



# Addressing Health of the Urban Poor in South-East Asia Region: Challenges and Opportunities



**World Health  
Organization**

Regional Office for South-East Asia

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WHO Library Cataloguing-in-Publication data

World Health Organization, Regional Office for South-East Asia.

Addressing health of the urban poor in South-East Asia Region: challenges and opportunities.

1. Urban population. 2. Urban Health Services. 3. Health Planning.  
4. Communicable Diseases. 5. Poverty Areas. 6. Economic Development.  
7. Health Services Accessibility. 8. Maternal Health Services.

ISBN 978-92-9022-399-3

(NLM classification: WA 380)

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Printed in India

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## Foreword



History will record the 21<sup>st</sup> century as the century of transition. The world is going through rapid and significant change spanning a wide spectrum of human enterprise. The political, social and economic developments witnessed in the recent past will have a significant impact on human health and well-being. Most importantly, this means that health systems will have to gear up to effectively address the challenges posed by globalization, climate change, and the demographic and epidemiological transitions.

Cities are the main beneficiaries of globalization and the economic growth that South-East Asia is witnessing. In addition to the natural increase in population the increasing job opportunities, rapid development of physical and social infrastructure and better access to health, educational and cultural facilities is fuelling the almost explosive pace of urbanization. A significant proportion of the people who come to cities in search of better jobs and social opportunities are poor. The World Bank estimates that, in 2002, about 750 million urban dwellers subsisted on less than 2 US dollars a day. Many, if not most of these people, live in slums.

South-East Asia is home to more than 1.7 billion people, of which nearly 600 million live in urban areas. Of these, 25% are urban poor. This population is growing rapidly resulting in a tremendous pressure on all public services including health, transport, water supply and sanitation, electricity and other infrastructural needs.

Rapid and often unorganized urbanization significantly affects the physical and social ecology. Crowded living conditions are conducive to rapid spread of communicable diseases. They also contribute to social tensions and stress as people compete for scarce essential facilities like safe water and sanitation. Lifestyle changes including increased consumption of fast foods rich in unsaturated fats and salt, lack of exercise, alcohol, tobacco and other substance abuse are risk factors that the urban populations including the urban poor are confronted with. Not surprisingly, the urban poor have to pay a disproportionately heavy price that such lifestyle changes bring in their wake.

The impressive world class health infrastructure that several South-East Asian cities now have is a matter of pride and satisfaction. However, it is a matter of concern that a large segment of the urban poor face difficulties in accessing these services, due to reasons which go beyond

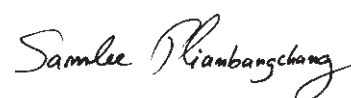


economic factors. There are several social, physical, economic and psychological factors that prevent the urban poor from accessing these facilities either public or private. It is increasingly acknowledged that a multitude of factors such as social, cultural, anthropologic, economic, political, environmental, religious and several others impact health outcomes. It is also clear that several sectors including education, food and agriculture, nutrition, urban development, poverty alleviation, employment generation and local governments have to join hands to address health issues including health of the urban poor. It is acknowledged that out-of-pocket expenditure on health is a major contributor to perpetuation of poverty. We need to explore innovative health financing modalities in order to further reduce out-of-pocket expenditure on health and to prevent catastrophic health expenditures.

Unless the socio-cultural determinants of health are addressed in a coordinated and concerted manner by all related sectors, “health for all” will remain an unfulfilled promise. Indeed, the need of the hour is “Healthy Public Policies” which implies that health concerns are reflected and attended to in all sectoral policies and programmes. Given the multitude of sectors and agencies whose work affects health of the urban populations the need for rapidly developing “healthy urban public policies” is all too evident.

In recognition of the importance of the effects of urbanization on human health, the Ministers of Health of the WHO South-East Asia Region at their meeting in Thailand in September 2010 adopted the Bangkok Declaration on Urbanization and Health. Among other things the declaration calls for pro-poor policies and strategies and increase in resources to reduce the social costs of health inequities. It also calls for a holistic and multidisciplinary approach by all sectors of the government, including local government, industry and the community to reduce health equity gaps among urban dwellers. The challenge before us is to develop an evidence-based, cost-effective framework to address the emerging needs of the urban poor in the context of rapid urbanization.

This publication is an attempt to provide an overview of the health status of the urban poor in Member States of WHO’s South-East Asia Region. It explores the effect of socio-cultural determinants and health system challenges and proposes a strategic framework for addressing the health concerns of this underprivileged section of society. It is hoped that policy makers, programme managers, public health professionals and others will find this publication useful in further strengthening the health system response to address issues related to the health of the urban poor.



Dr Samlee Plianbangchang  
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## Acknowledgement

The initial draft of this document was prepared by a small and dedicated team of staff from the Indian Institute of Public Health, Hyderabad, India led by Professor Mala Rao. The other members of the team were Dr J. K. Lakshmi and Dr Amit Samarth. Their contributions are gratefully acknowledged. The draft document was presented to the participants of the Regional Consultation the Health of the Urban Poor organized by the WHO Regional Office for South-East Asia in Mumbai, India, from 13-15 October 2010. The feedback received from the participants has been incorporated in the publication.

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