

Realized for the World Urban Forum of Cairo (Egypt) in november 2024  
on the theme "It All Starts at Home : Local Actions for Sustainable Cities and  
Communities"

Summary of group works  
2023- 2024

# HEALTH:

## THE CITY OF "CARE": WHAT ARE THE LEVERS FOR URBAN PLANNING TO SUPPORT HEALTH AND WELL-BEING?







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For this 12th edition, the French Partnership for Cities and Territories (PFVT) has relied on and further developed prospective works gathered across the years. The following elements are based on recommendations and projections for 2050 produced by the group that worked on “Health” in preparation for the last Forum in Katowice in 2022. Relying on these, and together with international experts, the youth and all parties involved, we’ve attempt to envision a desirable future with the key steps needed to implement urban planning policies supporting health, in Senegal and in France.

Previous recommendations to recall:

- Make health a primary decision-making criterion
- Make it systematic and mandatory for urban planning and urban strategies to consider health impacts
- Promote cross-discipline processes and involve stakeholders from various backgrounds
- Consider the complexity and diversity of territories and audiences
- Produce more studies on the economy of health
- Set-up more prevention and health programs and put people back at the heart of it
- Generalize training for all actors of the urban field.



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# Contributors

## Facilitation

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- Rachel Bocher, Head of Psychiatry at Nantes' Centre Hospitalier Universitaire

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# Summary

## INTRODUCTION

6

## PART 1 - COLLECTIVE CHALLENGES

8

An ever-changing global context transforming the ways we make cities  
Climate change challenging health-friendly environments  
Making better use of some action tools to turn the city of tomorrow into the city of cohesion

## PART 2 - GUIDELINES FOR 2050 : Toward the city of Care

12

Collective pathway  
Pathway based on France  
Pathway based on Senegal

## PART 3 - RECOMMENDATIONS

20

- Recommendation 1: Organizing the growth of competence and trainings, making sure to get everyone on board
- Recommendation 2: Strengthening the tracking and assessment of public urban policies and fostering conversations
- Recommendation 3: Including the "One-health" concept and climate change to urban and urban development policies
- Recommendation 4: Answering essential needs by making urban systems more self-sufficient
- Recommendation 5: Promoting urban planning policies that combine health environment and the impacts of climate change
- Recommendation 6: Starting the decarbonation process of health systems while securing populations' needs
- Recommendation 7: Promoting urban planning policies that take care of mental health, especially for the youth

## CONCLUSION

27



Urban growth is intensifying. By 2050, 7 people out of 10 will be living in an urban environment, meaning that in the near future, humanity will be largely “urbanized”. This process goes hand in hand with our Anthropocene era, as described by scientists. With the Anthropocene comes new challenges, including the ones related to climate change. Adding to the chronic diseases that have been running through the past century and related to our ways of life (cancer, diabetes, obesity), new risks are appearing: resources are rarefying and getting damaged, cataclysmic floods and heat wave episodes, soil and air pollution, etc.

## **We thought infectious diseases were under control; but they’ve come back, due in part to our dense and polluted habitat**

We must get ready for new pandemics, similar to the COVID-19 one. Tiger mosquitoes, an urban species, has found a new home on the French territory, and this situation is meant to last. Its presence is connected to climate change and human activities. It has caused the first cases of dengue fever in France.

## **Climate inequalities increase health inequalities**

This evolution of the epidemiologic profile together with transformations applying to our habitat types impact our physical and mental health, with strong differences based on social conditions.

Although situations vary between metropolises from the South and the North, between big and mid-size cities, they tap into the same kind of issues. The cumulation of social and

environmental risks impacts mainly lowest-income populations.

## **From “urban-friendly urban planning” to “One-Health”**

For decades now, we’ve been looking into ways to build healthy and sustainable urban environments, as the “urban-friendly urban planning” concept shows. The World Health Organization put this concept forth in the 80’s, making it rely on three key points:

- an **integrative approach** to health issues (public and mental health, environmental health, environmental risks related to anthropic activities)
- a **global approach** where collective health is seen as the result of an exposure to risk factors (pollution, sedentary lifestyle, etc.) and to protective ones (care, green spaces), that will impact health whether positively or negatively
- a **systemic approach** involving actions to be implemented in accordance with territorial complexities.

A new concept has appeared lately, more in line with the current evolutions and in continuity with the previous approach. This idea, known as “One-Health”, is meant to renew our understanding of health and to reconsider the links and interdependences that exist between human health, animal health and ecosystems in general – also in the context of climate change.

We’ve focused our thoughts on four main points: **the direct impacts of transitions on physical and mental health; prevention and preparation to emerging health situations,**

**and crisis** (heat waves, floods, etc.); **the fight against inequalities** (gender-related, or related to health access, social services, climate change impacts, etc.); **and the indirect impacts of transitions on health** (water access, food and nutrition, migrations, etc.)

This approach allows for an entry that is particularly suited to cross disciplines, as we can see in the variety of fields represented by the members of this working group which brought together the skills of experts, local authorities, NGOs, state services and other partners. The reading grid used here is mobilized as a resource to reduce risks and to promote a positive vision on health. This process starts with identifying how climate change will affect our physical and mental health and our well-being, and then leads to designing new benchmarks to support the making of our cities.

## **In what way can health be a key to stimulate urban planning policies and territorial sustainable development, to serve the well-being of all? How to envision cities of “care” for the coming decades?**

When it comes to the method we used, we organized three work sessions to discuss Senegalese and French experiments. The first one (Senegal) led us to explore the “One-Health” concept. We identified various impacting factors for health. There are many, and many are already known; we

connected them to health-related overall determining factors: human biology and genetics, physical environment, life and socio-economic conditions; living habits and behaviors (individual and collective); health systems. During the second work session, we gathered and focused our thoughts around the four topics mentioned above since they seemed to us of particular importance in regard to climate change on the one hand and to the “One-health” concept on the other. During the third work session, we established guidelines to be followed until 2050, promoting health-friendly urban planning to be a red thread of our policies, based on recommendations and on positive exemplary cases in France and abroad.

The many International Panel on Climate Change (IPCC) reports have been telling us that now is the time to decide for our planet’s future. The same goes for our cities’ future: now is the time to take action in favor of the city of “care”.

Françoise Schaetzel,  
Président of Strasbourg urban planning agency (ADEUS), vice-President of Strasbourg Eurometropole in charge of operational urban planning, life quality, air quality, and environmental health

Laurent Chambaud  
Former Director of the School of Public Health



# PART 1 : COLLECTIVE CHALLENGES

## An ever-changing global context transforming the ways we make cities

### Our cities' shapes need to adapt to climate change

Significant progresses have been made in France since the first big heat waves in the years 2000, for instance with better house thermic isolation for fragile populations, or the development of fresh areas. However, many people still lack access to green and vegetated areas. They suffer from the lack of space, isolation, or ventilation in their apartment. Buildings aren't protected enough against floods or other climate episodes.

Climate disruptions also trigger new plagues such as the one linked to the presence of tiger mosquitoes in Europe.

Besides, climate change strongly challenges the solidarity that we greatly need between us to handle great domestic and international population movements of people fleeing living environments that have or will become too hostile.

### Trying to make cities more self-sufficient to face territorial dependencies

The last pandemic has emphasized the global dimension of our world. In the face of deceases, we all face the same risks. Yet this pandemic has also put forth new expectations from people living in cities regarding more suitable ways of live, including when it comes to our relationships to plant and animal life. We've talked about and experimented with shorter food supply chains for instance, looking for more self-sufficiency.

### A better knowledge of the urban risk factors for people's health

Although air, soil and water pollution aren't new and are maybe decreasing or taking different forms (micro-plastic, nanoparticles), their impacts on people's health, animals' health and on the environment are now known with increasing accuracy. Endocrine disturbers or other chemical products impregnate food and have harmful effects; peri- and polyfluoroalkylated substances impact ecosystems. Pollution kills 40 000 people each year in France, causes chronic deceases, and impacts perinatal care. People have growing and urgent expectations to live in environments that won't put their health at risk. Such demands call for public policies and economic stakeholders to rethink sectorial policies (mobility, hygiene) in a transdisciplinary approach of "territories of health".

## Climate change challenging health-friendly environments

### Protectiong people's essential needs despite resources rarefying

Providing sufficient and quality services to populations to answer their essential needs means making health the heart of urban policies. There is a lack of balance between different urban environments. In mid-size cities, essential services are disappearing although they concentrate in big cities. Moreover, access to collective resources and commons such as water are relatively limited at the global scale. We must manage resources in a way that considers the demography. Then, health systems themselves are under pressure because of them contributing to the carbon footprint. We have to operate changes to transform those systems from within or redevelop them in a context of frugality - in order to avoid adding to climate change's negative impacts. This conversation brings forward the questions of how to use and share limited natural resources. A collective approach to regulate those goods (through law, politics, economy) will lead to protecting vital resources and reduce inequalities. The fact that these factors are inter-connected and that they impact health means that we need to open up the conversation on the responsibilities behind some vulnerabilities sometimes made invisible.

### The combination of environmental, territorial and social inequalities translates into health inequalities

The spatial distribution of environmental pollution (air, soil, pesticides, endocrine disturbers, etc.) adds to the socio-economic repartition of population classes on territories. For instance, rents are cheaper for housing located near great axis of circulation and organic food is more expensive. Action leavers aren't the same everywhere, which increases the some people and places' fragilities. Health access and access to social protection are strong factors to improve health, cohesion and equality. However, many other factors come in the way, some of them having to do with the environment (geography, living conditions), some being socio-economic (gender, cultural or economic conditions). This becomes even truer if we look at informal territories where inhabitants have great difficulties to access health services although they're already very exposed to pollutions and to the lack of essential services.





## Making better use of some action tools to turn the city of tomorrow into the city of cohesion

### No global health without mental health

The COVID-19 pandemic highlighted the importance of cohesion. We are emotional sponges, and cities have more than ever become the epicenter of fears and desires, something that implies a necessity to adapt in order to implement prevention policies. The city in itself won't trigger mental troubles; but when it is badly managed and maintained, it can contribute to more anxiety and psychological disorders. We are here to set up a path for the future, because humans have to be urgently brought back at the heart of any urban project. Through densification and through mixing functions, cities have to be a place for citizens to thrive at any stage of their life, for social and generational diversity.

### Some approaches are too far from people's needs and too compartmentalized

Health is a cross-disciplinary entry point into territorial public policies. We must urgently get all people on board through positive storytelling, to start a true acceptance and appropriation of these questions both by the population and by the elected representatives and private stakeholders involved at various territorial levels. It is vital that cities promote cohesion, for cooperation to happen (between generations, between urban and rural areas, between countries of the North and of the South, between mid-size cities, etc.). Moreover, the fact that sectorial policies and administration are still very compartmentalized and not connected enough, limits the local governments' capacities to connect urban planning to physical and mental health. The idea is to work toward a more inclusive and balanced governance, in order to include territories and collective authorities to decision-making processes.

### Urban engineering tools : working both in favor and against health

A great amount of data is available on health, on the environment and on climate change, thanks partly to observatories. This data is very important to get prior to drawing public policies, in order to give the right orientations and also, after the policies are drawn, in order to compare and assess them. Urban engineering can't do without new technologies anymore. Yet, although we truly understand the benefits of data, using them can imply various obstacles – some of them relating to ethics, with new exposure of vulnerabilities (cyber-risks, privacy protection, etc.); some of them relating to the digital divide (access to data, competence, etc.). By 2050, 66% of the world population will be living in cities (instead of 54% today). Each major transformation has to be thought in a way that keeps the human factor at the heart of every new urban project – including at the heart of the Smart City concept. This a great challenge for smart cities, which have to learn how to control Quali-city solutions (relating to availabilities, confidentiality, data integrity), and thereby be able to understand and limit vulnerabilities – for the “Smart City” to become the “Safe City”.



## PART 2 : GUIDELINES FOR 2050 :

### Two-way perspective: France - Senegal

The PFVT “guidelines” are operational synthesis that rely on the outcomes of workshops and of crossed perspectives held between French and international actors. They are structured around two axes of reflections, crossing different topics: 1, Actors and governance; 2, Disparities and social justice. The idea is to present a set of concrete policies and action levers for the short, mid- and long run. Health, being a topic that all territories are concerned with, is at the heart of a first common guideline (purple). Two other guidelines follow (blue for France, pink for Senegal), due to the complexity and the diversity of the territories that were looked at, and to the granularity of actions, depending on the scale. By collecting knowledge, PFVT defines key steps to guide territories into taking action beyond the UN’s Sustainable Development Goals.

Participant’s word –

Dr. Rachel Bocher, president of the French national inter-union of hospital workers

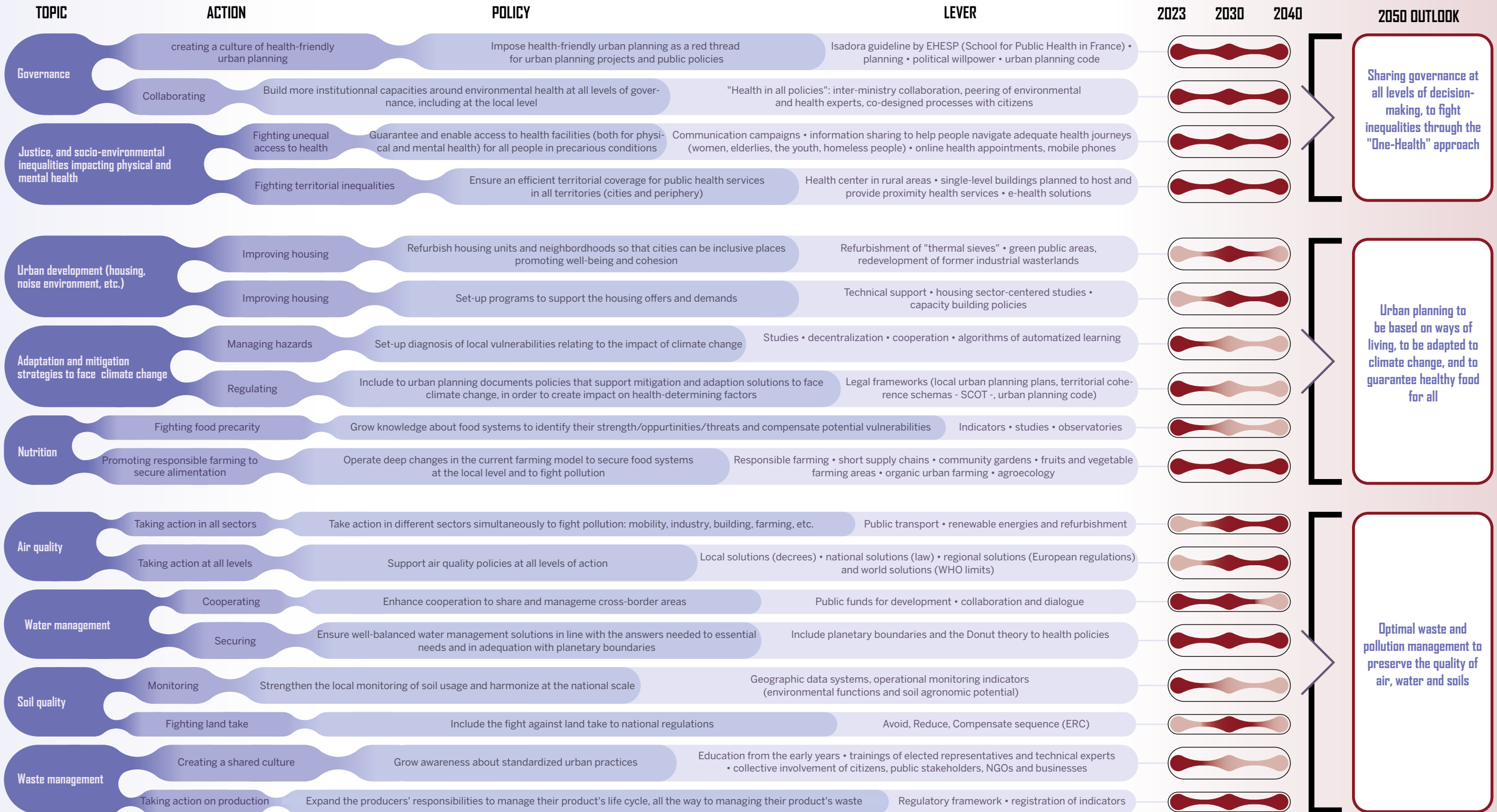
#### **The future of health-friendly cities and territories involves six concrete action steps:**

1. Changing citizens’ representations on chronic and mental diseases through campaigns to communicate, raise awareness and to fight stigmas.
2. Reduce health-related inequalities to reduce vulnerabilities by considering major societal criteria: housing, education, cohesion, cultural and art practices.
3. Encourage a shift from a culture of “care” to a culture of prevention: working toward identifying diseases symptoms at early stages to raise awareness and encourage preventive practices (sport, nature, etc.)
4. Ensure fundamental rights and health care for everyone, particularly for people diagnosed with a mental disorder.
5. Get elected representatives to commit to renewing democratic dialogue with their cities, to promote cohesion and social mix – a process which works in favor of collective well-being.
6. Prioritize the well-being of humanity by considering everyone’s future. This vision is part of the Copenhagen Consensus between mayors : a better health and more happiness within cities, for everybody (OMS Europe, 2018).

## TOWARD THE CITY OF CARE

Actors and governance  
& inequalities and social  
justiceCreating socio-economic environments which  
benefit public health &  
environmental policies

## Acteurs et gouvernance

Changing ways of life to  
build more resilient citiesInequalities and social  
justiceManaging ecosystems and  
resources to improve health  
for human beings, animals  
and the environment





France

TOPIC

ACTION

POLICY

LEVER

2023

2030

2040

2050 OUTLOOK

Actors and governance & inequalities and social justice

Governance

Growing awareness and training

Grow capacities and knowledge about health-friendly urban planning strategies

Support inter-ministry collaboration • connect environmental and health experts • promote interconnectios and complementarity between actors

Justice, and socio-environmental inequalities impacting physical and mental health

Fighting bad housing conditions

Develop and refurbish existing buildings to create decent, affordable and energy-efficient urban and building assets

Insalubrity police related to local authorities

Urban development (housing, noise environment, etc.)

Encouraging physical activity

Support physical health by promoting and enabling "walkability", to improve mental and physical well-being

Territorial pathways grids • road signs, road markings, 30km/h area, sidewalks • urban health routes

Adaptation and mitigation strategies to face climate change

Regulating to advocate for sobriety

Support urban sobriety to make cities more resilient to climate change

the "Avoid-Shift-Improve" principle (by IPCC) • frugal A/C systems • solar panels

Nutrition

Adapting

Prepare for adaptation to rarefying water resources by changing the current farming model

Adapted cultural practices • drip irrigation • rotational crop

Actors and governance

Air quality

Taking action in a systemic way

Encourage urban initiatives which support zero pollution strategies

Cities Mission of the Horizon Europe program

Water management (qualitative and quantitative)

Taking action on consumption habits

Fight overconsumption and water waste

Regulation • progressive pricing system • reclaiming, recycling • rainwater re-use for housing (toilets) and green urban areas (irrigation)

Soil quality

Fighting land take

Divide by 2 the soil consumption rate between 2021 and 2031 and reach the Zero Net Land Take objective by 2050

Call for Zero Net Land Take interest by the French Agency for Ecologic Transition (ADEME)

Waste management

Making people feel accountable

Stop sending developed countries' waste (often toxic) to the developing and least advanced countries

Regulatory framework for illegal waste exports

Inequalities and social justice



Senegal

Actors and governance & inequalities and social justice

Governance

Governing

Improve decentralization processes and guarantee governance frameworks in line with the "one health" principle

Regulation • multi-actor processes • democratic approach

Justice, and socio-environmental inequalities impacting physical and mental health

Fighting inequal access to health

Open up access to health insurance, especially for the most vulnerable people (women, informal sector inhabitants, poor people elderlies, etc.)

National law on universal health coverage • health insurances • e-health

Urban development (housing, noise environment, etc.)

Planing projects collectively

Reconnect the city on paper (as defined by laws and urban planning plans) with the real life city (as made and experienced by the people who live in it)

Dialogue between urban stakeholders • collective/circular/transitory urban planning

Adaptation and mitigation strategies to face climate change

Preparing

Develop infrastructure to adapt to climate change

Drainage infrastructure • solutions to open up and/or reconnect isolated neighborhoods • securing of material goods and of flood-risk areas • natural ventilation systems

Nutrition

Growing

Support agro-ecology as a resilient farming solution, at all levels of action

Family farms • crop diversification • biological input • off-ground cultivation • climate info services

Actors and governance

Air quality

Regulating

Create and impose legal frameworks that include air quality standards

Norms to apply to certain sectors (energy, transportation, farming) • collaboration between different actors and fields

Water management (qualitative and quantitative)

Taking action on water ressources

Significantly improve people's health conditions and their universal and secured access to water and sanitation

Water infrastructure • healthcare infrastructure (development of health and water networks, sanitary sewer, recycling and rain sewers)

Soil quality

Preserving

Fight desertification through legal and financial levers

Regreening and reforestation • changing farming habits • rebuilding biodiversity

Waste management

Managing waste

Set-up efficient policies and infrastructure to guarantee good management of city waste

Organize regular waste collection • selective waste sorting • recycling • waste burn-off monitoring

Inequality and social justice

Build health-friendly urban planning thanks to good access to services and inclusive social coverage

Support an environment favorable to well-being thanks to resilient, sustainable, decarbonated, self-sufficient and proximity services

Control waste and pollution to ensure good soil quality and fair management of water resources

Decentralize democratic governance to build resilient, inclusive and accessible health systems

Equip urban systems with essential, resilient and sustainable services which guarantee sufficient and healthy food for all

Limit pollution and waste to preserve air and water quality



FEUILLE DE ROUTE

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## PART 3 : RECOMMENDATIONS

For this 12th edition of the World Urban Forum (WUF), FNAU deepens its previous reflections and grounds its work in projections and recommendations brought out in Katowice in 2022. Using these as a basis, PFVT aims to provide new recommendations and make them as exhaustive as possible, both by going deeper into each topic and by producing new ideas.

### Recommendation 1

*How to articulate the “One-Health” concept with environmental health on the one hand; how to articulate urban planning with territorial development on the other. These priorities are still new to many actors, who know little about it. Even the concept of urban-friendly urban planning isn’t mobilized enough although it has triggered more and more initiatives.*



### Organizing the growth of competence and trainings while making sure to get everyone on board

- Identify the action levers available for governance and the tools for authorities to use
- Grow awareness among city makers (urban planners, architects, developers, builders, etc.) about virtuous practices (sustainable management of resources)
- Encourage training among decision-makers who can operate immediate change: local authorities, businesses, state institutions. Extend school education programs with topics related to health and to the environment, to encourage the youth to become a part of the decisions
- Draw a keen attention to the most vulnerable populations (women, disabled people, kids, elderly people, local populations, people living in informal habitat) in city development processes

### Charter for health-friendly habitat and construction, city of Grenoble, 2023, FRANCE

70% of determining health factors are related to the environment, to ways of life and to socio-economic conditions. This is why urban development is so important. Knowing this, the city of Grenoble has decided to orientate its policies based on the principles of habitability, hospitality and inspiration, in order to provide its inhabitants with a city that aims to be collective, cohesive, welcoming and nice place to live in.

### Recommendation 2

*The crisis triggered by the COVID-19 pandemic emphasized the need for systems able to identify infectious diseases at early stages. Other data exists, provided by high or low tech processes, to anticipate natural catastrophes and monitor microplastic and other metabolites in the water.*



### Strengthening the tracking and assessment processes of public urban policies and fostering conversations

- Identify and develop indicators to use them as prevention and health management tools, making sure to adapt to each context
- Provide cohesive local plans, whether topic-specific or crossing topics
- Set up processes to monitor, assess and compare significant health experiences to also share their results (local health contracts in France for instance)
- Promote knowledge and experience sharing between the local authorities involved with urban planning issues and with the “One-Health” concept, and between countries from the North and the South. The large spread of innovative initiatives can help take a fresh look at solutions to be considered.

### European Climate and Health Observatory, 2021

This is a joint initiative of the European Commission and the European Environment Agency. Its goal is to help the EU preparing for the risks induced by climate change on human health, and adapting accordingly thanks to centralized data and tools. The project promotes data sharing and cooperation between the international, European, national, nongovernmental and sub-national stakeholders involved.



### Recommendation 3

Urban development policies do not fully include a global approach of health and of its consequences, firstly because of the lack of binding normative frames and then because of the need to get elected representatives, citizens and private actors more actively involved.



### Including the “One-Health” concept and climate change to urban planning and development policies

- Prior to any project, include the health and environmental impacts induced by climate change as determining decision criteria of urban development programs and of field-specific public policies (mobility, housing, public spaces, etc.)
- Acknowledge health-related aspects in local and national urban development projects and in planning documents (in France: PLUi, PCAET, SRADDET<sup>1</sup> etc.). Avoid stacking up information in those documents to ensure that they remain readable and appropriable.
- Promote cross-topic approaches, create bridges between competences, in order to guarantee systemic health-friendly urban planning strategies in city making processes. This implies to promote knowledge and experience sharing between actors and fields.
- Increase surveillance for territories that cumulate social, environmental and health risks. Promote health-friendly initiatives as a way to reduce inequalities and serve social justice. progresser la justice sociale.

<sup>1</sup> PLUi: inter-municipalities local urban planning plans; PCAET: territorial air, energy, climate plans; SRADDET: regional development schemes for sustainable development and territorial equality.

### Inter-city local plan for urban planning, habitat and displacement (PLUi HD), 2022 (FRANCE)

Elected representatives of Dunkirk elaborated a local urban planning plan centered around two points: the sought for carbon neutrality, and health. This document results from the intention to improve life quality and conditions, and people's well-being.

### Recommendation 4

Between climate hazards dwelling on agriculture, dependency to global market and chemical intrants, biodiversity, human health and animal health are affected by many repercussions. This situation puts urban areas and resources at risk.



### Answering essential needs by making urban systems more self-sufficient

- Recognize essential resources (water, food, etc.) as common goods and include current and future population's needs to any urban development process
- Promote urban agriculture as a way to improve cities' food security, for instance with short supply chains, local markets, platforms for direct sales, etc.
- Ensure and monitor fair and qualitative water use and sharing between inhabitants, public and private stakeholders
- Ensure fair access to health systems by crossing policies, especially by policies crossing urban mobility with access to health professionals
- Ensure qualitative life conditions by rethinking urban facilities, emphasizing the mutualization of public spaces, the creation of new cross-disciplinary and cross-topic partnerships between various services; for instance, using schoolyards for sports activities, creating transgenerational areas to help elderly remain able to live at home, developing urban agriculture, etc.

### “Cities and territories without endocrine disruptors” Charter, 2020 (FRANCE)

The campaign for “Cities and territories without endocrine disruptors” was led by the Health and Environment Network. Through various measures, the charter provides local authorities with opportunities to get involved with protecting populations and ecosystems from exposure to endocrine disruptors. For the first time, a public organization in charge of drinkable water management, sanitation, water ecosystems and flood prevention - namely the Water and sanitation syndicate of Alsace Moselle - signed the charter, and thereby committed to protect and preserve water quality.

### Recommendation 5

Given the climate-induced impacts and the growing importance of various kinds of pollutions, we must extend project-based urban planning strategies with stronger attention granted to “one-health” and to the ways we relate to resources. The idea is to draw away from more rigid urban planning mechanisms.



### Promoting urban planning policies that combine health environment and the impacts of climate change

- In city making processes, prioritize anticipation to consider and include climate-induced effects in early stages of a project's development (health protection, positive and emancipative approaches)
- Adapt existing programs by suggesting a hierarchy of rules and complementary goals in regional and local planning documents
- When designing urban development and renewal projects, try to seek the best balance between health goals and risk prevention; for instance, enhance the role of nature in the city can have major benefits for mental health, but it also calls for attention since it can trigger allergies or bring more tiger mosquitoes (both effects being induced by climate change)
- Choose for buildings that better fit their natural environments



### Mosquito forecast, Libourne, 2023 (FRANCE)

The development of tiger mosquitoes comes with a rise of public health risks. The city of Libourne in France has tried to tackle the issue in partnership with a company named QISTA, and with a program called the “mosquito forecast”. It is meant to help inhabitants assess their action timing in their daily fight against mosquitoes. It is based on a three-level barometer: active surveillance, risks of proliferation, and larvae outbreak alert. On top of recommendations given to the public, more than 11 anti-mosquitoes terminals have been installed in the city. A subsidy also helps inhabitants equipping themselves with such

### Recommendation 6

*Health systems face a paradox. On the one hand, we witness a rise of chronic diseases and a potential rise of infectious diseases linked to climate change, with many health systems being already fragile in a lot of countries. On the other hand, we need to work toward decarbonating health systems: based on the Shift Project association, 8% of the French green-house gas emissions come from the health sector.*



### Starting the decarbonation process of health systems while securing population's needs

- Rethink health systems, aiming for more inclusion and less resource consumption in order to avoid tensions between our growing needs and the necessity to reduce health systems' carbon footprint (services related to prevention, outpatient services, long term hospital stays, etc.)
- Reconsider some activity fields, for instance: the fabrication and distribution of medication, mobility of health staff and patients, health waste management, hospital food, etc.
- Build bridges between the decarbonation of health systems (aiming for a no-carbon perspective) and health-friendly urban environments.

### Green Bloc in Strasbourg university hospitals, 2019 (FRANCE)

On average, a surgery involves about 27 kgs of waste, which is about what a family of 4 produces in a week. In the light of this number, several hospitals in Strasbourg (Nouvel Hôpital Civil – NHC -, Hautepierre Hospital and university-hospital Institute) have tried to initiate a movement relying on three key steps: reusing single-use metals through a dedicated recycling service; rationalizing anesthesia processes to fight waste; limiting/stopping the use of greenhouse anesthetic gas. These coordinated actions to reduce and better manage hospital waste led to a significant decrease of the environmental impacts of surgeries.

### Recommendation 7

*Psychological vulnerabilities are increasing with the many crisis we're facing. Eco-anxiety affects more and more people, the youth in particular. Urban planning has a role to play in fighting discrimination, by adapting housing, urban furniture, making use of schoolyards; by also organizing centrality areas or public parks to promote social cohesion.*



### Promoting urban planning policies that support mental health, especially for the youth

- Strengthen cross-disciplinary approaches between urban planners and mental health practitioners
- Draw an understanding of mental health issues in the city (such as eco-anxiety) through data (using academic institution, professional networks, etc.)

### Nantes's call “Mental health problems are also a city's problem”, 2022 (FRANCE)

Cities have a role to play in fighting inequalities and discrimination, by committing to health-friendly urban environments and prevention. Therapeutical approaches are a must-have, together with integrated health systems organized with and around health professionals; yet actions are also needed prior to that. 30 cities have signed Nantes' Call on December 2nd, 2022 to fight stigmas on mental health, to advocate for cross-disciplinary approaches, to take concrete action and to call out to all health actors globally.

**à supprimer**







## Conclusion

If we want to protect and encourage health in urban spaces, we need a global approach that includes and involves all determining health factors. But if we also want to include the new ideas behind the “One-Health” concept, draw lessons from the COVID-19 pandemic, and acknowledge the emergency of climate disruptions and how they affect our health, then our global approach must be broader and stronger.

It needs to be broader first, because we need to take into consideration biodiversity and recreate the relations between cities and their ecosystems. Then, we must preserve natural resources, especially when it comes to water, and we must also work toward more self-sufficiency for populations to answer their essential needs. We must also come up with ambitious and inclusive public policies for these urban environments.

The approach has to be stronger, then, in order to support public health systems under growing pressure, and be able to prevent, diagnose and treat diseases while limiting the carbon footprint of health systems. But such growing support to health systems will also involve strong actions to promote mental health on territories. This calls to also get committed to social justice, by fighting health inequalities.

This is the meaning of the seven recommendations presented above, which draw both a societal project and an ethical reflection about what it means to live together, and to thrive, individually and collectively, in urban spaces.

Thus, we must move forward together, on our way to the city of tomorrow, and make it the city of “care” – a place to connect, to belong, and to thrive.





Launched in June 2011, the **French Partnership for cities and Territories (PFVT)** is a platform supported by the French Ministries of Europe, Foreign Affairs, Culture, and Ecological Transition and Territorial Cohesion. The PFVT is a multi-stakeholder partnership and think-tank meant as a hub to exchange and showcase the expertise of French urban development actors on an international scale. It involves almost two hundred organizations reflecting the diversity of France's urban expertise, helping to build a shared French vision based on exchanges and innovative, sustainable experiences. <https://www.pfvt.fr/>



Adaptation



Habitat



Health



Solidarity



Planetary boundaries

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Réalisation :

