

**Introduction to Urban Planning**  
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**Lecture - 23**  
**Public Health and Urban Planning- I**

Welcome to the course introduction to urban planning. In this lecture today we are going to talk about one of the most important issue of the time health in cities. We will talk about health in couple of sessions. Today we will look at WHO first report on health and urban planning published in 1999. And in the next few sessions we will look at historic narratives including Indian cities are the cases and then at the pandemic of COVID-19, followed by planning considerations.


Currently we are going through covid 19 pandemic. This is not the first time several public health emergencies have occurred in cities around the world. From 80s plague in 430 B.C to Middle Ages Black Death to the past Ebola epidemics in Sub Saharan Africa. And now COVID-19 there has been a lot of diseases, all of them have had a significant impact on cities, law and identity. We will see how health is an interdisciplinary subject and is created by the divide of socio, economic, environmental and political aspects.

And at the same time, health condition further impact on the social economic political context and also creates severe emotional stress. Furthermore, health is just not limited to disease, but also the general well-being of the community. As the urban planners or the citizens, it is important to understand the planning, infrastructure development, planning legislation, governance, integration and public participation today even more.

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## Coverage

- ① Relationship between health and Cities through WHO reports
- ② Historic period of public health, view points , new Paradigm given by WHO
- ③ View points showing links between public health and urban planning
- ④ Model of social justice, political model, economic model and environmental model




Therefore, the coverage in today's session will include WHO's report of 1999, where we look at impact of city environment on people's health. Further, we will look at the historic period of public health given by WHO the periods like nonspecific sanitation, specific sanitation, specific immunization and nonspecific immunization. We will look at new public health Paradigm the theoretical foundation and the guiding tenants.

Furthermore, we will look at viewpoint showing link between urban and public health. The model of social justice political economic model and the environmental model.

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## Learning Outcomes

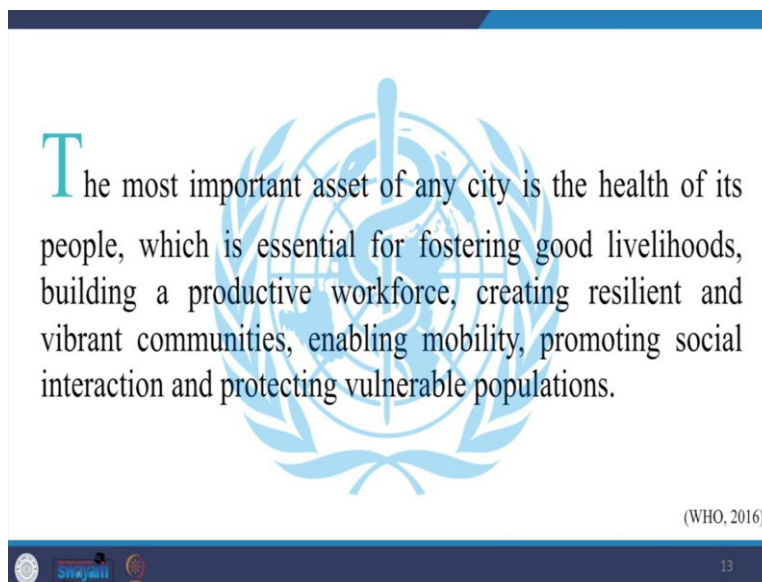
- ① You should be able to comprehend the Relationship between health and Cities and see it from the historical perspective
- ② You should be able to explain historic periods, theoretical models given by WHO
- ③ You should be able to discuss view points showing links between public health and urban planning
- ④ Review :Model of social justice, political model, economic model and environmental model



Accordingly, the learning outcomes expected from you after completion of this session include that you should be able to explain the impact of city environment on people's health. You should be able to discuss the various health period as per WHO report, you should be able to explain and connect the new public health paradigm, the theoretical foundation and the guiding tenants with your context.

You should be able to explain the social justice political model and environmental model. The World Health Organization report published in 2020 states that.

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The most important asset of any city is the health of its people, which is essential for fostering good livelihoods building a productive workforce, creating resilient and vibrant communities, enabling mobility, promoting social interaction and protecting vulnerable population. Further WHO states that the causes of ill health or of increasing concern to the international health community.

At the local level fragmented settlement patterns, uncontrolled urbanization, unsustainable patterns of production and consumption, food system, insecurity and poor urban air quality all take their at all on human well-being. You may recollect we had seen all these aspects in our initial sessions and the urban areas the risk and challenges to health are also arising from global phenomenon.

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Increasing Risks and challenges to health arising from global phenomena

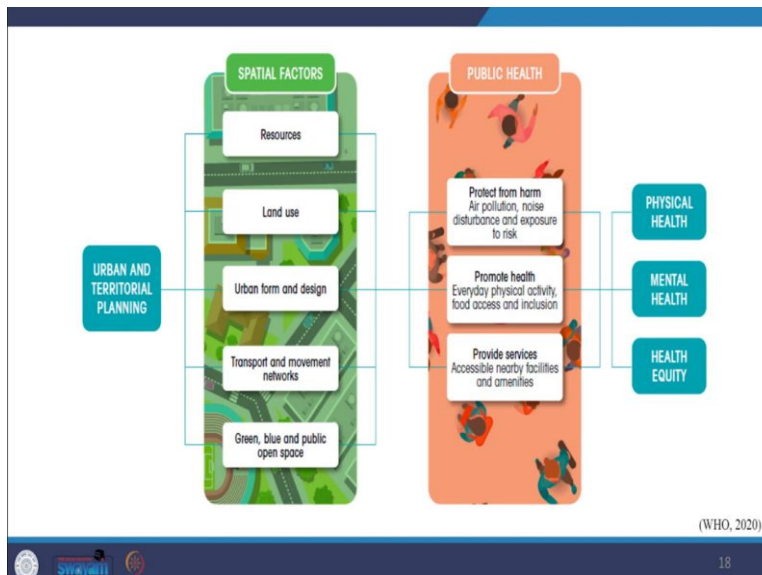
Climate change,  
Ecosystem  
Biodiversity loss.

Adverse health impacts are intensified by  
Increasing inequalities  
Demographic change.

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Such as climate change, ecosystem and biodiversity loss. Adverse health impacts are intensified by increasing inequalities and in many cases, demographic changes are also happening.

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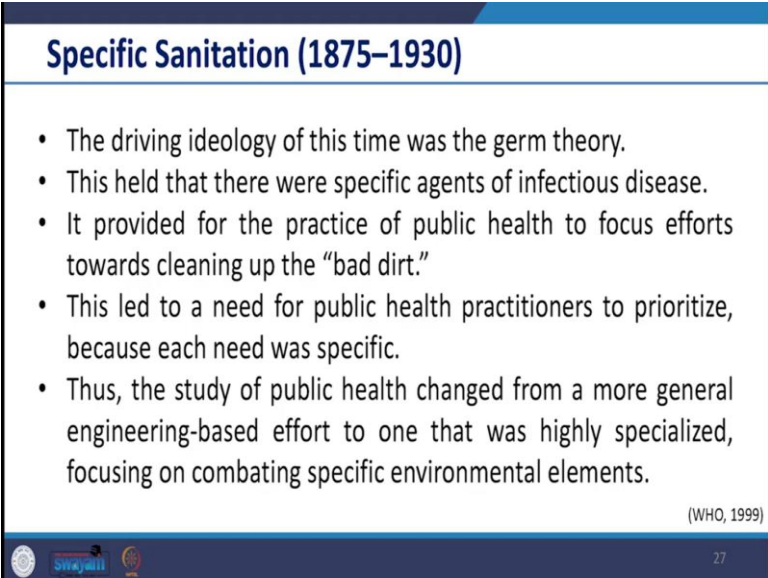


Quoting from the WHO report, these urgent challenges show that how we create RCT environment have impact on people's health. Urban Planning influences, how we use and access resources, land use patterns, urban form and urban spatial design, biodiversity and nature transport investment. In a way that a very nature and form of urban development including important urban rural dimensions, all of which are determinants of health outcomes and healthy health equity.

We see historic linkage between health and urban planning even before the domain was identified as a discipline. And we understood the next is as clearly as today. Acknowledging the relationship between health and urban planning WHO released its very first report in 1999 title healthy cities and the city planning process. Background document are links between health and urban planning. Now, let us look at the historic periods of public health.

As per the WHO report, the history of public health was divided into four distinct period by them, Nonspecific sanitation, specific sanitation, specific immunization and non-specific immunization.

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**Specific Sanitation (1875–1930)**

- The driving ideology of this time was the germ theory.
- This held that there were specific agents of infectious disease.
- It provided for the practice of public health to focus efforts towards cleaning up the “bad dirt.”
- This led to a need for public health practitioners to prioritize, because each need was specific.
- Thus, the study of public health changed from a more general engineering-based effort to one that was highly specialized, focusing on combating specific environmental elements.

(WHO, 1999)

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Nonspecific sanitation, which existed till 1875. The first documented public health efforts were of Greek origins, the Greek advocates staying away from the climate extremes and matching people to their environment. The Romans introduced a different model than of the Greek model. Rather than searching for the right environment, they emphasize fixing the environment. So, we see civil engineering and making the environment fit came into the picture.

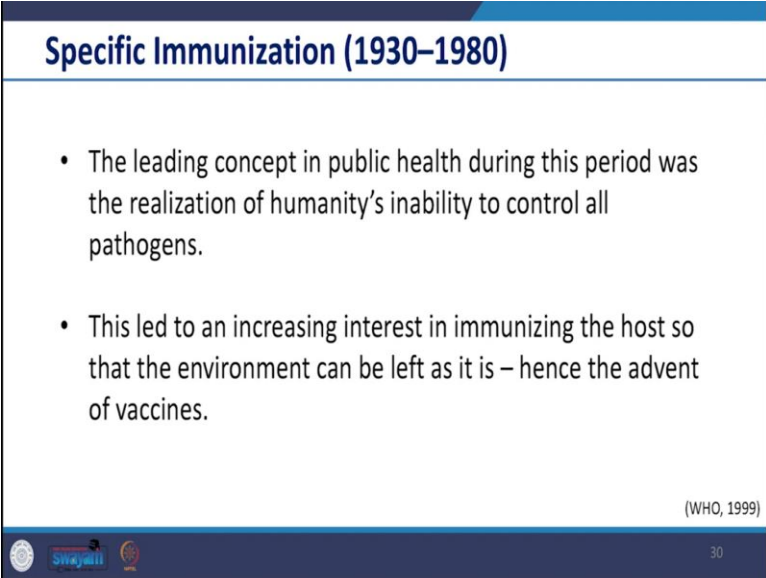
Between the 13th and mid18th century the miasma theory that foul air indicates pathogen came to prominence. This theory influenced the sanitary reform movement of the late 18th and early 19th centuries. It emphasized organizing the community in order to control the bad air,

specifically using the power of the state to combust contain or distant miasma. As per the report, the driving ideology of this time was the germ theory.

This held that there were specific agents of infectious disease, it provided for the practice of public health to focus efforts towards cleaning up the bad dirt. This led to a need for public health practitioners to prioritize because each need was specific. Because of this, we started identifying specific enlists and undertaking special tests. Thus, the study of public health changed from a more general engineering based effort to one.

That was highly specialized focusing on combating specific environmental elements. However, throughout this period, much public health and city planning were of the same identity.

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**Specific Immunization (1930-1980)**

- The leading concept in public health during this period was the realization of humanity's inability to control all pathogens.
- This led to an increasing interest in immunizing the host so that the environment can be left as it is – hence the advent of vaccines.

(WHO, 1999)

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Third period, we see is Specific Immunization which spread from 1930 to 1980. As per the report, the leading concept in public health during this period, we realized that humanity was incapable to control all pathogens. This led to an increasing interest in humanizing the host. That is us, so that the environment can be left as it is, hence the advent of vaccine. So, vaccine started coming in.

We spent a lot of time and money on developing vaccines to improve the health capacity of our body. This led to a major shift from sanitation to immunization. The pendulum has shifted from

social model to a medical model. The current period we see is nonspecific immunization which was from 1980 to the present time according to the World Health Organization, public health practitioners began to look beyond the specific immunization for two reasons.

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**Nonspecific Immunization (1980–the present)**

- Public health practitioners began to look beyond specific immunization for two reasons: firstly, data showed that people were dying from things other than infectious diseases, such as abuse, suicide and other violent acts; and secondly, the origins of public health are more closely aligned with a nonspecific ideology, emphasizing broad community concerns.
- Nonspecific immunization has roots in the observation that famine kills in many ways before starvation actually sets in.
- This model says that the field of public health should be searching for the metaphor to traditional immunization – hence the new public health paradigm.

(WHO, 1999)

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Firstly, data showed that people were dying from things other than infectious disease such as abuse suicide and other violence act. And secondly, the origins of public health are more closely aligned with a nonspecific ideology emphasizing broad community concerns. Nonspecific immunization has roots in observation that famine kills in many ways before starvation actually comes in or sets in.

As with many public health issues, several elements must be dealt with in order truly to solve the larger problem. Hence, we see the new public health paradigm or the example which came in. Now let us try to understand the new public health paradigm the theoretical foundation given by WHO. The new public health paradigm and its theoretical foundation help us to understand the connection between the two discipline of public health and urban planning.

This information provides the framework behind the need for collaborative efforts among multiple disciplines, specifically public health and urban planning which result in healthier neighbourhoods, towns and cities.

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## The New Public Health Paradigm: Theoretical Foundation

- Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.
- The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief or economic and social condition.

(WHO, 1999)



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Health can mean many things to different people. One of the most useful definitions of health is that from the constitution of the World Health Organization, health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief or economic and social condition.

And if we reflect our second lecture, we saw this as one of the key objective of urban planning. We see that not only does this statement define health it is signal of public health pendulum swinging away from the medical model and back towards the social model, the new public health paradigm. The medical model focuses on the individual and on the interventions that are used to treat disease.

By contrast, the social model considers health as an outcome of effects of socio-economic status, culture, environmental conditions, housing, employment and community influences.

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## First International Conference on Health Promotion

In 1986, the First International Conference on Health Promotion in Ottawa declared that

**“The fundamental conditions and resources for health are peace, shelter, education, food, income, a stable ecosystem, sustainable resources, social justice and equity. Improvement in health requires a secure foundation in these basic prerequisites”**



(Internet,2021)



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In 1986, the first International Conference on health promotion in Ottawa declared that the fundamental conditions and resources for health are peace, shelter, education, food, income, a stable ecosystem, sustainable resources, social justice and equity. Improvement in health requires a secure foundation in these basic prerequisites. Stemming from these definitions of health the new public health paradigm has six major guiding views.

These views convey the range of public health and the needs of health in a comprehensive sense. To be considered in urban development and urban planning policy making.

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## Major Guiding Views For The New Public Health Paradigm

1. Health is not merely the absence of disease or disability.
2. Health problems are defined at the policy level.
3. Health is a social issue.
4. Improving health status requires a long-term focus on policy development.
5. Improving health status requires a primary focus on changing basic conditions.
6. Improving health status requires involving natural leaders in the process of change.

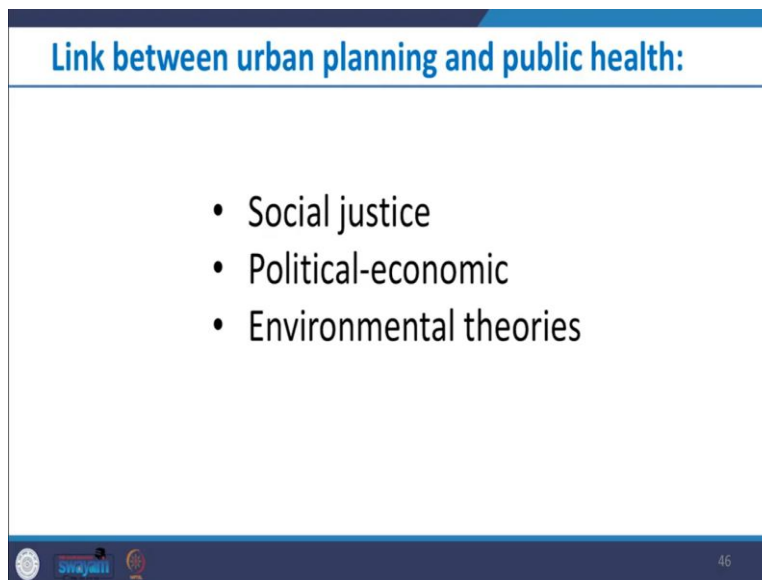


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The views are first, health is not merely the absence of disease or disability. Second, health problems are defined at the policy level. Health is a social issue. Improving health status requires a long term focus and policy development. Improving health status requires a primary focus on changing basic conditions. Improving health status requires involving natural leaders in the process of change.

The field of public health is currently shifting its focus to one that covers these principles, but no direction can develop without a theoretical understanding. So, we see that WHO gives a theoretical understanding in this regard. So, when the pendulum shifted back towards more social model in public health, three viewpoints help show the link between urban planning and public health.

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The slide features a blue header with the title "Link between urban planning and public health:" in white text. Below the header, a white box contains a bulleted list of three items: "Social justice", "Political-economic", and "Environmental theories". At the bottom of the slide, there is a dark blue footer containing several small logos and icons, including a circular logo on the left and the number "46" on the right.

First, we see social justice. Second, we see political economic model and the third we see environmental theories.

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Social justice is founded on the notion of **shared responsibility** and a **strong obligation** to the **collective good**.

It also pays attention to the reality of **unequal starting positions**; everyone is not **born equal**.

It focuses on **social conditions** and assured benefits (e.g. housing, education, safety).

In relation to public health, this places the focus on **controlling hazards** and **changing the environment to prevent disability** and **premature death** through organized collective action

Social Justice is founded on the notion of shared responsibility and a strong obligation to collective good. It also pays attention to the reality of unequal starting position; everyone is not born equal. It focuses on social conditions and assured benefits for example, housing education, safety. In relation to public health displaces the focus on controlling hazard and changing the environment to prevent disability and premature death through organized collective action.

Political economic theory highlights the role of history and the state in influencing health. Specifically, it emphasizes how the structure of the economy and society affects the lives of individuals.

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Political-economic theory highlights the role of **history and the state** in influencing health.

how the structure of the economy and society affects the lives of individuals?

“**Political economy** can be conceptualized as being the outermost force in a set of forces that affect the **health of individuals.**”

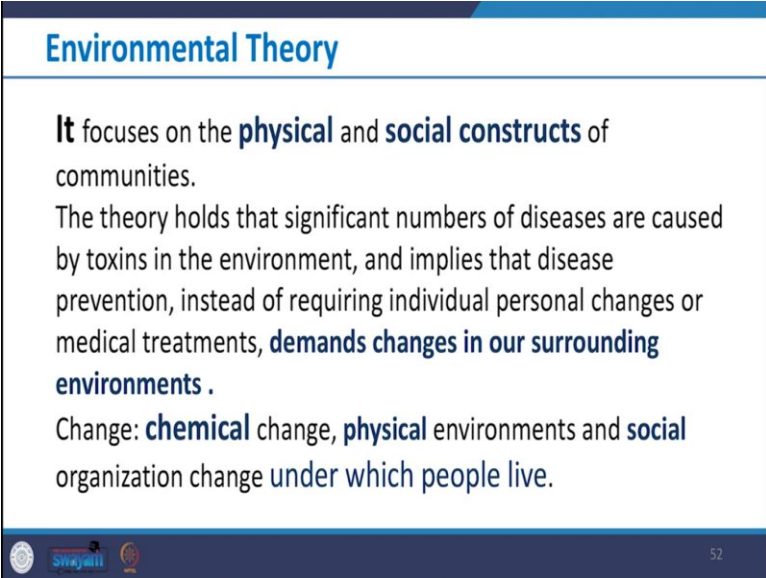
The theory understands that resources are not allocated equally across the board; rather they are disseminated according to power.

Impact of **age, race, class, sexuality** and **gender** on the health of communities.

Political economy can be conceptualized as being the outermost force in a set of forces that affects the health of individuals. The theory understands that resources are not allocated equally across the board. Rather, they are disseminated according to power. This allows for a comprehensive exploration understanding of the impact of age, race, class, sexuality and gender on the health of communities.

Further, the theory can help lay the groundwork for facilitating structural level change. The primary concepts of environmental theory focus on physical and social constructs of communities. The theory holds that significant numbers of diseases are caused by toxins in the environment and implies that disease prevention instead of requiring individual personal changes.

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**Environmental Theory**

**It** focuses on the **physical** and **social constructs** of communities.

The theory holds that significant numbers of diseases are caused by toxins in the environment, and implies that disease prevention, instead of requiring individual personal changes or medical treatments, **demands changes in our surrounding environments** .

Change: **chemical** change, **physical** environments and **social** organization change under which people live.

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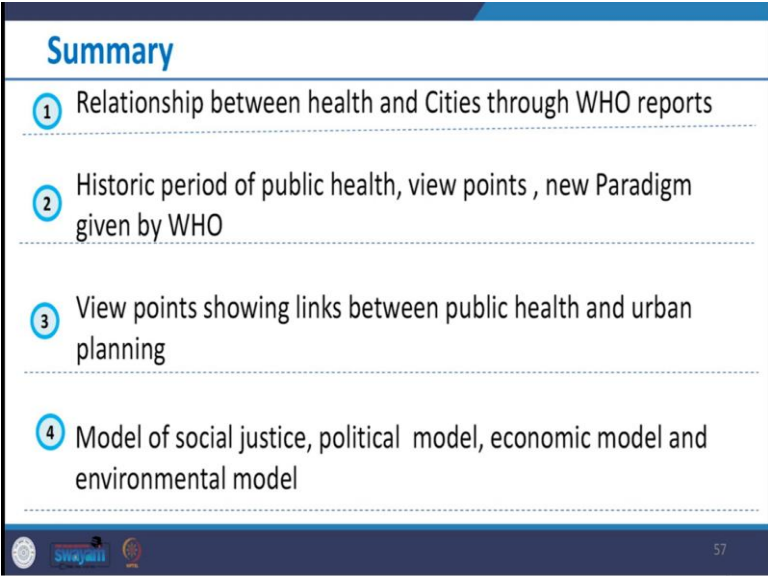
Or medical treatment demands changes in our surrounding environments. Further the environmental hypothesis point not only to the chemicals, but also to the physical environment and social organization under which people live. Planning profession indicates that its focus revolves around the design and creation of sound places for people. Planning and public health professionals are very intrinsically linked.

That is, urban planning can and does serve as form of primary prevention and contributed to health outcomes. Additionally, it sheds light on how holistic approach to building cities is the

key. Over the years, public health professionals have become increasingly aware that an effective public health response must take a broad community wide perspective that focuses on prevention over treatment and avoids blaming the victim by recognizing the pervasive influence that environment has over behaviour.

In 1999 and its first report related with the subject WHO suggested that more collaborated field work and training between urban planners and public health professionals must take place. We will end here in this class.

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**Summary**

- 1 Relationship between health and Cities through WHO reports
- 2 Historic period of public health, view points , new Paradigm given by WHO
- 3 View points showing links between public health and urban planning
- 4 Model of social justice, political model, economic model and environmental model

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Summarizing today's session, we saw we read through the WHO report of 1999. We looked at the impact of city environment on people's health. Thereafter, we saw the historic period of public health given by who we looked at nonspecific sanitation, specific sanitation, specific immunization and nonspecific immunization period. We looked at the new public health paradigm, the theoretical foundation and the guiding tenants.

There after we looked at viewpoints showing link between urban and public health. Then we looked at the models of social justice, political economic model, and environmental model. And the following class we are going to look at some of the historical narratives to understand it better.

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### References

- <https://newseu.cgtn.com/news/2020-07-08/COVID-19-and-the-city-How-past-pandemics-have-shaped-urban-landscapes-QCFjZLBixG/index.html>
- <https://www.usnews.com/news/cities/articles/2020-06-01/how-previous-pandemics-have-improved-american-cities>
- <https://reliefweb.int/report/world/cities-and-pandemics-towards-more-just-green-and-healthy-future>
- <https://www.frontiersin.org/articles/10.3389/frsc.2021.645914/full>
- <https://gehpeople.com/announcement/public-space-public-life-during-covid-19/>
- <https://www.sei.org/perspectives/covid19-value-of-green-space-in-cities/>
- <https://www.nature.com/articles/d41586-020-02459-2>




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That is all for today's class. These were the references used.

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### Suggested Further Readings

- The COVID-19 pandemic: Impacts on cities and major lessons for urban planning, design, and management \_Sharifi, Khavarian-Garmsir
- Impact of Covid-19 on Urban Mobility in Indian Cities, \_Raunak, Sawant and Sinha
- The Pandemic City: Urban Issues in the Time of COVID-19, \_Martinez, Short
- Cities and Pandemics: Towards a More Just, Green and Healthy Future, \_UN Habitat
- Public Space and Public Life During Covid-19, \_Gehl
- Rethinking Cities in a Post Covid-19 World, \_Durham University
- Indian Cities in the Post-Pandemic World, \_ WHITE PAPER JANUARY 2021, World economic Forum



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Our coverage was limited with the scope to make you aware of the topic. There are enormous readings and movies available to explore.

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## Suggested Watch (to contemplate Health and Urban Planning)



**The Future of Cities After Covid-19 | WSJ**  
<https://www.youtube.com/watch?v=8C2jAuS11Ak>

**The COVID-19 Journey: From Crisis Management to Rebuilding**  
<https://www.youtube.com/watch?v=4ztXfka2hNI>

**The big lesson from South Korea's coronavirus response**  
<https://www.youtube.com/watch?v=BE-cA4UK07c>

**Norman Foster on the Future of Cities in Pandemics - 'On Cities' Masterclass Series**  
<https://www.youtube.com/watch?v=erPiryaMh8>

**Before and after coronavirus - scenes from the world's biggest cities**  
<https://www.youtube.com/watch?v=vFZF39fgWM>



**Smelly Facts About London's The Great Stink of 1858**




<https://www.youtube.com/watch?v=3a1q2yUm3Hl>

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Few are suggested here. This is not an extensive list; you may feel free to suggest more from your experience.

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**Please feel free to ask Questions.**

**Let us know about any Concerns you have .**






**Do share your Opinions, Experiences and Suggestions.**

**Looking forward to Interacting and**

**Co-learning with you while exploring Cities and**

**Urban Planning.**



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Please feel free to ask questions. Let us know about your concerns. You have to share your opinion experiences and suggestions. Looking forward to interacting and co-learning with you; while exploring cities and urban planning. That is all for today. Thank you so much.