65,420 subscribers for business use were reported, compared to 237,428 for private use.

Table 21. Communication system

Location	Number of the circuit	Number of the subscriber			Public Phone
		Total	Business	Private	
Kwangjin-Gu	149,394	113,718	23,440	90,268	3,018
Sungsu-dong	144,323	102,894	26,991	75,903	-
Haengdang-dong	123,923	86,246	14,989	71,257	-

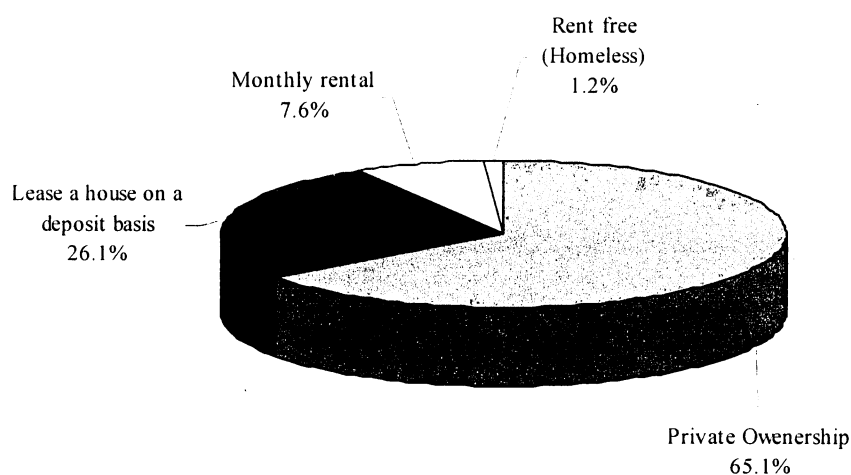
Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

4. Housing

The house provision rate of Seongdong-Gu has increased up to 75.7% in 2003. It is reported that about 65.1% of the population lived in their own house, followed by those who lease a house on a deposit basis. Among the population, homeless accounted for 1.2%.

In an effort to solve the shortage in housing, Seongdong-Gu is planning to reconstruct old (more than 20 years), low-story apartment buildings into new, high story apartments and establish and implement new housing plans until 2007.

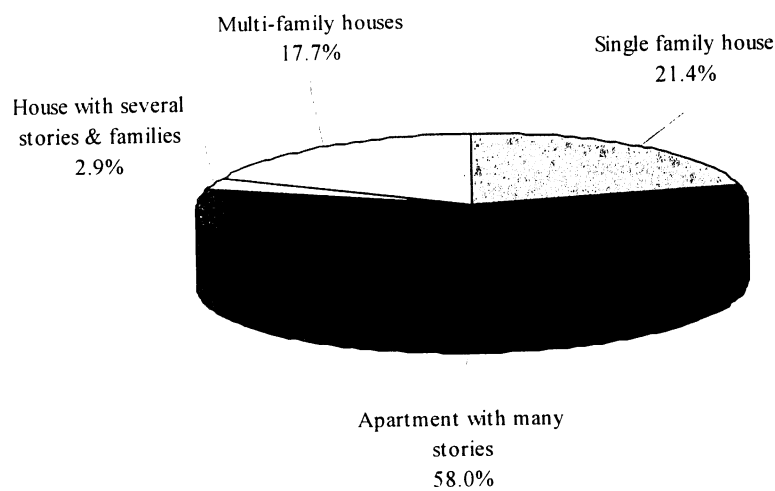
Chart 49. Living arrangement



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

In 2003, the major type of housing in Seongdong-Gu was high-rise apartment complexes, which made up 58% of Seongdong-gu accommodation, followed by single-family houses, which account for 21.4%. The type of multi-story houses was about 17.7%.

Chart 50. Types of housing



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

5. Education System

There were a total of 100 schools in Seongdong-Gu, which consisted of 13 Graduate schools, 2 Colleges (1 University), 6 High schools, 10 Middle schools, 16 elementary schools and 53 Pre-schools. At present, the Seongdong-Gu government is building 9 schools, which are 4 elementary schools and 5 high schools. The number of schools in Seongdong-Gu is increasing.

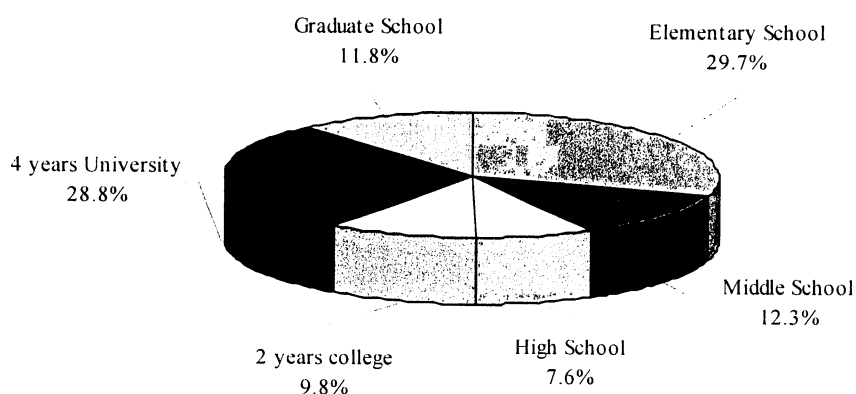
Table 22. Number of Schools

	Total	Pre-school	Elementary School	Middle School	High School	College	Graduate School
Current schools	100	53	16	10	6	2	13
Under construction	9		4		5		

Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The number of students in Seongdong-Gu was 80,929. Among the student population, there were 24,009 students in the elementary schools and 23,294 students in University. Five high schools are underway to build, so the number of students is expected to increase.

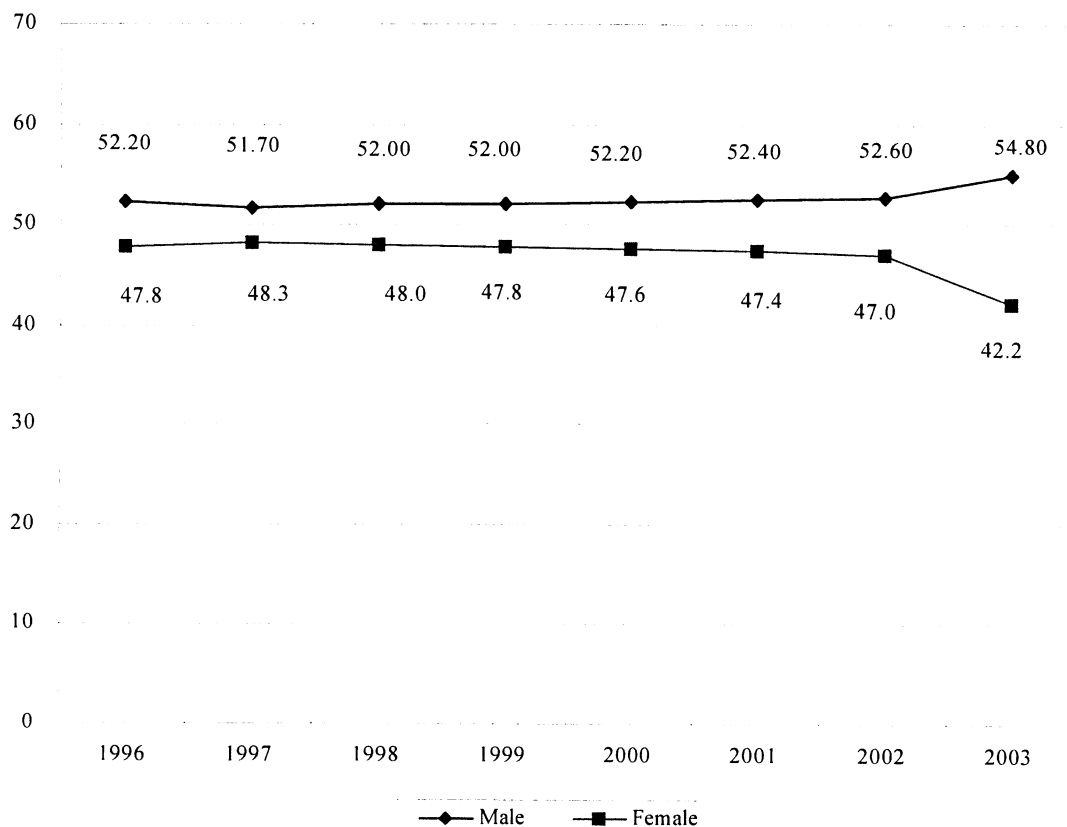
Chart 51. Number of Students



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

The rate of student by gender groups has been continuously maintained. There were slightly decreasing in the percent (42.2%) of female students in 2003 Seongdong-Gu, compared to 47% in 2002. The rate of male student has increased from 52.20% in 1996 to 54.80% in 2003.

Chart 52. changes in the rate of students by gender



Source : Seongdong Statistical Yearbook. Seongdong-Gu. 2003

[Form F]

Healthy City Plan

Seongdong-Gu

I. Background

1. Symbols of Seongdong-Gu

A. Emblem - Rainbow

Seongdong-gu is a district that faces riversides more than any other districts in Seoul. Rainbow generated from water expresses hope and dreams for a beautiful riverside city. The emblem composed of arches of rainbow linked to one another symbolizes intimacy and harmony among members of Seongdong-Gu, and also a dynamic leap for the future.



B. Bird - Goshawk



C. Flower - Golden Bell (The first flower that transmits spring news and hope)



D. Tree - Zelkova Tree (Local monuments No.2)



E. Color - Green



2. Geographical Characteristic of Seongdong-gu

- Seongdong-Gu is geographically closed by the Han-river and has played a role as a key point of transportation connecting the north area of the Han-river to the south area from ancient times.
- Seongdong-Gu is located in a sub-center of Seoul transportation and have vast potential as a commercial, residential, traffic district. At present, 'Wangsimni Newtown Planning' and 'Ttuksum Seoul Forest Planning' are nearly completed.
- Seongdong-Gu is under an important turning point of its development. At first, Seongdong-Gu has to perform on a full scale the blue print of 'Wangsimni Newtown Planning' and 'Ttuksum Seoul Forest Planning' to devote all city's energies for the future, and simultaneously just started Healthy city project to put health promotion of citizen and the improvement of the quality of life before everything.
- Seongdong-Gu pursues the improvement of the quality of life by establishing Seongdong-Gu three goals toward an advanced city and five implementing plans toward Healthy City.
- Seongdong-Gu will be changed to livable city having friendly resorts and convenient system by being harmonized efforts toward Healthy City with a sustainable drive of city development.

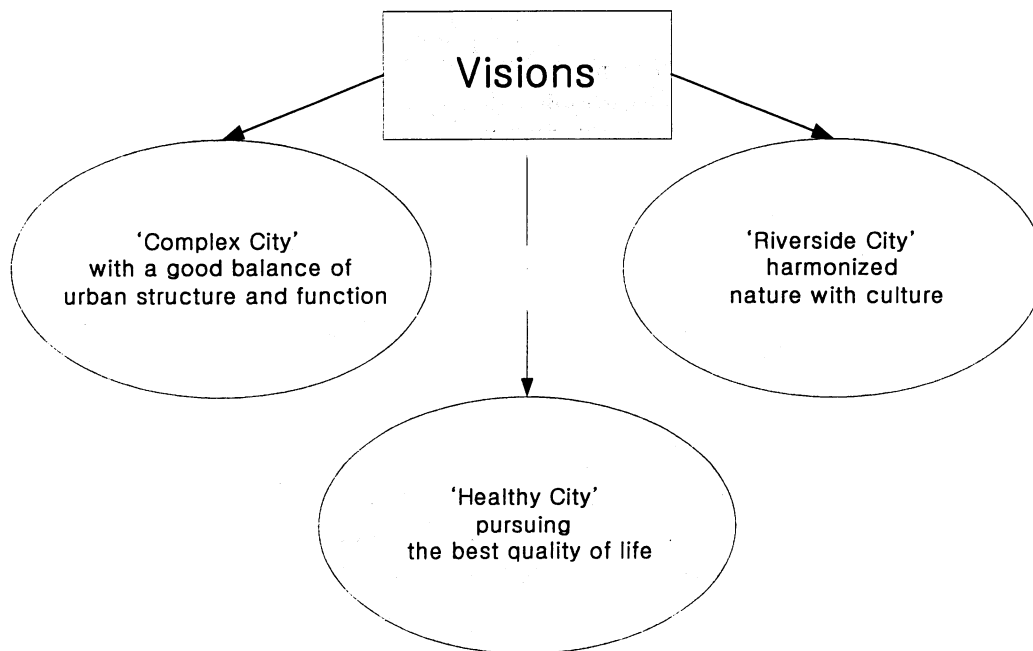


II. Vision and Goal

1. VISION

The following chart shows three city visions of Seongdong-Gu.

- 1) to build a healthy city with the best quality of life
- 2) to balance the structure and function of the city
- 3) to make the nature and culture of the city be harmonized

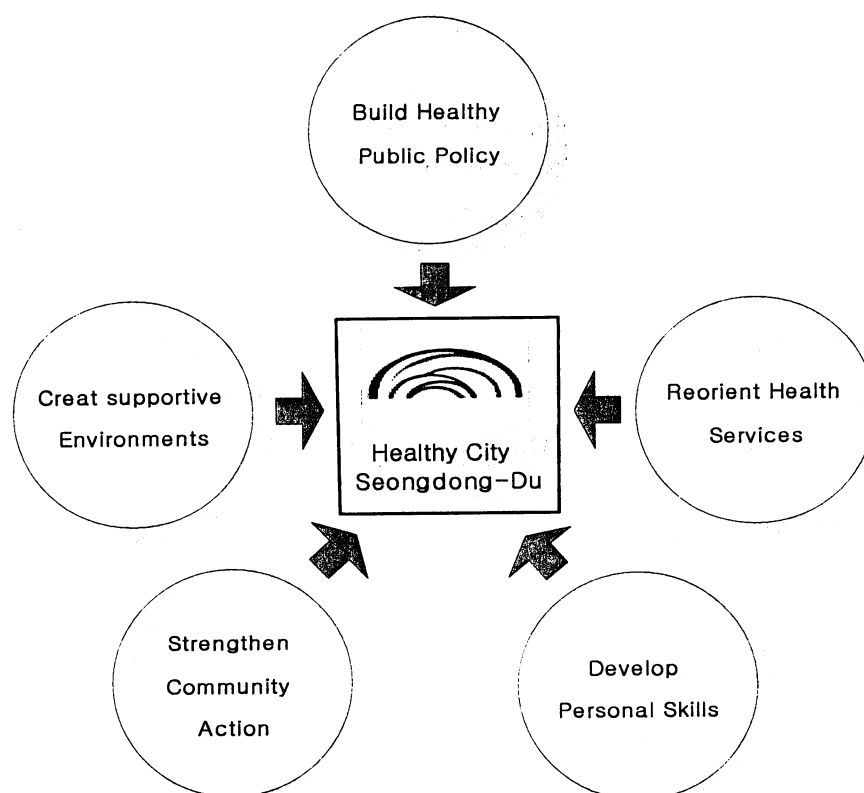


[The visions of Seongdong-Gu]

2. Objective

1) General goals

The chart shows the five actions in Ottawa Charter for Health Promotion.



1. Build healthy public policy: health promotion goes beyond health care, it puts health on the agenda of the municipal government in all sectors and at all levels, directing them to be aware of the health consequences of their decisions and to accept their responsibilities for health.
2. Create supportive environments: our society is complex and interrelated. Health cannot be separated from other goals. The inextricable links between people and their environment constitutes the basis for a socio-ecological approach to health.
3. Strengthen community actions: at the heart of this process is the empowerment of communities – their ownership and control of their own endeavors and destinies.
4. Develop personal skills: health promotion supports personal and social development through providing information, education for health, and enhancing life skills to increase the options available to people to exercise more control over their own health and over their environments, an to make choices conducive to health.
5. Reorient health services: the role of the health sector must move increasingly in a health promotion direction, beyond its responsibility for providing clinical and curative services.

3) Sub-goals of Seongdong-Gu Project

- The ideas of the Seongdong-Gu Project are that the healthy principles shall be implemented concretely and effectively, and the goals of the Project are to promote the physical, psychological and social health for the people.
- The following table shows the goals, guided by the five actions in Ottawa Charter for Health Promotion and the principles of the Project. Seongdong-Gu project takes these actions as its main strategies.

Sub-Goals	Implementing Plan
Establishment & implement of Long-term Development Plan toward health	<ul style="list-style-type: none"> • Development of basic indicators for Healthy City project • Organization and management of Healthy City committee & allocation of budget and support for Healthy City Project • Enactment & maintenance of Healthy City Act & regulations • Planning a balanced development of districts • Establishment of strategies for a high-tech city in future • Arrangement of enough education infrastructure & expansion of libraries
Build up a riverside City with a friendly environment	<ul style="list-style-type: none"> • Sustainable development of a riverside space • Preparation of beautiful and friendly green space • Making a greenness in life space • Making Seongdong-Gu clean without a dust
Construction of infrastructure for safety in city	<ul style="list-style-type: none"> • Establishment of a convenient transportation system • Solving the problem of traffic jam in city • Construction of a community without criminal
Provision of a high-quality of health and welfare	<ul style="list-style-type: none"> • Implementing 'Body Fat Program' against chronic diseases • Expanding BTL project for the welfare of old people • Making life settings healthy • Offering medical services in life-cycle
Make residents actively participate in community	<ul style="list-style-type: none"> • Performing resident initiated campaigns • Making a volunteer system substantial • Holding culture events and expand culture facilities • Realizing an administration which can be first a customer satisfaction

III. Healthy City Plan

1) 3-Year Development Plan

Phase I (2005) The sailing period toward Healthy City	Phase II (2006) The expansion period toward Healthy City	Phase III (2007) The settlement period toward Healthy City
<ul style="list-style-type: none"> • Enactment & proclamation Healthy City Declaration • Organization & formation Healthy City Task Force • Submitting the application for full membership of the Alliance for healthy cities in the WHO Western Pacific Regional Office • Organization of Healthy City committee & establishment of the 'Seongdong-Gu Act' • Investigation the stands of Seongdong-Gu • Development of Healthy indicators to reduce inequity in Seongdong-Gu • Hi-Seoul Health Expo open (June.9 - 12. 2005) • Implementing & evaluating Pilot project 『Healthy School Setting 』 	<ul style="list-style-type: none"> • Expansion of Healthy City Pilot Project • Modeling the standard of Healthy City Pilot Project • Established Pilot Project & New Project • Holding a commemorative event to celebrate to join 'The Alliance for healthy cities in the WHO Western Pacific Regional Office' • Strengthening the network between the healthy cities 	<ul style="list-style-type: none"> • Expansion of Healthy City Project • Technique Support for the late started Healthy cities • Promoting to be selected as 『Excellent Healthy City』 in the WHO Western Pacific Regional Office

2) Implementation Strategies and Development Principles

Plan 1. Establishment & implement of Long-term Development Plan toward health

A. Goals

- Establish and implement a long-term city plan toward Healthy City through the cooperation with multi-institutions, and make themselves realize that health depends on a decision-making of policy-makers in various fields and improve public policies toward health
- Try to find a functional link system with districts around Seongdong-Gu including Seoul by constructing an effective development plan, which is proper to potential and conditions of location.

B. Actions strategies

- 1) Development of basic indicators for Healthy City project
 - Investigate and make indicators of comprehensive problems about health or environment city
 - Present proper approach to it and extract various demands of citizen
 - Offer strategies and program of intervention to improve the whole range of life, as well as health of the population To improve health and comprehensive
 - Developed city basic indicators play a role as an important public health report and instrument to plan and offer information about the city
 - Develop city indicators by fields in accordance with health standard of residents
 - Compete, evaluate and analyze health determinants & risk factors to effect on health
 - Set the direction of Gu(district)'s policies toward healthy
- 2) Organization and management of Healthy City committee, budget allocation and support for Healthy City Project
 - Establish the base to voluntarily participate in Healthy city Project by allocating the budget and strengthening support from each of fields
 - Construct and manage 'Healthy City committee' which is consisted of people of all social standings such as academic circles, professionals, NGO of learning and experience about health
 - Healthy City committee plays an important role in advising for forming 'Healthy City Network', supervising and evaluating the Healthy City Project, presenting

specific directions and contents and making an effort for obtaining various support and cooperation to drive the Healthy City Project

3) Enactment & maintenance of Healthy City Act & related regulations

- Enact an act and reform regulations for all activities related Healthy City including allocation of budget and establishment of policy under the provisions of rules of Seoul related regulations

4) Promotion for a balanced development of districts in Seongdong-Gu

- Establish a long-term plan change northeastern on the basis of semi-industrial district into a friendly environmental district, center of a hi-tech business and a higher value-added business attracting a professional

5) Establishment of strategies for future high-tech city

- Map out three dimensional city spaces on the basis of a simulated structure and establish a planning toward a foothold city of information industry
- Build up information industrial zone on the basis of hi-tech information & research

6) Arrangement of enough education infra-structure & expansion of library

- Expand lacking public education facilities and build additionally high schools and libraries in the poor districts

C. Expectation

- Construct the foundation to perform successfully the five actions in Ottawa Charter for health promotion
- Contribute to the health policies of the nation
- Promote the comprehensive concept of Healthy city to residents in Seongdong-Gu

Plan 2. Building up a riverside City with a friendly environment

A. Goals

- Make Seongdong-Gu harmonized with the nature by expanding and connecting green spaces. It is reported that interest in leisure is growing recently. There are abundant natural resources such as Han-river, Ttukseom, Cheonggyecheon in Seongdong-Gu.
- Intend to improve environment network by making residents participate in community.

B. Actions strategies

1) Ttukseom 'Seoul Forest' Project: Green space in City



- Ttukseom has been changed according to natural and historical factors. It was used as hunting place, reviewing place for military arts, water purification plant, golf field, and racing course. There are still many people who remember 'old Ttukseom' where they enjoyed their summer days with swimming and tanning on the river side. Recently, it has been used as Sports Park and ferry point.
- Ttukseom Sports Park will be changed into the 'Seoul Forest' of 1,157,000 square meters by the end of June. 2005. It will be a good leisure resort for northeastern Seoulites, as well as the residents in Seongdong-Gu. This park is will be a symbolized park in Korea as the Central Park of New York or Hyde-Park of UK.
- 'Seoul Forest' that the whole process from designing to completing was made by citizen is a grand-scale ecological park living 92 wild animals such as a moose, a deer, a squirrel and so on.

- 'Seoul Forest' is classified to 5 theme zones; Culture art park, an ecology forest, a natural garden for studying, a swampy ecological garden, Han-riverside park and prepared by an outdoor stage, a public square, an environment park, a cycle track, a walk, a butterfly greenhouse.

2) Making a wall exposed to pavements green

- Change the concrete retaining wall exposed to pavements, which is spoiling the beauties of the nature, to a friendly environmental space such as trees, ivy or fresco according to each of condition.

3) Cheonggyecheon Restoration Project



- The restoration project of Cheonggyecheon is not just a part of Seongdong-Gu's urban planning but a greater task that the entire nation is interested in as a symbolic project to revive an important part of Korea's historical and natural heritage in the beginning of the 21st century. When the project is successfully completed, the Seongdong-Gu will turn into a city friendly to both the environment and people. The project is also expected to set a new paradigm for urban management in the new century and contribute to renewing the image of Seongdong-Gu.
- The restored Cheonggyecheon area is expected to become a Seoul's major tourist attraction for both Korean and overseas tourists. The new look of Seongdong-Gu is also expected to create a new hope for citizens in Seongdong-Gu.
- A field of reeds, a biennial seedling, is built up along with the stream of Cheonggyecheon with about 100 meters and will grow to more than one's height this

fall. Moreover, the Cheonggyecheon will be a harmony site exhibiting the symbols of all the cities of the country

4) Building up a friendly-environmental life space

- Friendly-environmental firm management
- Recycling of food waste
- Environment Center management
- Environment Website management

5) Making Seongdong-Gu clean

- Build up a tree lawn on a roadside & a wide boulevard
- Strengthen the management of the workplace emitting arsenic acid
- Implement policies to decrease dust on the road

C. Expectation

- Construct the conditions and revive a desire of sports activities of by expanding a route access to riverside.
- Offer an ecological nest and a migration way directly and a friendly environmental life space indirectly
- Make the road and pavement clean and green

Plan 3. Offering correct health information and fostering healthy life style

A. Goals

- Make them prepare and cope with health problems in lifetime by offering and educating correct information related health and developing healthy life style

B. Actions Strategies

1) Implement 'Body Fat Control Program' for prevention of chronic diseases

- Promote the concerns on body fat and strengthen publicity on Healthy City Project by holding 'Decreasing Body fat Contest', which is one of the programs against chronic diseases, on the Seongdong-Gu Health Day .
- Objective: Aged between 30 and 50 years women living in Seongdong-Gu that BMI is more than 25
- Process: 1) Check PBF(Percentage body fat) of participants, 2) develop and distribute body fat education materials to present the direction of physical activities in accordance with obesity, 3) recheck PBF (Percentage body fat) in 3months later and award a prize to people whose the reduction of MBF (Body Fat Mass) is the highest.
- Keep up advising & making an effort for the reduction of PBF (Percentage body fat) with residents by evaluating an individual exercise diary distributed.

2) Health Education Project

- Proceed health education programs by linking public health service center with a school board
- Cultivate a knowledge and capacity on hygiene or public health to adolescents
- Lead adolescents to have a sound living style

3) Non-Alcohol Program

- Establish sound alcohol drinking customs by implementing various programs to make residents realize alcohol's bad effects and reduce alcohol consumption.

4) Non-smoking & nutrition program

- Popularize smoke free atmosphere in restaurants, workplaces, campuses
- Conduct various smoking cessation events for residents
- Reduce smoking-related chronic diseases, disabilities and deaths
- Reduce smoking population proportion
- Intensify smoking cessation education and performance

C. Expectation

- Make the rate of morbidity decrease and improve the quality of life and do health promotion. At present, the population with obesity is increasing, chronic diseases is increasing due to Westernized dietary life style and reduction of activities.

Plan 4. Make residents actively participate in community

A. Goals

- Perform resident initiated campaigns
- Make a volunteer system substantial
- Hold culture events and expand culture facilities
- Realize an administration which can be first a customer satisfaction

B. Actions strategies

1) Perform resident initiated campaigns

- Campaign 'Non-alcohol campaign' with citizen
- Campaign 'Decrease traffic accidents' campaign with families
- Campaign 'Be right campaign' with residents
- Campaign 'Guide adolescents' to prevent sex assault
- Campaign 'Prevent drug use' with official institutions
- Campaign 'Walk contest' with diabetes patient

2) Make a volunteer system substantial

- Organize 'Helper Volunteers' for the elderly with low income
- Manage 'Volunteers for the poor'
- Organize 'Housewife Environment Patrol' watching for herself
- Clean the lane for oneself

3) Hold culture events and expand culture facilities

- Manage Culture Information Center
- Strengthen the support or organization of an art community organization
- Support culture and art activities of residents

4) Realize an administration which regards customer satisfaction as a first priority

- Create a home page of Seongdong-Gu Healthy City

C. Expectation

- Give the motivation to make an effort for community for oneself
- Lead to participate in community with having responsibility as a citizen
- Promote a sense of oneness with community
- Make social network improved & contributed to social unification

Plan 5. Provision of a high-quality of health & welfare

A. Goals

- Perform health promotion of all residents including the poor by developing programs to lead a high-quality of medical service for the accommodations of residents.

B. Actions strategies

1) Provision of Health & Medical Services in Lifetime-cycle

Objective	Health Promotion	Health for the handicapped
Infant	<ul style="list-style-type: none"> • Checking-up & education of the oral cavity • Immunization • Sex education • Offering menu to a day-care center 	<ul style="list-style-type: none"> • Supporting medical cost for a premature and malformed baby • Check-up of a natural metabolic syndrome • Free early check-up of eyesight in pre-schools • Free health check-up in public day care center
Student	<ul style="list-style-type: none"> • Program to make children feel happy and healthy • Immunization • Program against obesity • Non-alcohol & non-smoking education • Sex education • T.B check-up • Prevent teeth from decaying & check-up & education of the oral cavity 	<ul style="list-style-type: none"> • Management of child lack adaptability in school • Preventive education of Drug misuse
Adult	<ul style="list-style-type: none"> • Health promotion center management • Prevention of T.B and V.D • Hypertension, diabetes and obesity • Arthritis prevention project • Health education • Immunization • Project on Cancer • Disinfection • Nutrition education • Aids prevention • Backache center • Mental Health Center operation 	<ul style="list-style-type: none"> • Rent of Rehabilitation instrument • Medical cost support for patient of rare and obstinate diseases • Health telephone • Publication of Health newspaper • Rehabilitation center
Mother	<ul style="list-style-type: none"> • Management in before and after of pregnancy • Health check-up and education 	<ul style="list-style-type: none"> • Maternal feeding project • Free check-up of a uterine cancer • Delivery help center

Older people	<ul style="list-style-type: none"> • Health lecture • Influenza immunization • Door to door health • Silver dancing set • Free operation of an artificial tooth • Nutrition education • Consultation about a senile dementia 	<ul style="list-style-type: none"> • An eyesight recovery operation. • Bath helper • Art & gardening for treatment • Rehabilitation treatment
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2) Expansion of BTL program for the welfare of older people

- Establish a special hospital and social welfare facilities and make the facilities for older people expand as one of BTL programs to minimize the burden of private family.
- * BTL(Build-Transfer-Lease) program is a new way of attracting private capital to public construction projects by allowing companies to recoup their investments by leasing buildings to the government.

3) Offer the handicapped to a better quality of life

- Expand and revise the accommodation facilities by building the dental clinic for the handicapped and constructing an assembly hall in each of districts.
- Endeavor to raise the access to various culture facilities and provide the cost of living to the handicapped with low income to make their life stabilized and expanded to participate in social activities

4) Building up a healthy living setting

- Make a family healthy
- Make a school healthy (Pilot Project: Health Promoting School)
- Make a workplace healthy
 - Strengthening support to foreign laborer
 - Offering a job to the old
 - Strengthening support for social participation of women

C. Expectation

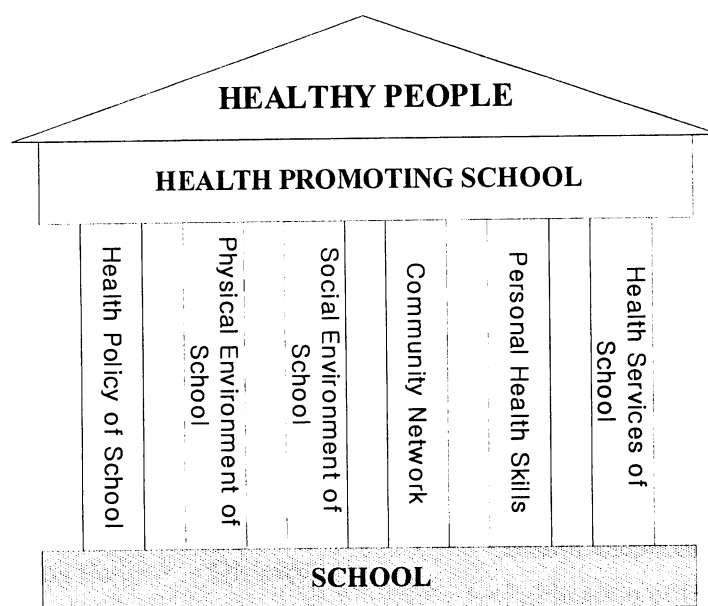
- Scheme qualitative and quantitative improvement of medical services in life-cycle
- Instruct the residents about diseases prevention knowledge
- Reduce risk factors in affecting health condition and popularize healthy lifestyle education
- Improve the quality of life and health promotion of the individual

3) Pilot Project: Healthy School Project

A. Purpose

The specific objectives of main pilot project, health promotion school, which is one of healthy settings, are the following.

- Grasping stands of health promotion schools in Seongdong-Gu according to 'WHO health promotion school guideline'.
- Grasping of health risk factors and health problems of students in Seongdong-Gu
- Development and implement of programs to solve major health risk factors and health problems
- Development of effective programs by upgraded evaluation
- Expand & establish the developed program for health promotion in schools
- Increase an education quality of students
- Improve a school hygiene and foster healthy behavior to students



[Model of Health Promotion School]

B. Process

1 Step	<ul style="list-style-type: none"> * Pilot Project target selection & school selection <ul style="list-style-type: none"> ◦ Select one of schools in poor districts ◦ Investigate schools and select in Seongdong-Gu ◦ Grasp the stands of selected school according to 'WHO Health promotion School Guideline'
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2-Step	<ul style="list-style-type: none"> * Organization of Pilot Project Working Group <ul style="list-style-type: none"> ◦ Objective : Principle, Parents, Education office, Corporation college ◦ Contents : The evaluation of purposes & demands about pilot project and participation inducement
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3 Step	<ul style="list-style-type: none"> * Check-up & pre-investigation <ul style="list-style-type: none"> ◦ Grasp health risk factors, health problems & demands(by Questionnaire)
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4 Step	<ul style="list-style-type: none"> * Analyze the result of investigation and decide a priority <ul style="list-style-type: none"> ◦ Draw core improvements through checking-up the school ◦ Focus group discussion ◦ Decide a priority through the result of investigation and focus group
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5 Step	Decide a priority through		
	* Verify the objective and the area		
	◦ Select the objective group, assure the area and present the role		
	Area	Objective	Role
	School	• Principal, vice-principal	Support for the intervention
		• Teacher (general teacher, athletic teacher, health teacher)	Support for the intervention & help promoters
		• Student	Positive participation to the project and offering information
		• Workers in feeding	Offer nourishing and sanitary meal services
Community	• Parents	Support & participation	
	• Fringes of school	Support & participation	

		• community committee & volunteer	Support & participation
	Governmental institution	• Education office	Support & participation
		• Seongdong-Gu office	Support & participation

6 Step	<ul style="list-style-type: none"> * Construction of an advisory committee ◦ Advise for methods and strategies of the program
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7 Step	<ul style="list-style-type: none"> * Program Development (Method & Strategy) ◦ Develop the program for improvement of health risk factor and health promotion ◦ Drive to the direction to induce the interest of students ◦ Collect opinions through the discussion of focus group ◦ Develop the methods to evaluate the process of the program
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8 Step	<ul style="list-style-type: none"> * Explain the Pilot Project ◦ Explain the driving methods & strategies to principal & teachers
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9 Step	<ul style="list-style-type: none"> * Management of the program ◦ Implementing of the developed program
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10 Step	<ul style="list-style-type: none"> * Evaluation & analysis of the process ◦ Evaluate the stage of actions of the process & program ◦ compare and analyze a health promotion of students between before and after program
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11 Step	<ul style="list-style-type: none"> * Establish a complementary plan and make a report ◦ Establish a next plan to supplement problems
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C. Expectation

- Construct basic indicators to apply 'The Alliance for Healthy Cities in the WHO
- Promote the quality of life and health promotion of their family, as well as student by performing effective health education and constructing health education, healthy body, social environment, healthy community network
- Supplement and complete the program after evaluation in accordance with the result of management
- Establish healthy schools in Seongdong-Gu through gradual expansion of the program

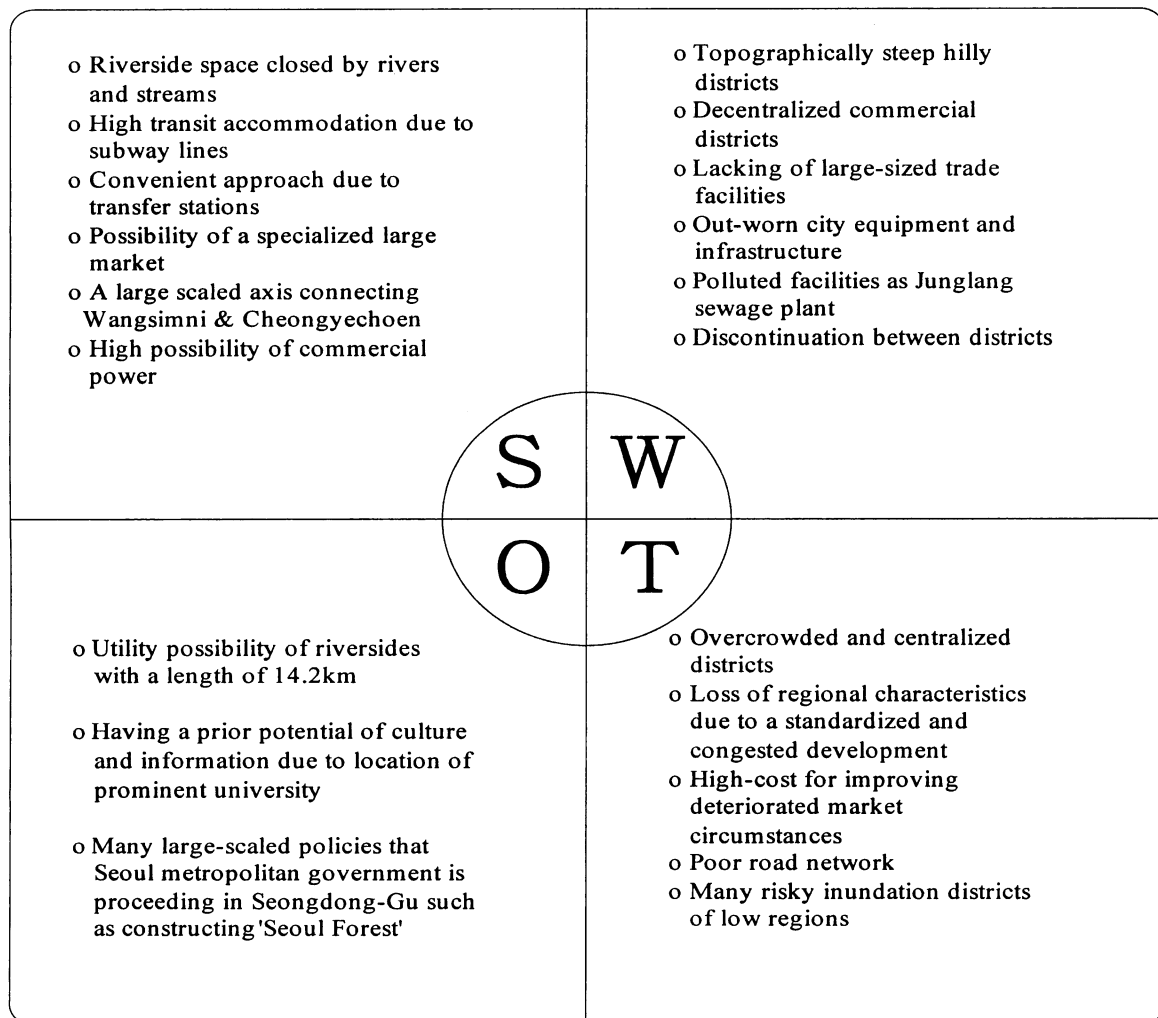
D. Future Plan

Phase I	Phase II	Phase III
2005	2006	2007
The period of Pilot Project	The period of Expansion	The period of Settlement

- Standardize the result of pilot project (Health Promotion School)
- Pilot Project expansion and technique support for late started districts
 - Evaluate this project and apply complementary measures into the following year
 - Promote the effectiveness by expanding the developed model to other schools

4. Strategy of Healthy City Project

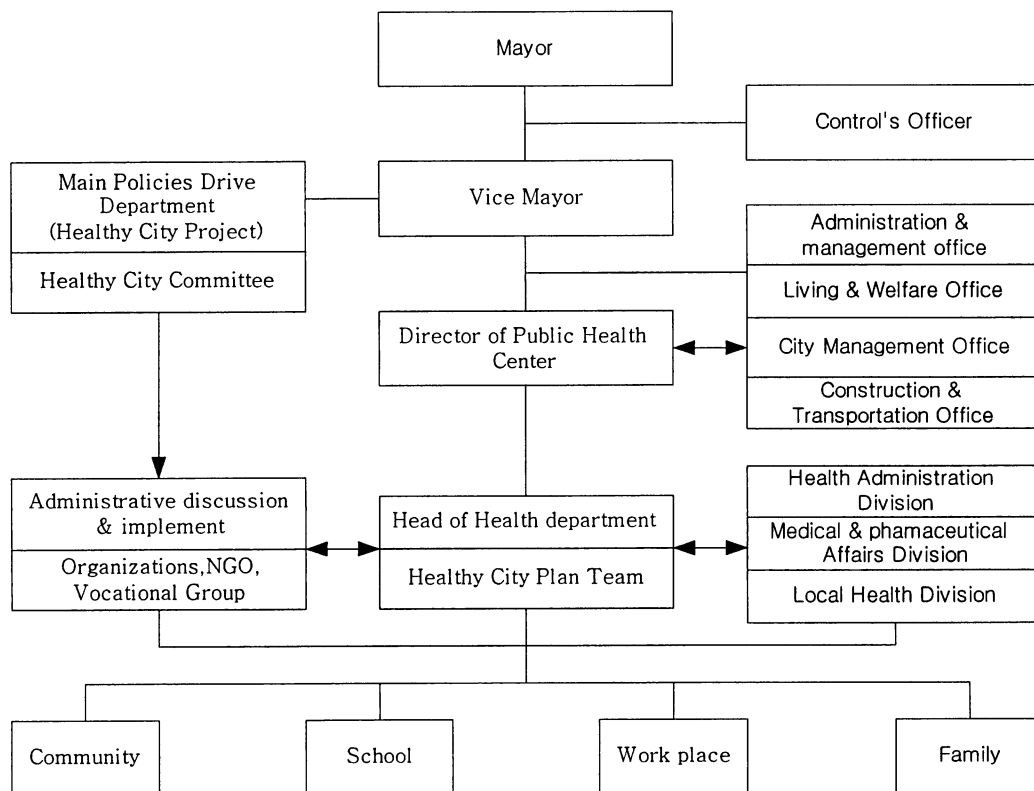
A. SWOT Analysis



B. Strategy

- o Organization of task Force & education for improvement of performance
 - Perform health planning education sponsored by Seoul
 - Make the project improved qualitatively through visiting advanced healthy cities
 - Make the performance improved by education duties related Healthy City
- o Make efficient use of community resources
- o Seongdong-Gu Healthy City committee

○ Organization system



5. Monitoring and Evaluation

1) Purpose

- The monitoring and evaluation of the project is an important part in managing the project. The standard of an urban health and observation of indicators have to be set a priority through performing the planned activities.
- The monitored result lead to make the standard of a city health improve and it has to reported to the community, besides all parties concerned.
- The sustainable analysis of the graduation of city profiles offers information about the effects of healthy city project (HCP) and shows the necessity of revision in an implementing plan.
- The evaluation of Healthy City plan uses both quantitative and qualitative measures.
- Healthy City Project includes to evaluate the changes of the quality of life, as well as the changes of health status.

B. Evaluation Plan

Evaluation	Questions for evaluation
1. Goal	<ul style="list-style-type: none">• Were the goals based on the concept of Ottawa Charter?• Were the goals specifically presented?• Were the goals achieved?
2. Objective	<ul style="list-style-type: none">• Was the objective specifically presented?• Was the reason of selected objective presented?• Was the selected objective reasonable?
3. Force	<ul style="list-style-type: none">• Were the needed human resources secured?• Were the secured human resources properly arranged?• Were the secured human resources economically suitable in this project?• Were the secured human resources linked with private organizations and residents?• Did you make efficient use of private resources(private organizations, volunteers and so forth)?• Did you make up the education protocol by public professionals?• Was the education performed (frequency, period) by professionals?

4. Facility	<ul style="list-style-type: none"> • Were the facilities and instruments needed in this project secured? • Were these facilities and instruments proper? • Did the existing facilities and instruments(including private and public ones) make efficient use of?
5. Budget	<ul style="list-style-type: none"> • Was the needed budget allocated? • Was the allocation of budget economically effective?
6. Creating conditions	<ul style="list-style-type: none"> • Was there the declaration and support of mayor? • Was the Healthy City Committee formed? • Were the related regulations established? • Was promoted by using various mass media of communication?
7. Contents	<ul style="list-style-type: none"> • Were the contents of the program based on Ottawa Charter? • Were the contents of the project coincided with the goals? • Were the contents decided by priorities? • Were the contents proved by professionals? • Was the developed program scientific and systematic? • Were the contents coincided with objectives? • Were the contents performed by acceptable ways? • Did the contents promote the self-respect of all students? • Was the objective satisfied with the contents of this project? • How much were the contents suitable for the demand of objectives? • Were the contents equally offered to objectives?
8. Basic investigation	<ul style="list-style-type: none"> • Did you investigate suitable indicators for Healthy City project? • Did the investigated indicator have a representative?
9. Additional effects	<ul style="list-style-type: none"> • Were there any unexpected effects whether yes or no? • If yes, what were those effects?