



Working group synthesis

# WELL-BEING AND HEALTH

**2019 - 2020**

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## EDITORIAL

### The rise of urban health challenges around the world

**W**ith more than half of the world population now living in cities and with this tendency being on the rise, health is one of the main urban issues of the 21st century, at the heart of two great societal challenges in particular: the demographic evolution and the aging of the population, and the adaptation to climate change.

A quick overview of the events that happened around the world recently (deadly pollution, increase of chronic diseases, pandemics caused by the invasion by specific species, etc.) show the type of great challenges that urban territories have to face to remain livable and keep their population in good health. These events show the vulnerability and the complexity of urban systems translated into multiple dependences, whether it is the access to quality resources (water, air, food, energy) or the increase of social and territorial inequalities through urban development.

The New Urban Agenda adopted in Quito in 2016, reaffirm public health matters (SDG 3). These various objectives collide around matters of living conditions (habitat) and urban health (individual and collective), and

open up the possibility to reformulate the concept of sustainable development: a process leading to a better quality of life and to well-being for all.

The effects of climate change on health and its impact on the urban environment's quality are well documented today. They were the object, lately, of a chapter in a recent report by the IPCC (Intergovernmental Panel on Climate Change). The World Health Organization (WHO) also listed the social determining factors for health, showing the impact of public policies on the well-being of the population, including at the local scale. It proved the necessity to go beyond sectorial policies (health and urban development in particular) in order to build transversal policies in which urban health and well-being in the cities are placed at the center of the public action.

#### **Condition of production for health-friendly urban planning**

To face environment and social transitions, we must implement a profound change that will translate especially in the way we will report, communicate, support well-being in the cities, manage risks and protect users.



To do so, we will have to:

- properly define the societal challenges related to health in the cities as well as their contribution to sustainable development and to the social responsibility of companies and that of organizations in general;
  - understand the links between health and urban development, which both share common dynamics, and the new types of collaboration that we should implement to make health a major leverage of transition toward a more sustainable society;
  - initiate brainstorming and actions on the evolution of challenges, on local public action and projects of urban planning and health, in accordance with societal mutations.
- scientific innovation and progress in the medical and health sectors, treatment chain, and mostly prevention, thanks to behavioral studies;
  - modification of the caretaker/patient relation, in particular through the development of connected items, telemedicine or medical networks and through the transformation of treatment centers;
  - growing demand from the population to take part to this prevention (bottom-up dynamics), to take part to the improvement of their environment, in relation to their health and especially to food matters, to take part to extending the definition of health and well-being, and to participate to the construction of their living conditions.

Lastly, the digital transition is a powerful tool to turn vulnerabilities into innovation opportunities. With its positive or contested effects, technologic (and social) innovation plays a key accelerating role in the health sector, at various levels:

Transversal actions, a shared culture and innovations are powerful tools to improve people's well-being as well as their capacity to take care of their health. These various evolutions show that



the tools to take action on health and well-being depend on policies which are broader than health-related policies strictly. They have cultural, social and economic ramifications for which the urban dimension – meaning cities as places of opportunity – plays both an integrating and regulating role.

### **Explore operational solutions**

The wish for a healthy society requires a joint action in multiple domains, transportation, housing, social cohesion; it requires from inhabitants and actors of the territory to build answers together. Faced with those multiple challenges, local authorities must get organized:

- implementation of long-term structural policies (infrastructures, equipment, planning of urban functions) in a context where investment capacities are limited;
- implementation of short-term actions to give visibility to long term actions, initiation of new logics of governance and economic models, and encouragement of a change of

user behaviors;

- better consideration of urban health, through the decompartmentalization of health actors' and urban actors' practices and through the co-development of "tailor-made" solutions with local actors.

The ambition of the PVFT is to offer a reading grid of the current transformations and transitions and to suggest solutions which can be discussed and serve as a reference point for other countries confronted with similar changes.

We must recognize the specificity of health-related stakes in Africa. Faced with health needs expected to increase and with a structural shortage of the treatment offer in African cities and territories, local authorities, economic actors and international financial backers are, each at their level, responsible for the conception and management of urban environments, understood as a health resource of the inhabitants.

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## Co- Pilots



## With contributions from



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# PART 1

## DEFINITION AND APPROACH

**H**ealth-related challenges are complex in that they are transversal and concern many environment-related issues (climate, pollution, water access, food) or living-environment issues (health policies and the treatment offer, housing).

This topic must be approached with a broad understanding : from treatment access, to the overall well-being of the population on a territory. People's right to live in a healthy environment and to be able to access an adapted treatment offer is a key challenge to reduce social and territorial inequalities.

To do so, ensuring equal access for all to health and basic services, and improving the environment and quality of life of the population appear like top priorities. However, taking action in favor of the population's health can only happen with the support of local authorities. It implies the implementation of an adapted governance that relies on a global approach of health, to ensure adequate access to public services and to health infrastructures.

Territorial development is a multidimensional sector of which the choices can positively or negatively impact people's health and quality of life, according to more or less complex mechanisms. 80% of the health sector relates to elements that aren't in direct relation with the treatment system properly speaking. Preparing the organization and the development of the territory by integrating dispositions to improve citizens' quality of life, are determining elements.

Elected and local leaders must be encouraged to include health matters within development policies, relying on planning documents linking planning of the health system and planning of the territorial development geography. Furthermore, health policy can only succeed if significant room is made for inclusion - especially of the most vulnerable populations - and to build social link.

In front of those challenges, solutions arise. The development of digital technologies as a tool for treatment







access and for the reduction of territorial inequalities or the development of e-health call out for a new approach of health-related matters on local territories. They facilitate treatment accessibility for all and improve people's life conditions.

Lastly, from a governance viewpoint, public authorities are invited to insist on prevention and on educating the population about health, in order to anticipate, be prepared and counter in the best possible way health, climate or food hazards.





# PART 2

## RECOMMENDATIONS AND EXAMPLES

### Recommendation 1

**Promote a global approach of health.**

#### Implement a territorial diagnosis

Encourage the implementation of a territorial diagnosis of health projects, essential planning tool for:

- a better identification of the treatment supply on a given territory;
- a better definition of the access conditions to treatment on a territory;
- a better identification of health issues and the most vulnerable populations.



#### TOOL

#### Implementation of a contract system

In France, the implementation of health regional projects (PRS - *Projet Régional de Santé*), can be the object of local health contracts (CLS - *Contrats Locaux de Santé*) that the Regional health agency (ARS - *Agence Régionale de Santé*) signs with cities and organizations, among others, to reduce territorial and social health issues. This contract can show local dynamics driven by actors and partners jointly on the field to

implement actions as close as possible to the population. It consists in:

- facilitating care and health circuits, thanks to health prevention actions, to the organization of the health chain, and to a medical and social guidance;
- considering other factors which impact the health and life of populations like housing, food, environment, education, or work.

[www.ars.sante.fr](http://www.ars.sante.fr)



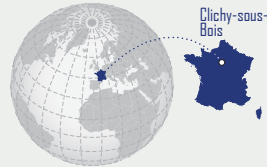


## PROJECT

### Local health contract in Clichy-sous-Bois

Following the identification of several cases of tuberculosis, a testing strategy was implemented as part of the Local health contract (CLS – *Contrat Local de Santé*). Prevention actions were reinforced through more active testing to encourage inhabitants to get tested.

(Clichy-sous-Bois - FRANCE)



[www.professionbanlieue.org](http://www.professionbanlieue.org)

## Adapt the governance the anticipate the crisis

Anticipation is a determining element of health crisis management. It requires the implementation of a governance system adapted to crisis (pandemics, climate, food), including a regulating authority with the role of a multi-partner steering committee which involve local actors.

## Mobilize all health actors

Mobilize all health actors, public and private, all of them essential to the system since they also build health equipment and health research.

### The role of States and of pharmaceutical companies in ensuring drugs safety

States have a central role in drugs' safety control. In France, a national agency fulfills this role and grants an authorization to enter the market, according to a regulated process. But not all countries have such tools, and parallel or online markets bring about dangerous drugs.

More than 70% of the drugs sold and used in Africa are counterfeit. Big pharmaceutical groups (including Sanofi) are getting organized to facilitate the supply system thanks to a better

trackability of the drugs chain.

The creation of a coalition of industry owners of the food industry on the one hand, meant to protect their supply chains, their product portfolios, and biodiversity on the other, are both examples of the need to bring private actors together around objectives centered around the general interest, relevant to both health and climate-related matters.





## Recommendation 2

### Include health-related issues into public policies and territorial planning.

#### Take action on urban planning to take action on health

To protect people's health, include health-related issues into planning documents while linking them to the question of the place of nature in the city (green and blue corridors, biodiversity, urban heat oasis, landscape), by choosing a type of planning and design adapted to public spaces.

Include into planning documents an environmental diagnosis with a chapter about health.



#### TOOL

#### Health: a commitment of the EcoQuartier (green neighborhood) program

The EcoQuartier program suggests the creation of an exchange community centered around creating or regenerating sustainable neighborhoods. Without imposing any model, it offers an integrated toolkit, a vade-mecum of 20 commitments (articulated around the SGDs) and a question list to look into before initiating sustainable urban development projects. Prevention and anticipation through

urban planning are of primary importance to “ensure safe life conditions which integrate great health challenges” (8th commitment of the EQ toolkit).

In 2019, we count 570 green neighborhoods in France, 232 of which are now past the project phase, 40% in rural areas and 60% in renewal projects of existing cities.

[www.cohesion-territoires.gouv.fr](http://www.cohesion-territoires.gouv.fr)

#### Integrate health into urban projects

Integrate health issues into urban development operations by making sure that all actors, both public and private, take it into consideration.

Implement guidance to facilitate the appropriation of health challenges by local authorities and by the actors of urban development.







## PROJECT

### Link health and urban development together

In keeping with works led on “Health-friendly urban planning”, the School for advanced studies on public health (EHESP - *Ecole des Hautes Etudes de Santé Publique*), has been leading since 2017 the national project called ISadOrA (Integration of Health in development operations), in collaboration with the Urban Planning Agency of Bordeaux metropole Aquitaine (Aurba) and with the French network of Urban Planning Agencies (Fnau), and funded by the Ministry of Health and of Urban Development and by Ademe (national agency for energy control).

With an interdisciplinary national working group, the objective is to elaborate a manual to give professionals in the field of urban development the operational keys they need to place health at the heart of urban development and urban planning projects. The final deliverables identify a group of good practices meant to minimize people's exposition to risk factors and to maximize their exposition to protection factors, at the scale of the concerned operation. Conformingly to the directions decided by the EHESP, one of the priority axes of ISadOrA is to fight social and territorial health inequalities.

[www.ehesp.fr/en/](http://www.ehesp.fr/en/)

### Include health to urban projects

Attach public health objectives to the funding of construction programs and of renovation programs.

### Governance

Foster a dialogue between the territorial actors and elected leaders about health challenges, especially at the local level.

Give priority to urban development actions based on the needs and on the level of emergency of each local context.

### Public policies and planning

Adopt measures that are in adequacy with the local housing context, especially when it comes to informal housing, oftentimes the most affected by pollution and hazards. Offer adequate urban development and facilitate eco-constructions supported by architects and professionals to embrace health-related challenges (choice of materials, sanitation, A/C).

Set priorities of urban development projects based on the needs and level of urgency of local situations.





### Recommendation 3

**Strongly improve the treatment supply and the treatment access systems.**

#### Rely on digital technology

Facilitate universal accessibility to treatment thanks to e-health. Use ambulatory medicine and telemedicine as access tools for basic care (primary care policies).



#### PROJECT

##### Digital systems in favor of health



The Cellal e Kisal program, carried by the AMREF organization, aims to reduce infant, neonatal and maternal morbidity and mortality. Thanks to an integrated system that uses information and communication technologies, it reinforces the access to quality health services' supply, articulated around interconnected technologies.  
(Kolda Region - SENEGAL)

[www.amref.org](http://www.amref.org)



Led by the GRET, in association with Djantoli, the project combines mobile technologies, micro-health insurances and preventive guidance to fight youth mortality. New tools are elaborated like the electronic health book and an insurance system, to facilitate treatment access.  
(Gourma Province - BURKINA FASO)

[www.gret.org/?lang=en](http://www.gret.org/?lang=en)





## Improve access to care

Offer local treatment, information and prevention supply, in particular for the most underprivileged populations.

Improve the articulation of the primary, secondary and tertiary treatment chains and improve the quality of the provided services.

### Articulate the primary, secondary and tertiary treatment chains

**Primary treatment** is a low-technology type of treatment that doesn't require to house the patient, performed by a GP or a qualified medical team.

**Secondary treatment** implies a specialty performed in a suitable structure.

**Tertiary treatment** is a highly specialized treatment.

A brainstorm at the local level about treatment is meant to organize the articulation between the various levels of treatment by facilitating the sharing of information, the dialogue and the processes between actors. It's often the levels of information, of availability and of qualifications of the primary treatment which push patient to go directly to the hospital or not.

## Cooperation networks

Improving the medicine distribution can nurture innovating systems of international cooperation.

## Funding

Implement a funding system adapted to the inhabitants' resources and to the treatment structures, to support their financial autonomy and to improve the treatment access for all.

## PROJECT

### Funding and health improvement

This project funded by AFD supports health improvements in the Northern regions of Mali through the implementation of health centers and through a support to the evolution of the treatment funding system, meant to encourage the centers' autonomy and an improved care of the populations. The objective is to reduce maternal and infant mortality while strengthening the functionality

of health structures. (North Regions - MALI)



[www.afd.fr/en](http://www.afd.fr/en)





## Recommendation 4

### Make prevention and education two cornerstones of health.

#### Educate and empower actors

Educate health actors in all domains to encompass all the determining elements of health and of life conditions by associating these stakes in education programs.

Implement prevention and education programs intended for the populations about priority health topics (sanitation and drinking water, hygiene, sexually transmissible diseases, protection and birth control).

#### PROJECT

##### To be an actor of one's own health

The maternal and infant protection (PMI – *Protection Maternelle et Infantile*) activities in Seine-Saint-Denis affect about 300 000 people of which about 200 000 kids aged between 0 and 6. The 114 PMI centers and family planning centers are free of charge and respect the anonymity of all, especially of pregnant women, of children under 6 years old and of their family, of couples and of the youth.

Prenatal consultations or house visits are performed by GPs or nurses. The PMI teams follow future patients throughout the pregnancy. Parents can have consultations to follow the health of their child aged under 6 years old. This follow-up allows them to

make sure of the child's good development, to detect potential handicaps and to update vaccinations. The PMI consultations are an opportunity for parents to discuss the questions they might have about the child's life. Health checks are also performed in schools. (Seine-Saint-Denis - FRANCE)



[www.seinesaintdenis.fr](http://www.seinesaintdenis.fr)





## Inclusion and social link

Encourage physical activity, generator of social link and a tool to prevent health issues, in particular in relation to the environment (air quality, physical mobility, nutrition), through the development of local infrastructures.

### PROJECT

#### Sports courses in the public space

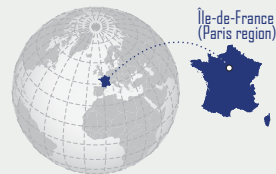
Regular and physical activity, focused on the improvement of life conditions, is of course inscribed in sustainable development strategies. It fosters social cohesion, integration and mutual respect of the living organisms and contributes to knowing and protecting natural resources as well as everyone's health.

Public spaces in the cities are now more and more shared and used by sports practitioners who aren't involved in sports clubs/associations, and amateur sports keep on increasing. From delocalized practices to the hijacking of urban properties, cities are becoming real playgrounds.

As a consequence, democratizing and enabling access to sports has become a major challenge to grant the opportunity to practice those sports in a playful and environmental-friendly way.

The Est Ensemble agglomeration implemented a project based on a development that facilitates the re-appropriation of the Ourcq canal and the promotion of a singular and cohesive living space on the waterside. This strategy is implemented through the development of innovating public spaces, with temporary occupations set during the time the project is developed. The EcoCité project relies on five distinct development operations which will be articulated around 3 new centralities, including a sports course all along the Ourcq canal.

(Paris area, East Ensemble agglomeration – FRANCE)



[www.estensemble.fr](http://www.estensemble.fr)





## Raise awareness among the population

Foster the inclusion of the population into systems of hygiene and sanitation improvement, especially of the most vulnerable populations, the one most affected and in the most underprivileged neighborhoods. Les sensibiliser thanks to communication and education tools and thanks to quick improvements in the form of short-term occasional urban developments.

### PROJECT

#### Project to improve hygiene and public health

To improve hygiene and sanitation in the underprivileged neighborhoods of Antsirade, Syctom did a local mapping of organic waste and installed a compost, treatment and recycling station of plastic waste. These installations were completed with awareness actions and communication to sustainably ground the improvement of inhabitants' health condition.

(Antsirabe - MADAGASCAR)



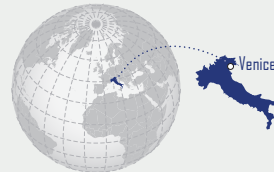
[www.syctom-paris.fr](http://www.syctom-paris.fr)

### PROJECT

#### Removable gateways to circulate on flooded streets

La ville de Venise déploie des passerelles Venice develops movable bridges when water rises in the lagoon. Neighborhoods of Manille, exposed to similar water hazards, places ahead of time removable pedestrian ways – which are in fact supporting built-up structures, or built with recycled wood, on

which solid planks are laid in case of floods. (Venice - ITALY)





# CONCLUSION

## Key-words



## Memo

Protecting the inhabitants' health, well-being and quality of life implies to:

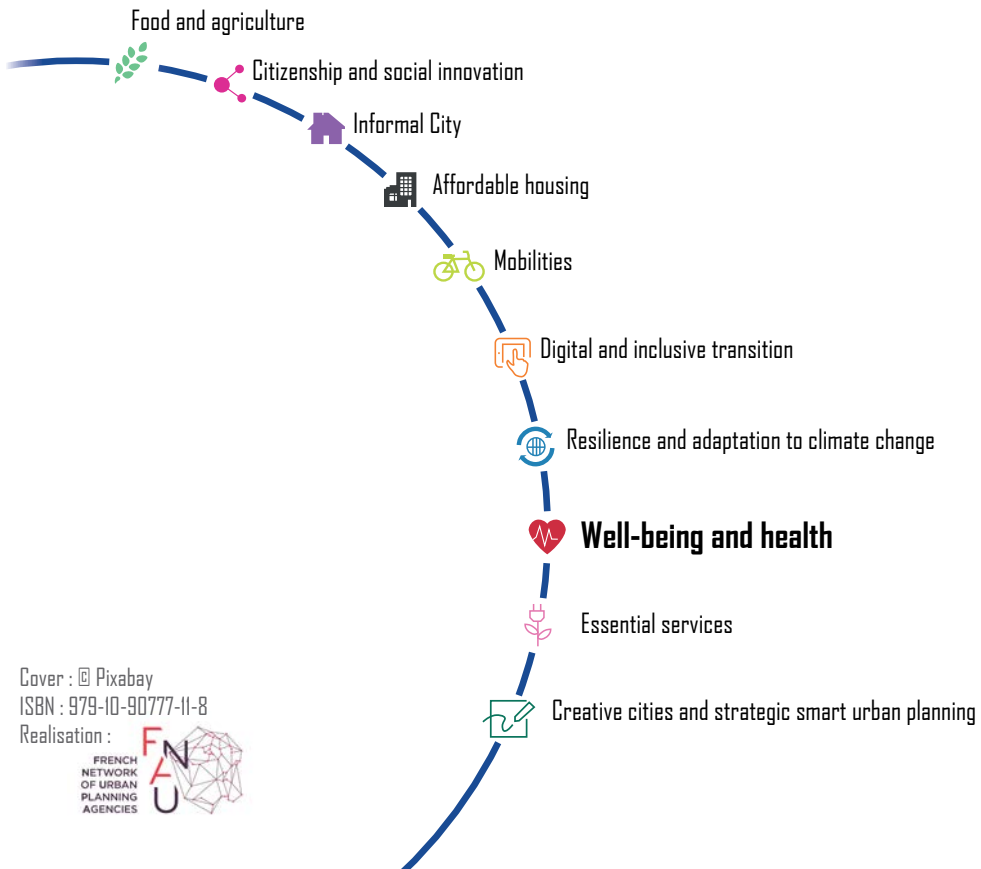
1. Reduce the emissions and expositions to polluting products and to nuisances, in parts by protecting and promoting the environment and the natural resources.
2. Encourage health-friendly ways of life thanks in parts to physical activity and to the access to healthy and sustainable food.
3. Promote social cohesion and the well-being of the inhabitants by offering them housing, mobility and hobby opportunities, especially in the public space.
4. Facilitate access to jobs thanks to equipment and services, among which treatment, health and social services.
5. Reduce social and environmental health inequalities by lending particular attention to people in vulnerable situations.
6. Ensure the articulation of the different public policies (environmental, green spaces, mobility, housing, etc.) in regard to their impact on health.
7. Implement strategies that foster cross-sector approaches and involve all participating parties, including citizens.
8. Elaborate projects that are in adequacy with local specificities, and that can adapt to social and environmental evolutions (for example: ways of life, climate change, energetic transition).

(EHESP-RBUS, 2019, The 8 axes of health-friend urban development)





Started in 2011, the **French partnership for cities and territories (PFVT – Partenariat Français pour la Ville et les Territoires)** is a platform meant for the exchange and valorization of the French urban actor's expertise at the international level. It is a multi-actor partnership headed by Hubert Julien-Laferrière, Member of Parliament, supported by the Ministry of Europe and of foreign affairs, the Ministry of territorial cohesion, the Ministry of the ecologic and fair transition, and the Ministry of culture. It brings together close to 200 organizations representing the diversity of the French expertise, contributing to the construction of a shared French vision based on a capitalization of exchanges and of innovative and sustainable experiences.



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