



# HIDDEN CITIES

UNMASKING AND OVERCOMING HEALTH INEQUITIES IN URBAN SETTINGS



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**NOTE:** Examples from specific cities are used to illustrate different points within this report. These examples should not be interpreted as assessments of cities' overall level of health equity, nor should they be taken to mean that any city is more or less advanced than other cities in terms of its action to tackle the root causes of urban health inequities.

# CONTENTS

<b>FOREWORDS</b>	<b>IV</b>
<b>EXECUTIVE SUMMARY</b>	<b>VII</b>
<b>PART ONE. THE DAWN OF AN URBAN WORLD</b>	<b>1</b>
<b>INTRODUCTION TO PART ONE</b>	<b>2</b>
<b>CHAPTER 1. THE RISE OF MODERN CITIES</b>	<b>3</b>
DEMOGRAPHICS OF URBANIZATION AND TRENDS	4
THE BENEFITS OF URBANIZATION	6
THE CHALLENGES OF RAPID, UNPLANNED GROWTH	7
CITIES OF THE FUTURE	10
CHAPTER SUMMARY	10
<b>CHAPTER 2. HEALTH IN AN URBAN CONTEXT</b>	<b>11</b>
DETERMINANTS OF HEALTH	12
HEALTH DETERMINANTS IN URBAN SETTINGS	12
HEALTH CONSEQUENCES OF LIVING IN CITIES	28
CHAPTER SUMMARY	29
<b>PART TWO. UNMASKING HIDDEN CITIES</b>	<b>31</b>
<b>INTRODUCTION TO PART TWO</b>	<b>32</b>
<b>CHAPTER 3. URBAN HEALTH INEQUITY AND WHY IT MATTERS</b>	<b>33</b>
HEALTH INEQUALITY AND HEALTH INEQUITY EXPLAINED	34
WHY URBAN HEALTH INEQUITY MUST BE UNMASKED AND OVERCOME	35
URBAN HEALTH EQUITY IS RELATED TO HUMAN RIGHTS AND INTERNATIONAL FRAMEWORKS	37
CHAPTER SUMMARY	38
<b>CHAPTER 4. URBAN HEALTH INEQUITIES REVEALED</b>	<b>39</b>
HEALTH INEQUITIES BETWEEN RICH AND POOR URBAN POPULATIONS	40
HEALTH INEQUITIES BETWEEN NEIGHBOURHOODS	49
HEALTH INEQUITIES BETWEEN SUBGROUPS OF CITY DWELLERS	54
CHAPTER SUMMARY	56
<b>CHAPTER 5. ACHIEVING THE MILLENNIUM DEVELOPMENT GOALS</b>	<b>57</b>
INTRODUCTION TO THE MILLENNIUM DEVELOPMENT GOALS	58
MDG 1: ERADICATE EXTREME POVERTY AND HUNGER	59
MDG 4: REDUCE CHILD MORTALITY	62
MDG 5: IMPROVE MATERNAL HEALTH	64
MDG 7: ENSURE ENVIRONMENTAL SUSTAINABILITY	66
CHAPTER SUMMARY	67

## **PART THREE. OVERCOMING URBAN HEALTH INEQUITIES** **69**

### **INTRODUCTION TO PART THREE** **70**

### **CHAPTER 6. URBAN GOVERNANCE FOR REDUCING HEALTH INEQUITIES** **71**

THE ROLE OF LOCAL GOVERNMENTS	72
PARTNERSHIPS: THE KEY TO GOOD URBAN GOVERNANCE	72
PREREQUISITES FOR LOCAL ACTION	75
CHAPTER SUMMARY	79

### **CHAPTER 7. BUILDING AN EVIDENCE BASE FOR ACTION** **81**

THE IMPORTANCE OF EVIDENCE FOR SUSTAINABLE AND EFFECTIVE ACTION	82
THE IMPORTANCE OF DISAGGREGATED DATA	83
DATA CONSIDERATIONS	83
WHO'S URBAN HEART	84
UN-HABITAT'S URBANINFO	87
CHAPTER SUMMARY	88

### **CHAPTER 8. TAKING ACTION** **89**

THREE MAIN APPROACHES TO REDUCING URBAN HEALTH INEQUITIES	90
CHOOSING PRIORITY INTERVENTIONS	93
MONITORING AND EVALUATION	96
CHAPTER SUMMARY	96

### **CONCLUSION: THE PRICE AND THE PROMISE OF OUR URBAN WORLD** **97**

A ROLE FOR ALL: WHO CAN DO WHAT?	100
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### **ANNEXES** **103**

ANNEX A. ADDITIONAL RESOURCES AND TOOLS	104
ANNEX B. METHODOLOGICAL APPROACH FOR ASSESSING URBAN HEALTH INEQUITIES	106
ANNEX C. EXAMPLES OF INTERVENTIONS	109

### **REFERENCES** **118**

## **BOXES**

Box 1.1 Healthy Cities around the world (by WHO region)	7
Box 1.2 Spotlight on Nairobi's slums	8
Box 1.3 Spotlight on cities vulnerable to sea level rise	9
Box 2.1 Climate change: a multiplier of health risks	17
Box 2.2 Spotlight on Haiti's earthquake	27
Box 2.3 Spread of SARS via urban centres	28
Box 5.1 The eight Millennium Development Goals	58
Box 6.1 Spotlight on Nakuru, Kenya	72
Box 6.2 Spotlight on community participation in urban areas of Catalonia, Spain	73
Box 6.3 Spotlight on community participation in the urban slums of Nairobi, Kenya	76
Box 6.4 Spotlight on the London Health Inequalities Strategy	77
Box 6.5 Spotlight on supportive governance structures in Vancouver, Canada	77
Box 6.6 Recommendations for national policy-makers on intersectoral action on health	78
Box 7.1 Disaggregating national-level data: an example from India	84
Box 7.2 Spotlight on Parañaque City, Philippines	86
Box 8.1 Spotlight on lady health workers in urban slums of Pakistan	92
Box 8.2 Improving water and sanitation in towns of the Lake Victoria region, East Africa	92
Box 8.3 Spotlight on helmet use	92
Box 8.4 Community mobilization against violence in Brazil	94

## FIGURES

Figure ES.1	Factors influencing the health of cities	XI
Figure ES.2	Under-five mortality rate in urban areas, by region, in 42 low- and middle-income countries	XIV
Figure 1.1	Where do city dwellers live in slums?	9
Figure 2.1	Determinants of health	12
Figure 2.2	Factors influencing the health of cities	13
Figure 3.1	Inequity in chronic malnutrition among children less than five years of age for 47 developing countries, comparing urban to rural inequalities (1994–2004)	35
Figure 4.1	Under-five mortality rate in urban areas, by region, in 42 low- and middle-income countries	40
Figure 4.2	Under-five mortality rate in urban areas of seven selected countries	41
Figure 4.3	Chronic malnutrition among children less than five years of age, by region, in 41 low- and middle-income countries	42
Figure 4.4	Chronic malnutrition among children less than five years of age in urban areas of seven selected countries	42
Figure 4.5	Factors that contribute to inequities in childhood malnutrition among children less than five years of age in urban areas of seven selected countries	43
Figure 4.6	Skilled birth attendance coverage, by region, in urban areas of 44 low- and middle-income countries	44
Figure 4.7	Skilled birth attendance coverage in urban areas of seven selected countries	44
Figure 4.8	Factors that contribute to inequities in skilled birth attendance, in urban areas of seven countries	45
Figure 4.9	Prevalence of self-reported diabetes diagnosed by a physician, adults age 45 and older, urban Bangladesh (low-income country)	47
Figure 4.10	Prevalence of self-reported diabetes diagnosed by a physician, adults age 45 and older, urban Tunisia (middle-income country)	47
Figure 4.11	Prevalence of self-reported diabetes diagnosed by a physician, adults age 45 and older, urban Spain (high-income country)	47
Figure 4.12	Percentage of households with access to piped water, in urban areas of 44 low- and middle-income countries	48
Figure 4.13	Inequities in access to piped water in urban areas from seven selected countries	49
Figure 4.14	Infant death rates, Nairobi, Kenya	50
Figure 4.15	Death rates in children less than five years of age, Kenya, disaggregated by Nairobi neighbourhood	50
Figure 4.16	Newly notified TB case rate per 100 000 population, largest cities in Japan, 2006	51
Figure 4.17	Homicide rates vary by a factor of four between subdistricts of Cape Town, South Africa, 2001–2004	52
Figure 4.18	Geographical relationship between percentage of residents living in poverty and likelihood of dying from AIDS, New York city, United States	53
Figure 4.19	Income inequalities and crime and disorder inequalities, Preston, United Kingdom, 2007	54
Figure 4.20	HIV prevalence by gender and area of residence	56
Figure 5.1	All MDGs are related to health	59
Figure 5.2	Progress in reducing childhood malnutrition (stunting) in urban areas	60
Figure 5.3	Trends and projections towards halving stunting by 2015 (in relation to 1990 levels) in urban areas of the Plurinational State of Bolivia	61
Figure 5.4	Trends and projections towards halving stunting by 2015 (in relation to 1990 levels) in urban areas of India	61
Figure 5.5	Progress in reducing under-five mortality in urban areas	62
Figure 5.6	Trends and projections towards reducing by two thirds under-five mortality by 2015 (in relation to 1990 levels) in urban areas of the Plurinational State of Bolivia	63
Figure 5.7	Trends and projections towards reducing by two thirds under-five mortality by 2015 (in relation to 1990 levels) in urban areas of India	63
Figure 5.8	Progress in improving skilled birth attendance coverage in urban areas	64
Figure 5.9	Trends and projections towards achieving universal coverage for skilled birth attendance by 2015 in urban areas of the Plurinational State of Bolivia	65
Figure 5.10	Trends and projections towards achieving universal coverage for skilled birth attendance by 2015 in urban areas of India	65
Figure 5.11	Proportion of urban population living in slum areas, 1990 and 2010	66
Figure 7.1	Female HIV prevalence across socioeconomic groups, nationally and in urban areas in Swaziland, 2006–2007	83
Figure 7.2	Utilization of the new birthing facility in 2009, San Martin de Porres, Parañaque City, Philippines	87
Figure 8.1	Three main approaches to reducing urban health inequities: (a) targeting, (b) narrowing the gap, (c) acting on the whole population	91

## TABLES

Table 7.1	Core indicators for Urban HEART	85
Table B.1	Countries for which data were available from the Demographic and Health Surveys for four key indicators	107

# FOREWORDS



It is well known by now that half of humanity lives in urban areas – and the proportion is growing. Cities, with their concentration of culture, infrastructure, and institutions have long driven the progress of civilization and have been the focus of opportunity and prosperity. For both rich and poor, in developed and developing countries, cities offer unique opportunities for residents to increase income, to mobilize for political action, and to benefit from education as well as health and social services. These positive aspects of city life remain magnets for people to come to and stay in urban areas.

While urban living continues to offer many opportunities, these advantages can be extremely uneven in their distribution. Looking beyond the bustling marketplaces, skyscrapers and big city lights, today's cities across the world contain hidden cities, masking the true lives and living conditions of many city dwellers. Certain city dwellers suffer disproportionately from poor health and these inequities can be traced back to differences in their social and living conditions. No city is immune to this problem.

The list of potential urban hazards and associated health risks is long: substandard housing and crowded living conditions, problems with food and water safety, inadequate sanitation and solid waste disposal services, air pollution, and congested traffic, to name a few. Many cities face a triple threat: infectious diseases thrive when people are crowded together under paltry living conditions. Chronic, noncommunicable diseases are on the rise with the globalization of unhealthy lifestyles, which are facilitated by urban life – tobacco use, unhealthy diets, physical inactivity and harmful use of alcohol. And urban health is further burdened by accidents, injuries, road accidents, violence, and crime.

Local and national governments alike are grappling with the challenges of urbanization. In many cases, the rapid population growth has outpaced the municipal capacity to build essential infrastructures that make life in cities safe and healthy. Urbanization, both in the developing and developed world, has been accompanied by a concentration of poverty which is becoming a severe, pervasive, and largely unacknowledged feature of urban life. Nearly one billion people – one third of the urban population – are living in urban slums and shantytowns. For the urban poor, the advantages of city life are lacking or nonexistent. For example, availability of and access to health care does not ensure affordability and utilization of health services. Unfortunately, some city dwellers experience inequalities, various forms of exclusion and marginalization.

The health sector cannot act alone to tackle those inequities and the various urban health challenges. Cities directly influence the living conditions, socioeconomic opportunities and health outcomes of all city

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