

# Recommendations for a health promoting and sustainable urban development

Five theses of the  
Working Group on Health Promoting Urban Development  
(Arbeitsgruppe gesundheitsfördernde Gemeinde- und  
Stadtentwicklung/AGGSE)

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(translated in August 2020 by Heike Köckler and Johanna Rolf)

## PROLOGUE

The following five theses are intended to provide an impulse on how health promoting local politics taking sustainable development and participation into account can be targeted, realized and improved.

A health promoting urban development improves the quality of life of the individual and communities. Basic requirements for the creation of a liveable community are equal social, economic and political opportunities of participation for all residents. This includes the consideration of their individual abilities and potentials.

Health and quality of life of the population should be considered, expanded and improved in accordance with the World Health Organization's (WHO) 'Health in All Policies-Approach' in all policy and administrative areas. This process began with WHO's Ottawa Charter for Health Promotion in 1986 that led to strategies of action for a health promoting overall policy for the first time. These strategies are also reflected in the following theses.

## THESIS 1

Societal transformation is a major challenge on the way towards a health promoting local policy.

People are moving into cities increasingly. Since 2007, more people worldwide have been living in cities than in the countryside; in Germany it is 75 percent of the population, tendency: rising. Accordingly, cities in Germany, even those in shrinking regions, register mostly rising or at least stable numbers of population. Cities draw their attractiveness not only from the concentration of job opportunities, but above all from the high density of diverse infrastructure (education, culture, health care, social facilities, shopping, etc.). At the same time, societal organizations and life patterns of the industrial society of the 20<sup>th</sup> century are increasingly losing their power of social integration in the transition to the globally operating information society of the 21<sup>st</sup> century.

The socio-demographic change is reflected in populations becoming more diverse and getting older. The growth of population, business and infrastructure facilities in the cities, as well as decreasing household sizes with simultaneously increasing space for housing per inhabitant puts considerable pressure on the remaining open spaces. The gentrification of entire neighbourhoods in large cities goes hand in hand with various displacement processes and creates housing shortages, especially for deprived population groups. Unequally distributed risks of environmental pollution (air pollution, noise, contaminated sites, etc.) can additionally reinforce existing injustices.

The digitalization of the work environment is leading to a massive reorganization of work; the extent of which cannot be reliably estimated yet. The increase in insecure working conditions with low wages has already reinforced poverty trends in recent years, with major effects on old people, single parents and children.

At the same time, core fields of action for global change (e.g. climate change, migration and refugees' movements, worldwide networking and data control, etc.) become effective down to the local level and require adequate response and adaptation strategies.

Against the background of these changes in life, working and housing conditions, many people are actively and jointly developing and striving for new, sustainable patterns for a successful life. But not everyone succeeds in this. Declining solidarity, social exclusion, isolation and violence are keywords for developments in cities that are not beneficial to health, which can also be seen as an expression of a deep social divide in society.

In this context, local politics plays a key role in the design of health promoting settings. As a controlling and planning authority municipalities can encourage health promoting processes when providing services of general interest and developing and implementing them together with citizens.

## THESIS 2

If cities want to create health promoting living conditions, social justice, environmental protection and participation are guiding principles.

The consequences of societal change, inadequate climate mitigation and environmental protection and a lack of health in all policies are particularly visible in cities. If municipalities want to maintain and further develop health promoting living environments locally, they are faced with the following tasks in particular:

### *Reducing social-spatial segregation:*

In major German cities, poverty is increasing in certain neighbourhoods. The upgrading of inner-city districts and rising rents are increasingly forcing low-income households to move to the fringe of the city (gentrification).

The spatial concentration intensifies the negative effects of poverty on residents' health and social participation. Social segregation should be reduced above all by housing policy measures and place based intersectoral planning.

### *Creating environmental justice:*

In many cities, people are facing multiple environmental and social burdens in certain neighbourhoods. These burdens can lead to considerable health impacts. It is therefore an important task of municipals to create more environmental justice and to pursue environmental/climate protection, health promotion and social justice through integrated approaches.

### *Promoting sustainable mobility:*

Increasing urbanization and further changes in production processes and lifestyles are accompanied by growing mobility movements of goods and people. To achieve this, cities must create sustainable and inclusive mobility systems that prioritize environmental connectivity (pedestrians, cyclists, public transportation), reduce the volume of motorized individual and freight traffic and thus reduce emissions of air pollution, noise and greenhouse gases.

### *Preserving and developing urban green:*

Above all, growing cities with a tight housing market are facing the challenge of providing sufficient housing for all population groups. In these cities, urban green is under particular pressure. Cities should take great efforts to maintain urban green as green and open spaces are important places for restorative activities, e.g. experiencing nature and taking part in social interaction. They also have important bioclimatic and ecological functions.

*Enabling participation:*

The participation of residents in planning processes is an essential part of the municipality's tasks; requiring a constant review and further development of the methods and tools used - especially with a view to better reaching particularly disadvantaged population groups, e.g. by means of activating participatory methods. In addition - not least with a view to credibility - it is necessary for the municipality to make participation opportunities transparent from the outset.

Maintaining and developing health promoting living conditions is therefore a very complex task. It requires integrated and interdisciplinary action.

## THESIS 3

Health promoting urban development requires integrated visions, approaches and strategies.

Health is influenced by numerous factors that are beyond the direct reach of the health sector. Health promoting urban development is therefore a cross-cutting task that affects various topics and thus almost all departments of local administration: in particular, urban development and urban planning, health, youth, environment and green, transport and mobility, sports, education, social affairs and finance.

To cope with this cross-cutting task, integrated mission statements, approaches and strategies are needed that bring together the following aspects especially:

- various sectoral fields of action
- actors inside and outside politics and administration
- "top-down" and "bottom-up" approaches
- different resources (financial resources, material resources, know-how)
- higher and lower planning levels
- different spatial levels (neighbourhoods/urban districts, entire city, region)

There are already a number of integrated visions, approaches and strategies.

These include in particular:

- the "Ottawa Charter for Health Promotion" of the World Health Organization of 1986 that describes a model for an effective overall health promoting policy;
- integrated strategies of municipal health promotion, implemented especially in municipalities of the "Healthy Cities Network" founded in 1989;
- the urban development support program "Socially Integrative City"<sup>1</sup>, which, on the basis of integrated district development concepts, upgrades deprived neighbourhoods and at the same time improves the living conditions of residents;
- the environmental justice approach, which brings together the issues of social status, environment and health in order to avoid and eliminate health-relevant environmental pollution (including noise and air pollution) and to further develop health-related environmental resources (including urban green spaces) for all.

All such visions, approaches and strategies have the aim of improving local living conditions and thus health far beyond the single policy sector. Often, however, they are implemented in isolation from one another. Linking them at the local level can contribute to an effective and sustainable design of health promoting urban development and at the same time help to avoid the coexistence of parallel structures.

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<sup>1</sup> Starting in 2020, the Socially Integrative City program will be further developed by the federal and state governments into the urban development support program "Social Cohesion - Shaping neighbourhood life together".

## THESIS 4

Sustainable local health promotion requires an adequate social, technical and green infrastructure.

Obligated to design living conditions at the local level (under Article 28 II of the German Constitution), municipalities are entrusted with the task of providing public services. In view of the far-reaching changes in society, the municipality as a place of provision of public services is asked to develop its social, technical and green infrastructures in a future-oriented and sustainable manner, as well as design them barrier-free.

Infrastructure is generally understood to be one of the most important elements of local provision of services of public interest and thus part of the essence of local self-government. What is meant here is: 1) social infrastructure such as residential, health and care facilities and services, but also multidisciplinary district and community centres; 2) technical infrastructure such as that required to ensure the mobility of residents; 3) green infrastructure, which is understood as a network of urban green spaces, and much more.

The supply as well as the qualitative and quantitative expansion of social, technical and green infrastructures are an important precondition for residents to live healthy and environmentally sound lives at the local level. The municipalities have a wide range of opportunities to design their own structures. The financial resources of the municipalities must be strengthened mandatorily to enable them to make use of these opportunities to maintain or increase local quality of life.

Guidelines and standards are essential components of planning practice. This also applies to municipal infrastructure planning. A qualitative development of standards for infrastructure is indispensable in order to design urban, health and infrastructure planning in their interrelationships in a way that meets needs. For this purpose, information on all planning objectives must be made available to determine the standards which should be comprehensible and verifiable for residents of the municipalities.

In addition to the obligatory tasks, there is the large area of voluntary tasks for municipalities, such as the provision of swimming pools, cultural amenities or community centres. Health care facilities for diagnosis and treatment, such as hospital care, outpatient care with doctors and gender-appropriate therapy and care services, are also part of the provision of services of public interest, but need to be more closely interlinked, e.g. through health care centres. They can be effectively implemented at the municipal level through the development and promotion of self-help structures and place oriented networking.

The approach of an intersectoral health policy (Health in All Policies) requires a reorganization of planning and local political action so that, on the one hand, intersectoral, interdisciplinary and transdisciplinary work and planning structures are created and, on the other hand, a comprehensive and inclusive participation of citizens oriented towards direct democracy is enabled.

## THESIS 5

Local health promotion politics must think globally in order to meet globalized conditions.

As early as 1992 in Rio de Janeiro, following the United Nations Conference on Environment and Development, the Agenda 21 as final declaration, called for local action to be combined with global needs. For the Agenda 21 the imperative: "think globally, act locally" became the central focus for action.

A health promoting policy should follow this maxim. There are many examples of linking local with global approaches to health promotion policy, including the following:

- the WHO International Healthy Cities Network,
- the signing of the Chicago Climate Charter in 2017 by the mayors of many metropolitan cities over all continents in order to meet the goals of the Paris Climate Convention of 2015,
- the resolution of the UN's 17 Sustainable Development Goals (SDGs) for all countries of the world in the framework of the Agenda 2030 for Sustainable Development,
- countless town twinning partnerships worldwide which cooperate in fields of action such as the environment, health and social policy,
- the declaration of the local climate emergency by city parliaments worldwide - against the background of a shared global understanding of the current dangers and of the opportunities to meet the threats.

The globalization of almost all economic activities with intensified competition and trade wars, armed conflicts between states and regions, and massive social and political inequalities in and between societies around the globe are changing local circumstances and conditions for a sustainable health promoting policy.

This is demonstrated by the particular impact on people's health and life expectancy, for example, through a changed global spread of life-threatening diseases such as infections. Climate policy is also health and social policy at the same time, with the aim of reducing social and health inequalities worldwide.

We as the global population have reached a point of development on earth where the urgent problems can only be solved together and globally. We need curative and preventive approaches that are interdisciplinary and cross-departmental. These should lead to a new global recognition of local services of general interest in which a sustainable urban health promotion policy is integrated.

It is an important political task for cities around the world to work in global alliances to develop such a strategy and look for transferable solutions.



## WORKING GROUP HEALTH PROMOTING URBAN DEVELOPMENT (AGGSE)

The Working Group on Health Promoting Urban Development (AGGSE), which was established in 2002, pursues the goal of integrating health promotion into urban development and its programs, guidelines, strategies and concepts.

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