

Health and Urban Planning: A Short Overview on Local Government System

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Introduction

A city or an urban area is the combination of a quality environment for living and sustained economic growth that ensures adequate working facilities, social development, and environmental sustainability with better connectivity and all sort of these things related to physical and mental health wellbeing. Indeed, socio-economic activities with economic interference as well as recreational activities all are center on our physical and mental health. UN-habitat also defined “Urban and territorial planning is a vehicle for health improvement and ultimately for achieving the New Urban Agenda and the many targets associated with urban health and the Sustainable Development Goals (UN habitat, 2020). In earlier, most of the people had been living in rural areas and died from different types of infectious diseases like Cholera, Chicken Pox, and another communicable disease. On the contrary, nowadays people are moving around to cities; hence food adulterations, water contamination, air pollution, vulnerable infrastructure, lack of entertaining opportunities are common here and disease patterns also changing. A significant number of people are suffering from non-communicable diseases and chronic diseases like heart attack, high blood pressure, and diabetes; as well as traffic accidents that are very common in a city. According to WHO, in the year 2016, it was estimated Non Communicable Disease death was 67 % of all deaths, comparatively in the year 2008, it was 52% (WHO, 2018) (WHO, 2010).

Relation between Health and Urban Planning

Integrated Urban Planning is assembled all of the things such as sustainable transportation system, rational land use categorization, environment-friendly infrastructure in a city that ensure overall multiple positive benefits of the overall environment and human health. The planning is implanted by the city authority and city service providing authority, where public health officials, urban planners, and other professionals and policy makers are working. Health officials deal with threats to the welfare of individuals and communities all over the world. One great example is the work of British physician John Snow, who used geographic mapping to locate the source of a cholera outbreak in 1854 in London. This method of analysis, used primarily by

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urban planners at the time, allowed Snow to identify public water as the outbreak's source, eventually leading him to the water pump that had circulated the bacteria (Regis college, 2020).

In Bangladesh, Urban planning practices have been started through urban local bodies. In the British period, an attempt to the planning of Dhaka, Chittagong, and Khulna had been taken. In 2020 approximately 64.5 million are living in the urban area of Bangladesh, where it was almost 48 million in the year of 2011 (Statista, 2020). Due to rapid urbanization and industrialization; rural characteristics has been changing towards urban area. In the city and urban areas, a huge amount of people are gathering and migrating for working opportunities rather than rural area. The local authorities of an urban area are responsible to provide service to these floating people. Collaboration among urban planners, health professionals, development practitioners, and other central authority is urgently required to address the challenges posed by urbanization. For tackling the situation such as high air pollution and noise, heat island effects, lack of green space, and sedentary behavior created by urbanization should be mitigated in a coordinated manner.

Legal Bindings of City Corporation and Municipality

Local government is an integral part of the central government and established through locally elected representatives to enhance service and ensure welfare activities that are delegated lawfully (Rahaman and Hasan, 2019). In past, the British were introduced to a formal beginning of local government through the Bengal Municipal Act 1864 (Islam, 2013). Municipal administration ordinance, 1960 is a condensed collection of the 1932 Bengal Municipal Act where Municipal powers were introduced in this ordinance; public health water supply and drainage, building control street tree parks were considered here that very roughly related to urban planning and development (Rahman, 2008). The Paurashava Ordinance of 1977, the City Corporation Ordinance of 1983, and at present the Local Government (Paurashava) Act 2009, has also given the municipalities wide responsibilities in town planning and development, public health and sanitation, water supply and sewage disposal, maintenance of public infrastructure and amenities. The role of City Corporation has been also redefined through the enactment of the City Corporation Act, 2009. These Acts have empowered city corporations and municipalities to maintain public health and establish and operate hospitals, PHC centers, dispensaries, and mobile health units for urban people. Under the Acts, all private clinics, hospitals, diagnostic centers, and paramedical institutes are subject to licensing from concerned City Corporations and municipalities as well as abolish unhealthy conditions, waste management, public toilet, and control pandemic. On the other hand, the mandatory work for Municipalities to prepare Master Plans within five years from the date of creation. Local government engineering department (LGED) and UDD and Local

government ministry are supporting to prepare the master plan as well as the urban local authority will carry out all planning related laws such as the Building Construction Rules, 2007, the private residential development law, etc. properly.

Scenario of Health Service of City Corporation and Municipality

Bangladesh has substantially improved over the past decades in the health sector and gradually increasing in different indexes such as family planning, life expectancy coverage, pregnancy care, child immunization, and decreasing under-five mortality, maternal mortality by which achieved the millennium development goal (MDG) of health successfully. In the tertiary health care scenario is very worst in the country, gained position 113 among 195 countries in the global health security index of 2019 (GHS index, 2019). In Bangladesh per 1,000 inhabitants allocated the number of hospital beds is 0.8, while Sri Lanka has 3.6, Malaysia, 1.9, and Thailand 2.1. Health expenditure is also higher than in other Asian countries. The health care service is provided extensively by four key actors: government, private sector, non-governmental organizations (NGOs), and donor agencies. Specifically, the Ministry of health and family welfare (MOHFW) is designated ministry for all health-related aspect with ensuring and arrange health services for all over the country also responsible for defining health policies, setting strategies, establishing technical standards, quality controlled, enforcement of regulations, as well as procuring and distributing vaccines, family planning (FP) contraceptives, and other essential commodities. But by the law of City Corporations and Municipalities are responsible for all health intervention of a city wherever a few primary service and curative care is provided by them to the citizen. Municipalities and City Corporations are autonomous organizations and headed by public representatives who are designated actors of decentralization. However, limited financial capacities are also contributing to the service of City Corporation and municipality. Most of the work is carried out through own finance of the organization that affecting the service of health and public service as well. On the other hand, the head of local authority concern only with infrastructure development because there also the issue of getting the votes of citizens. Most Municipal authorities are only concerned about infrastructure development so health issues are always neglected by them. Consequently, It can be called political intervention is rather a barrier to the development of a city. On the other hand municipalities and city, Corporations has no adequate infrastructure to provide health related service whereas health promotion, diseases control, at present pandemic control is badly needed. Moreover, municipal health service is dependent on only one doctor; in addition, there are no available trained health personnel, equipment, machinery facilities, and indispensable finance. In the jurisdiction of city corporations and municipalities, primary healthcare-related service is mainly maintained by the NGOs where City Corporations and municipalities have been carrying out the role of the observer only, besides it, many Municipalities have no medical officer. These

municipalities primary health services and tertiary health services both are conducted through Upazila and district health services. On the other hand, the Municipality has no power and capacity to monitor the private clinic hospital of their jurisdiction and control them in a legal manner. Ministry of health is assisting the corporation and municipality with the project but that not enough to provide health care to the citizen.

Way Forward to Healthy City

We must remember that health is both a social issue and a political issue. Also, in order to improve the health situation in cities across the world, it is necessary to start where the people are and to involve them effectively in the processes of change. Lastly, a primary focus must be on changing basic conditions - risky environments - to create long-term, sustainable improvements (WHO, 1999). In our country, cities and urban areas facing the challenge of unplanned urbanization, lack of utility facilities, unplanned transportation systems, unplanned sewer systems, and many more. For this reason, last decades ago the government had decided to recruit urban planners in local government authority to cope with those problems for making city vibrant, planned and healthy. However, only one urban planner is working in a municipality without adequate manpower, consequently, it is very difficult to accomplish their job to create a planned city. Like the medical officer of City Corporation or municipality, the urban planner also facing same challenge due to adequate funds, manpower, job contentment, and political intervention. The local authorities of our country are mostly concerned about their political significance rather than the planned and healthy city. It is very essential for political authorities who are public representatives to understand the change of climatic conditions and environmental degradation, the health of the city, and the positive benefits of urban planning. For defending those overwhelming situation, the first and great duties of urban planners and medical officers to aware of the authority to carry work on these issues. Eventually, the central government should take the step to aware of the political authority and create opportunities so that the urban planners and medical officer accomplish their performance in full scale. In a nutshell, the new growing urban health problem is still a challenge and can be minimized by proper urban planning that reduces the environmental problem and create a built environment of a city. To be specific, an urban planner can create space of recreation and the medical officer have to suggest people use regularly for exercise, walking, and for recreation that has a great positive benefit on physical and mental health so it can be called indirectly, the urban planner is also contributing on health. Considering the pandemic Covid-19 situation, it is the responsibility of urban planners to plan the lockdown and separate community to identify the most viable place of central quarantine and pocket space of public hand washing beside the health professional will aware the people about proper health and safety issues of it. Since much of the planning profession purports that its focus revolves around the design and creation of sound places for people, planning and public health

professionals are intrinsically linked (Duhl & Sanchez, 2020). It is obvious to work together with the health professional and urban planners with for the welfare of the citizen of the urban locality that would promote them professionally

Conclusion

The urban citizens of developing countries are more vulnerable in global problems. Most of them are belonging in low income, middle income, and living in high-density area, whereas unhealthy living condition and slums are common with negative consequences of urbanization. The local authority is struggling to mitigate the need for the extra growing phenomenon of the area, but that is very hard to minimize. The authorities should give effort into proper urban planning of the area with creating awareness of healthy lifestyles as well as well-being than medication by their limited capacity. Because awareness is the main tool of our country to resolve different issues such as nutrition problems and maternal health, which will gradually make more responsible and concerned citizens. Urban planners should follow those techniques so that the citizen would get their place more livable and truly sustainable. Decentralize local areas with collaboration among the central government, local government, policy makers, urban planners, and engineers are required to develop the city actually.

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