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**'Future policy approaches for health and sustainability-
what next for WHO healthy cities?'**

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West of England

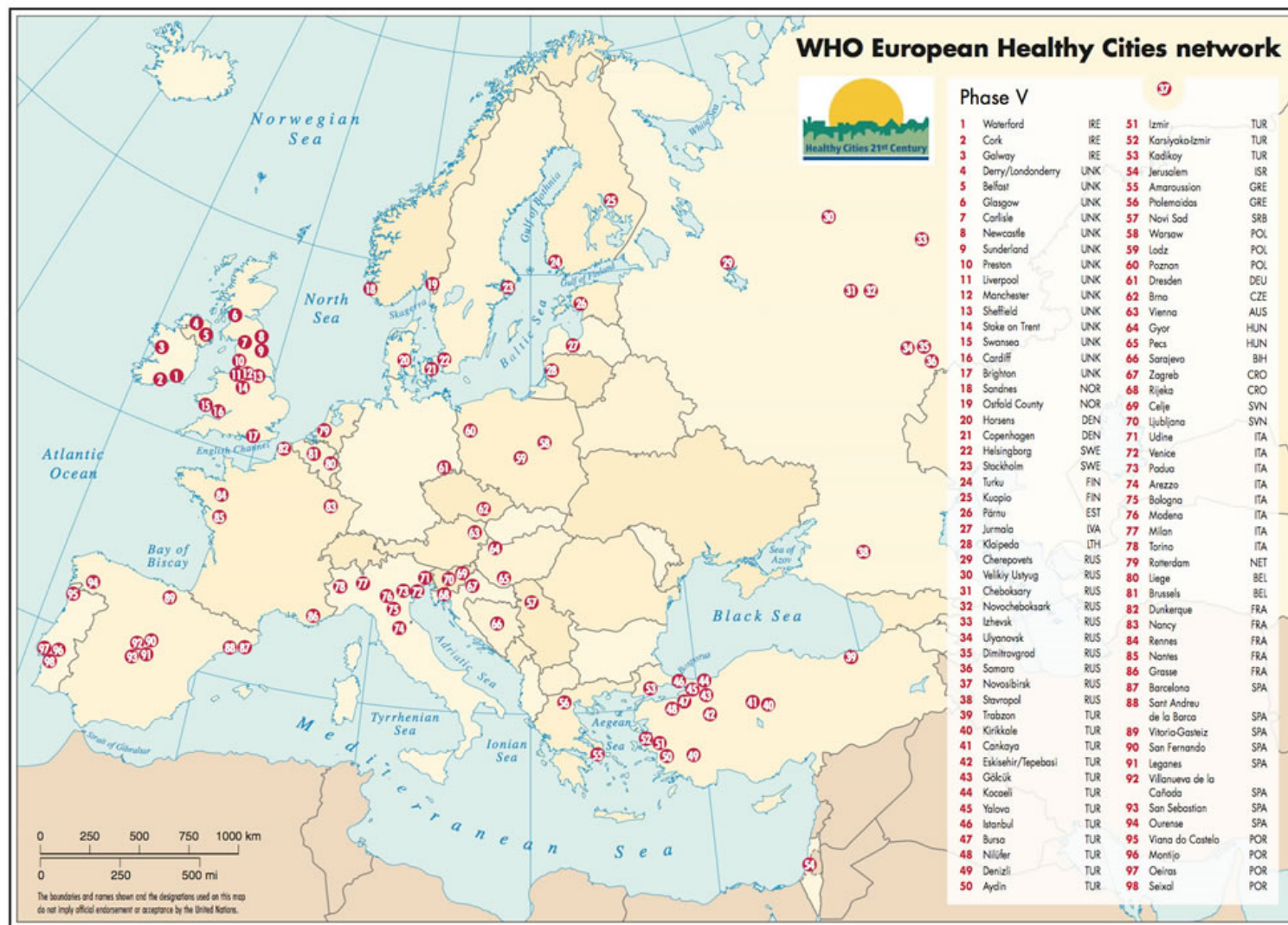
bettertogether

What is WHO Healthy Cities?

- **Global movement** with networks established in all six WHO regions.
- Engages local governments in health development through a process of **political commitment, institutional change, capacity-building, partnership-based planning** and innovative **projects**.
- Approximately **100 cities** are members of the WHO European Healthy Cities Network, and **30** national Healthy Cities networks across the WHO European Region have more than **1400** cities and towns as members.

<http://www.euro.who.int/en/health-topics/environment-and-health/urban-health/activities/healthy-cities>

WHO European Healthy Cities Map



<http://belfasthealthycities.com/who-phase-vi-2014-2019-european-healthy-cities-network>

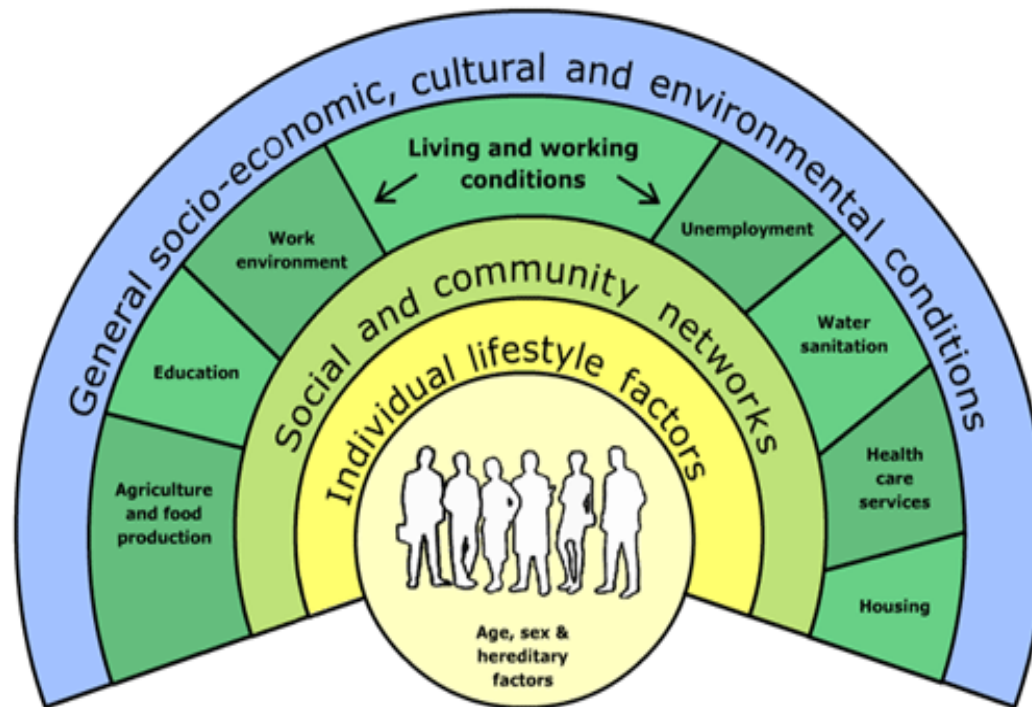
Six Strategic Goals for Healthy Cities

- 1.** To promote policies and action for **health and sustainable development** at the local level and across the European Region, with an emphasis on the determinants of health, **poverty** and the needs of **vulnerable groups**.
- 2.** To increase accessibility of the WHO Healthy Cities Network to all Member States of the European Region.
- 3.** To promote **solidarity, cooperation** and working **links** between European cities and networks and with cities and networks participating in the healthy cities movement in other WHO Regions.
- 4.** To strengthen the national standing of Healthy Cities in the context of policies for health development, public health and urban regeneration.
- 5.** To play an active **health advocacy role at European and global levels** through partnerships with other agencies concerned with urban issues and networks of local authorities.
- 6.** To generate the **policy and practice know-how**, the **good evidence** and the **case studies** for promoting health to all cities in the Region (Belfast Healthy City, 2014).

<http://www.belfasthealthycities.com/who-european-healthy-cities-network-strategic-goals>

Conceptual underpinning of WHO Healthy Cities

The Main Determinants of Health



Dahlgren and Whitehead (1991)

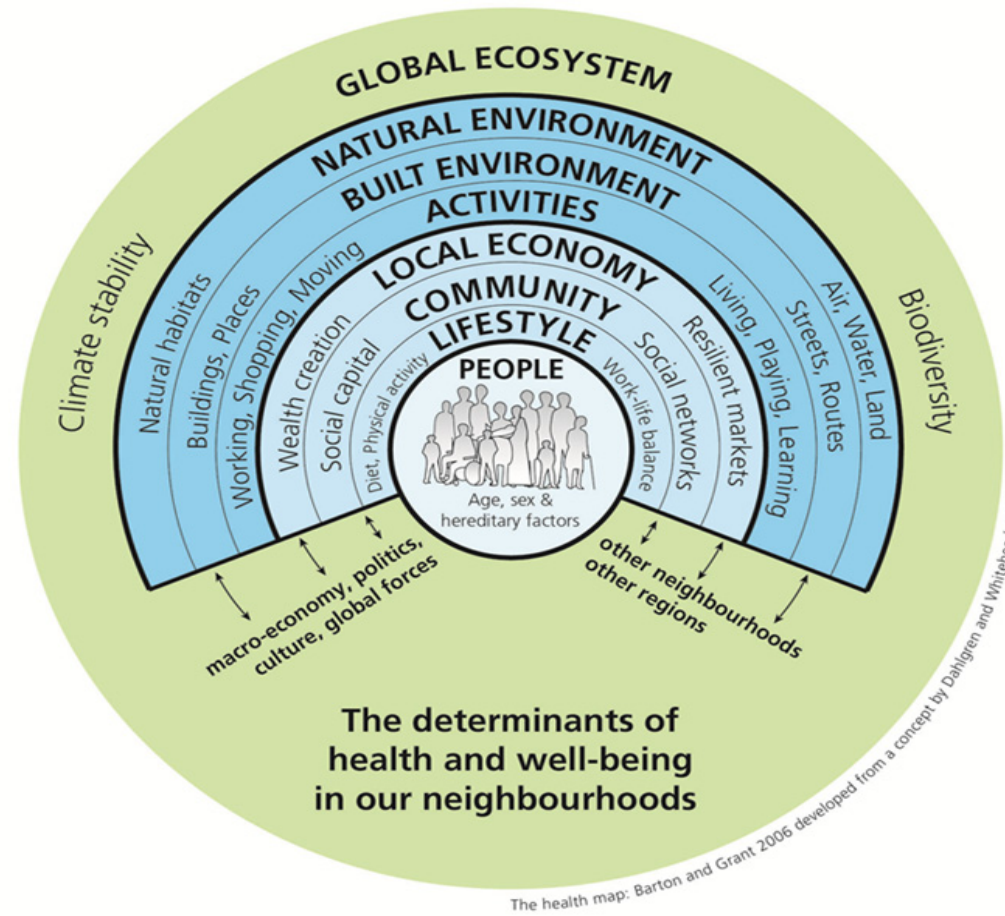
WHO Themes for Healthy Cities Phase V (2009-2013)

- Overall objective: to implement health and health equity in all local policies.
 - Three core themes:
 - 1) caring and supportive environments
 - 2) healthy living
 - 3) health urban environment and design
-

WHO Healthy Urban Planning Initiative

- Mid-1990s: European Sustainable Cities and Towns Campaign with the participation of the WHO-Healthy Cities
 - Links between health and sustainable development formed an important element in the work of the Campaign. Opportunity to explore the relationship between health and urban planning.
 - Urban planning and related activities significantly influence the determinants of health
-

Determinants of health and well-being in our cities



12 Healthy Urban Principles for planners

- 1) promoting healthy **lifestyles** (especially regular exercise);
- 2) facilitating **social cohesion** and supportive social networks;
- 3) promoting access to **good-quality housing**;
- 4) promoting access to **employment** opportunities;
- 5) promoting accessibility to good-quality **facilities** (educational, cultural, leisure, retail and health care);
- 6) encouraging **local food** production and outlets for healthy food;
- 7) promoting **safety** and a sense of security;
- 8) promoting **equity** and the development of social capital;
- 9) promoting an **attractive environment** with acceptable noise levels and good **air quality**;
- 10) ensuring good **water quality** and healthy sanitation;
- 11) promoting the conservation and quality of **land and mineral resources**;
- 12) reducing emissions that threaten **climate stability**.

http://heapro.oxfordjournals.org/content/24/suppl_1/i91.full

Goal of the current Phase VI (2014–2018): Health 2020: the European policy for health and well-being

- Implementing Health 2020 at the local level
 - Reducing health inequities
 - Improving leadership and participatory governance for health

<http://www.euro.who.int/en/health-topics/environment-and-health/urban-health/activities/healthy-cities/who-european-healthy-cities-network>

Belfast

Reuniting Planning and Health capacity building project

- Aims to strengthen awareness and understanding among stakeholders of the links between land use planning, built environment policy and health and wellbeing.
- This project forms part of the Regeneration and Healthy Urban Environments programme, which Belfast Healthy City leads on behalf of Belfast as a WHO European Healthy City and Belfast Strategic Partnership.

<http://www.tcpa.org.uk/pages/belfast-reuniting-planning-and-health-2014.html>



<http://awards.belfasthealthycities.com/sites/default/files/uploads/bhc-logo.png>

Example of policy for Healthy Cities

Healthy Ageing

- 'healthy ageing', 'active ageing' and 'ageing in place' advocated by the WHO.
- 2007- WHO initiated: Age-Friendly Cities Project and published a guide which identified 8 key domain for establishing an 'age friendly city'.





<http://www.wicksted.co.uk/playground-projects-manchester-lancashire-pp24.html>

Healthcare Network health in cities Is city living bad for your health?

Many cities struggle to offer their growing populations a healthy environment - but urban living doesn't necessarily mean a poor quality of life



Curitiba in Brazil is cited by the WHO as a city where good urban planning is contributing to higher life expectancy and relatively low infant mortality. Photograph: Alamy

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The top five causes of death worldwide - infographic

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Our planet is fast becoming an urban one. At the beginning of the 21st century, the majority of the world's population still lived in the countryside, but, by 2050, more than 70% of us will be city dwellers.

Across the world, many cities are struggling to keep pace and to offer a healthy environment for their booming populations.

According to the United Nations, around 1 billion people worldwide live in slum conditions, with inadequate sanitation or water, poor access to healthcare and an increased risk of infectious disease. In the developed world, city lifestyles bring huge health challenges too, including obesity, diabetes, higher stress levels and associated mental ill health. Then there's the growing problem of air pollution, which the World Health Organisation says is now the world's greatest environmental health risk, linked to one in eight of total global deaths.

Yet busy urban life doesn't necessarily have to mean poor health. Densely populated Hong Kong, Osaka, Tokyo and Singapore top global health lists, thanks to factors such as accessible healthcare and ease of travel.

In some of the world's biggest cities, from India to the US, urban populations live longer than their national average. And across the globe, efforts are being made to promote healthier cities, whether through better infrastructure, greener transport options or better urban design.

Dr Laurence Carmichael, senior lecturer at the University of the West of England and head of the WHO Collaborating Centre for Healthy Urban Environments, says the drive to improve urban living needs to address a wide range of different local factors - but cities, as "hubs of innovation", are attempting to rise to the challenge.

"Those which are less developed across the world have to start with issues like sanitation, water quality and drainage, then as their systems become more sophisticated they can start thinking about things like food systems, green infrastructure and adapting their cities for all ages," she says. "Many of us live in areas that are already developed and we need to retrofit health qualities into that environment."

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What next for WHO healthy cities? Cities, key players in international governance

- **70%** of the world's economic activity takes place in the world's 600 largest cities (McKinsey, 2011). In rich income countries, cities represent **85% of GNP** (UN Habitat, 2007).
 - The relatively recent rise of city living, and associated human activity, lead to huge impacts on the health of both people and planet.
 - **Girardet:** challenged the "Petropolis" model of the city
- = strong driver for the development of an international policy framework.
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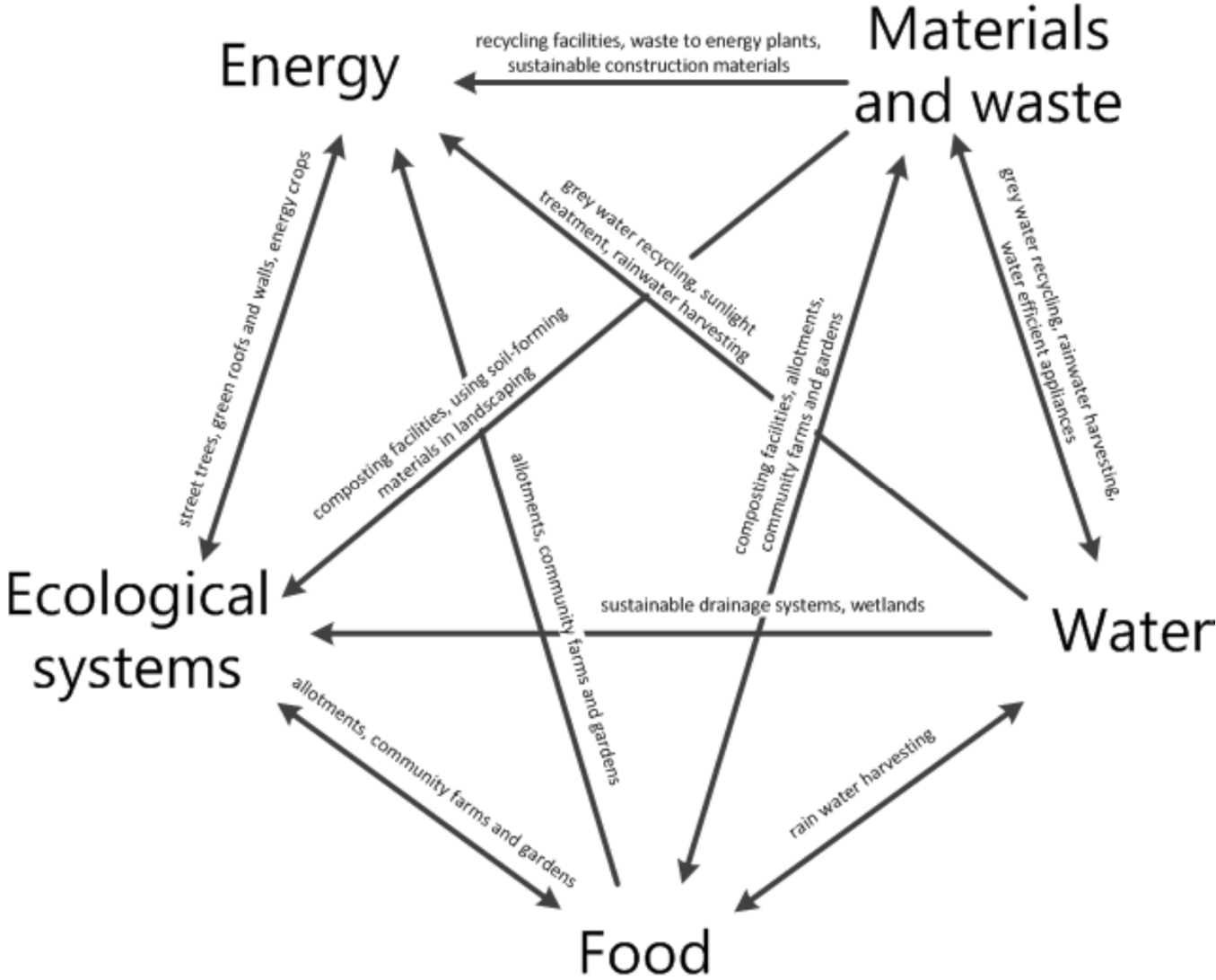
What next for WHO Healthy Cities? Tackling climate change with health benefit

- **Sustainable Development Goals**

- Urbanisation and planning are significant:
 - housing and energy efficiency
 - street and green infrastructure and related ecosystem services
 - city and transport system level

have an impact on each other and linear analysis simply cannot help address the negative and complex interactions of environmental and human factors on health.

Resource management



Natural resource management: challenges and opportunities for cities

- need to manage resources at different scales requiring multi-level partnerships, secure residents' buy-in, educate
 - need to manage both offer and demand
 - from a series of independent operations to an integral system
 - resource management methods integrated into cityscapes for health, social or economic added value (eg energy production, SUDs)
 - Partnerships: delivery involves a range of public/private operators, expertise, knowledge, but not necessarily similar common goods ambitions
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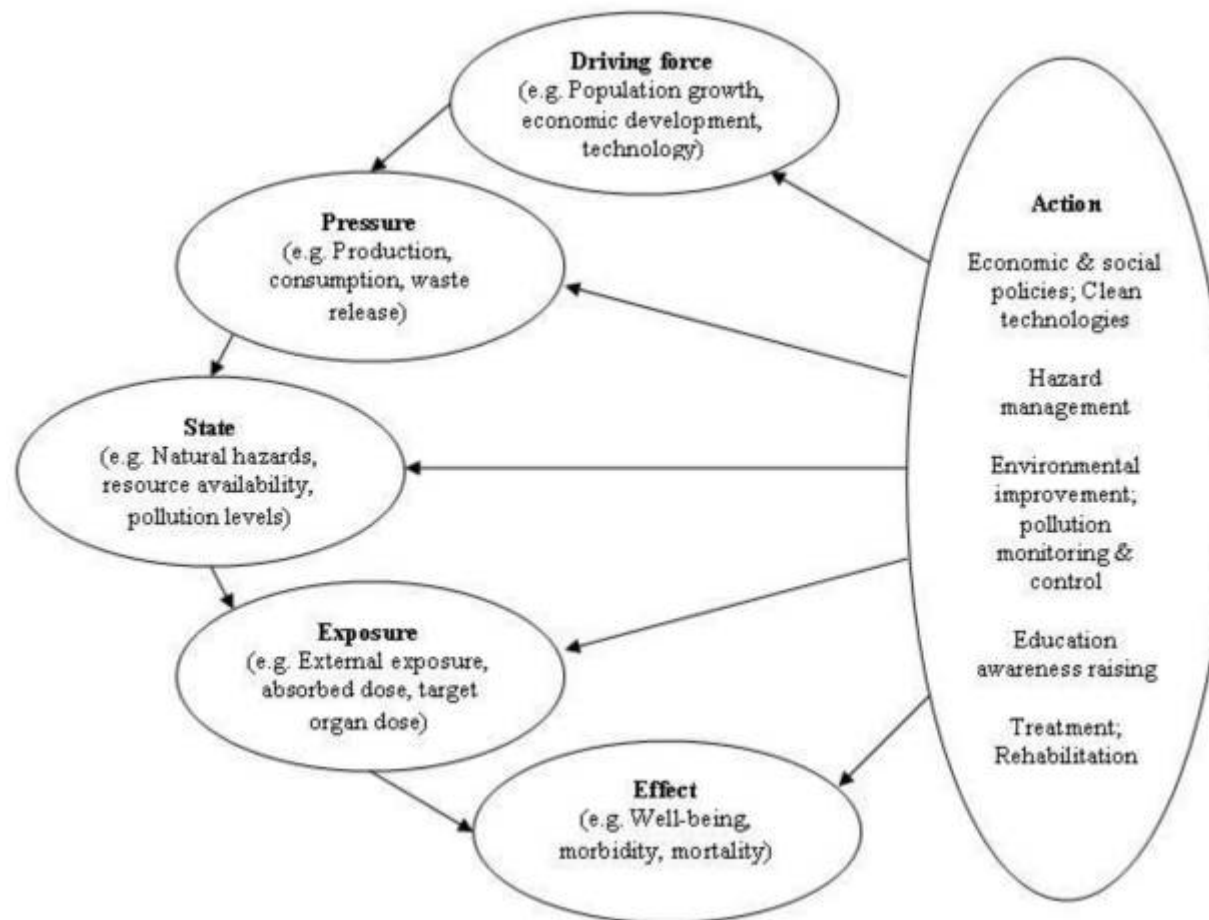
The added dimension: immigration

- In the **first 6 weeks of 2016, 80,000 migrants arrived** on boats to Europe
 - In 2015, the number of migrants escaping from Africa through Libya/Middle East was nearly = population of the region of Brussels
 - European cities provide: shelter, protection and support to migrants' needs
 - **Perception** of pressure on, existing social and economic infrastructures and increased racial tensions with the local population
 - The economic, social, cultural, health and environmental challenges of having an influx of new migrants result in a stretching of the European Union's fundamental roots of solidarity and leads to disagreement on the quota-based system relocation scheme in the Member States. (URBACT, 2016)
-

Promoting co-benefit framework

- Acceptance that climate change is occurring and that **human actions** are largely **responsible** + that the human health consequences of climate change will be far reaching
 - People living in **poverty** are mostly affected
 - A key premise of the co-benefits approach: **interrelationships** between the health of the planet and living organisms
 - Economic growth is unsustainable and ignores the dependence that all life has on the health of global ecosystem
 - **“put health and ecosystem health”** at the centre of policy and decision making
 - Co-benefits approach demonstrates multiple benefits
-

The Driving Force-Pressure- State- Exposure-Effect- Action (DPSEEA) model



Source : Brigg, d. (1999)

Conclusion

Evidence base: cities offer a unique scale for the co-benefit agenda

- pathways to healthy/unhealthy planet and people
- provide healthy/unhealthy habitat for a growing population within planetary boundaries
- economic, social and environmental importance of the city scale to deliver SDGs.

Delivery mechanisms: city level could add value to international policy-making

- Sectors: urban planning, transport planning, food systems
- Policy tools: criteria for assessing the health impacts and policy actions of environmental stressors at city level, including criteria for healthy urban environments, HIA.

Politics: Good city governance can support the delivery of environment and health policies

leadership

community engagement

allied resources (knowledge and skills, partnerships, vision, commitment)

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Thank you

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