

Collaboration between the Public Health Sector and Urban Planning Sector for Healthy Cities

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Introduction

The links between the urban planning and public health are not new to the field of public health. Many industrialized nations have policies to regulate clean air and water in addition to controlling housing and other industrial hazards. Simply, planning that is not unhealthy and promotes good health to city people is healthy urban planning. Recent attention is needed to focus on 2 issues that have helped to encourage the development of healthy cities. The first is *sprawl*, that is, random development characterized by poor accessibility of related land uses such as housing, jobs, and services, including schools and hospitals. The second is *infill*, a term used to describe focusing investment in existing urban centers and older suburbs rather than in outlying areas. More specifically, urban planners must understand and accept that their decisions have consequences, both planned and unplanned, that could potentially lead to ill health within communities. Different skills and techniques are used by planners to encourage the building of strong, healthy neighborhoods, towns and cities.

Sustainable Development Goals and Health

Throughout the 17 SDGs health is mentioned as an important factor. It is also recognized at a high level that “non-communicable diseases threaten the resiliency and sustainability of cities” (WHO,2016). To achieve sustainable development leaders in each of all these areas must include urban health and health equity in their priorities: transport and mobility, land-use planning and landscape design, food systems, housing, clean water and waste management, slum upgrading, greening strategies etc.

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Developing Health as a Key Principle in Urban Planning

The WHO Healthy Cities Project Office has developed an understanding of health that relates to all principles of healthy urban planning. Again, these principles are aimed at providing a framework to guide those involved in the design and development of cities. Although they are intended as general guidelines, these principles are crucial to the process of creating and sustaining healthy cities. The principles, as set out by the WHO Healthy Cities Project are as follows (WHO, 2020)-

Equity: Reducing health inequities is important because health is a fundamental human right and its progressive realization will eliminate inequalities that result from differences in health status (such as disease or disability) in the opportunity to enjoy life and pursue one's life plans (WHO, 2020). All people must have the right and the opportunity to realize their full potential in health. Intersectional action: Health is influenced by the actions and decisions of most sectors of a community.

Supportive environments: A city health plan should address the creation of supportive physical and social environments. This includes issues of ecology and sustainability as well as social networks, transportation, housing and other environmental concerns.

Community participation: Community participation is the active participation and involvement of communities. In city health sector this is a key element for setting priorities and implementing decisions.

Health Promotion: Health promotion is the process of enabling people to increase control over, and to improve their health (WHO, 2020). A city health plan should aim to promote health by using the principles like build healthy public policy, create supportive environments, strengthen community action and develop personal skills, and reorient health services.

Accountability: Decisions of politicians, senior executives and managers in all sectors have an impact on the conditions that influence health, and responsibility for such decisions should be made explicit in a clear and understandable manner and in a form that can be measured and assessed after time (Duhl L.J. & Sanchez A.K.,1999).

The right to peace: Everyone has the right to enjoy peace such that all human rights are promoted and protected and development is fully realized. Health professionals have an important role to play in promoting the right to a life in peace. Peace is a fundamental requirement for health.

Influence of Urban Lifestyles on the Health of People

Cities and urban lifestyles influence the health of humans, food system and ecosystems, which, in turn, influence one another. In 2020, the recent pandemic, COVID-19, is threatening our food system in both urban and rural areas. Especially in the urban food system, the city government faces multiple challenges to feed a large number of unemployed people. The COVID-19 strongly impacts the food security and nutrition situation of urban populations. COVID-19 pandemic has exposed the vulnerability of the cities in immunity sector. COVID-19 has shown that existing design of cities and food system weren't enough strong to fight with transmittable diseases. So, how a city can boost immunity of its citizens? The answer is by increasing some attributes. Which are-

Increasing everyday physical activity: Physical activity is important for all ages and should be included into daily routine. In each and every setting like schools, workplace, streets and parks maintaining health equity is important. Cycling, walking, evening play can boost up energy level and immunity system and contribute to achieve many of the SDGs.

Better air quality: Air pollution is currently the greatest environmental risk. Air pollution can also cause long-term damage to people's nerves, brain, kidneys, liver, and other organs and also causes some chronic diseases. Some scientists suspect air pollutants cause birth defects. Many solutions exist to reduce air pollution, including on transport, energy and land-use options.

Increasing food security and healthier nutrition: Obesity is the situation when body store excessive amount of body fat. A healthy diet is only possible if people have access to healthy foods where they live and work. Urban planning can address "food deserts" – typically low-income areas where fresh food is unavailable, and only unhealthy, heavily processed foods, high in sugar, fat and carbohydrates, are accessible and affordable. Effective zoning and land-use planning can support local food businesses and urban agriculture at every stage of the food cycle, from growing to processing, distribution and composting (Duhl L.J. & Sanchez A.K.,1999).

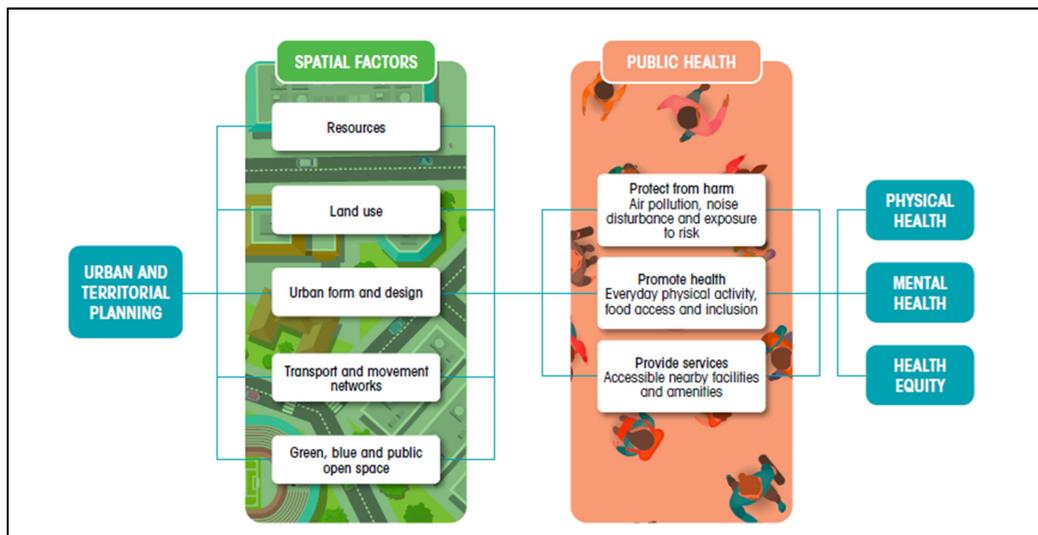
Child-friendly environments: The healthy development of children is ensured through their everyday environments like going to schools, playing out with friends, going to the park or playground – sets a foundation for health in later life.

Age-friendly environments: An ageing population is the asset for nations. Age-friendly environments promote healthy and active ageing. This can make it possible for people

who already get aged continue to stay in their homes and participate in and contribute to their communities. A caring environment that facilitates activity outdoors can reduce health care support in later life (Duhl L.J. & Sanchez A.K.,1999).

Integration of Urban and Territorial Planning with Public Health

The most important asset of any city is the health of its people, which is essential for fostering good livelihoods, building a productive workforce, enabling mobility, promoting social interaction creating resilient and vibrant communities, and protecting vulnerable populations (WHO, 2020). Risks and challenges to health are also arising in urban areas from global phenomena such as climate change, and ecosystem and biodiversity loss. Adverse health impacts are exacerbated by increasing inequalities. These urgent challenges reveal the extent of influence on people’s health. Urban and territorial planning influences how we use and access resources, uses of land, urban form and spatial design, biodiversity and nature, transport system. Integration of urban planning with health will deal with health outcomes and health equity.



Source: (WHO, 2020) Fig 1: How spatial factors impact on health and health equity

From Current Planning to a Resilient Planning

The current COVID-19 pandemic sharply disrupted our everyday lives—how we work, study, shop, hang out, and play (WSP,2020). As we come forward from the lockdown and move into recovery, we have to manage a resilient planning how they were before and shape a different future for our built environment and public health sector.

FROM THE CURRENT STATE OF URBAN PLANNING...	...TO A MORE RESILIENT PLANNING
Predominantly one zone (residential or commercial)	Integrated/Mixed-use markets (if people are going to work more from home, can we think of mixing sectors)
Few open and green spaces	Easier access to open and green spaces
No or few bike lanes	More space for pedestrians on sidewalks, and more and better designed dedicated bike lanes
Low investment in digital infrastructure	Better digital infrastructure across urban and rural both
Inner cities are overcrowded	Potential scenario for suburban revival (city districts, smaller communities)
Urban buzz centralized in city centers	Services coming near to housing
Single use of spaces	A mindset of creating everything as multifunctional. Buildings, green space, public space, roads, schoolyards, etc.
Health vulnerabilities are exposed	Focus on a combination of physical health, behavioral health and socio-economic vulnerabilities (knowing different sets of populations in the community)

Source: (WSP,2020), Fig 2: Changes from Current Planning to a Resilient Planning

Conclusion

Health is created and lived by people within the settings of their everyday life in a sustainable city; where they learn, work, play and love. The responsibility for a successful collaboration of public health services and urban planning is shared among individuals, community groups, health professionals, health service institutions and governments. Therefore, in each phase of planning, implementation and evaluation of healthy cities and individuals, women and men should become equal partners.

Reference

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