PREPARATIONS FOR THE ROUNDTABLE
ON URBANISM AND HEALTHY LIVING

Background

1. World Health Day (WHD) is celebrated annually on 7 April, the day which marks the anniversary of the founding of the World Health Organization (WHO). In recent years, a roundtable on the theme of that year’s World Health Day is included on the agenda of PAHO’s Directing Council. It is an opportunity to draw worldwide attention to a subject of major importance to global health. “Urbanism and Healthy Living” is the theme of WHD this year and will be the topic of the roundtable at the 50th PAHO Directing Council.

2. Improving urban health is a mandate that originated from the Rio 92 meeting. A focus on finding a solution to the problem of urban health can be found in chapter 6 of Agenda 21: Protection and Promotion of Human Health (1). In 2005, the Report of the Secretary-General of the United Nations: “In larger freedom: towards development, security and human rights for all,” (2) highlights the need for freedom to live without misery in the face of the challenge of urban development: creation of jobs, improvement of slum neighborhoods, and a search for alternatives to prevent the development of such neighborhoods.

Situation in the Americas

3. By 2030, three-fifths of the world's population will reside in urban areas. Evidence suggests there will be even greater inequality in health in the future. The majority of urban dwellers will live in cities in Asia, Africa, and Latin America. Such cities are becoming ever more impoverished relative to the industrialized countries. It is predicted that this future urban shift will be characterized by greater movement of populations toward urban centers; slums will be home to a greater proportion of the
world’s poor; and these expanded cities will create a dramatic impact on the environment and human health (3).

4. Since the 1980s, a number of studies have been conducted on urban health or healthy cities (4-10). These studies have evaluated aspects of: health in the world’s cities, environmental factors, migration and immigrant health in cities, city health systems and services, equity, local governance, urban policy and planning, social innovations, care for the poor and hungry, and urban violence.

5. As of 2010, 79.4% of the population in the Region of the Americas lives in urban areas, and most of the future population growth will be in cities (11). Unplanned urbanization is a major concern for certain vulnerable populations and is rapidly creating a humanitarian crisis. Also this year, 30.8% of urban residents in Latin America and the Caribbean are living in slums with no basic public services (11). Services lacking are water and sanitation, waste disposal, transportation, energy, health care, education, and protection from high incidences of communicable diseases, poverty, violence, and mortality. Numerous municipal governments, nongovernmental organizations, and private providers in the Region are implementing new policies and programs to achieve better urbanization models that can be models for the world. For example, many cities are reducing air pollution, greenhouse gas emissions and traffic injuries by subsidizing public transportation, controlling how often private cars can be on the road, and by creating space for forms of transportation that increase the physical activity of citizens.

6. In the Region of the Americas, six of the largest urban areas are megacities (defined as cities with populations of over 10 million): two in Brazil, São Paulo and Rio de Janeiro; two in the United States, New York and Los Angeles; Buenos Aires in Argentina; and Mexico City. Other major cities are Bogotá, Colombia and Lima, Peru, each of which has over eight million inhabitants. They are followed by Santiago, Chile, and Belo Horizonte, Brazil, each with some six million inhabitants. While these major cities continue to grow, intermediate size cities in the Region (usually with populations of two to five million) are currently experiencing the highest population growth rates.

7. The Region's intermediate-size cities have lower economic, social, and political ranking than the larger metropolitan centers. An ECLAC study on poverty and precarious living conditions in the cities of the Region shows that, since 1995, the distribution of poor households is highest among intermediate-size cities (12). In 2001, 127 million, or 33% of the Region’s population, lived in slums (35% of the population in South America and 24% of the population in Central America and the Caribbean) (13).
8. As reported by the World Bank, the Region of the Americas has the highest economic disparity in the world. Disparities also exist for social, political, climatic, and ethnic conditions, especially in the urban environment.

9. Urban health problems cannot be resolved by the public health sector alone. The problems are a consequence of the interaction of many other factors, such as transportation and housing. The health sector can and should lead the dialogue for the development of public policies that will contribute to healthy populations. The urban approach requires going beyond what an individual or a family can achieve. Such urban efforts also require viewing the city as a whole complex of social and environmental determinants of health. It is clearly not sufficient to work in isolation with one sector, one population, or one institution.

**PAHO/WHO Collaborative Efforts**

10. Since 2003, PAHO has promoted a series of activities in order to establish a common strategy that responds to urban health problems. Profiles of some cities of the Region were prepared and presented at the First Regional Urban Health Meeting in Santiago, Chile in 2004. At the same meeting, the first conceptual document, with the title “The City of Citizens” (14), was presented.\(^1\)

11. In collaboration with its partners, PAHO presented a framework document on urban health at the first meeting of the Urban Health Forum in Mexico in 2007 (15).

12. Related to urban health, for years PAHO has been working on health promotion, especially through healthy setting initiatives such as Healthy Municipalities and Health Promoting Schools, among others.

13. For the commemoration of WHD 2010, PAHO has planned to participate in global activities such as the World Urban Forum 5, the World Urban Youth Assembly with the UN Habitat in Brazil; the World Expo 2010 in China; the Global Report on Urbanization and Health with the World Health Organization and UN Habitat; and the Global Forum of Healthy Urbanization in Japan. PAHO will also participate in the WHO 1000 Cities, 1000 Lives Campaign.\(^2\) PAHO will prepare a regional diagnosis report on urban health that will be ready by July 2010 in time for the Second Regional Forum on Urban Health and the Third Regional Forum on Health Promotion.

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\(^1\) Document produced for the Pan American Health Organization consultation on urban health, Chile, May 2004.

\(^2\) 1000 Cities, 1000 Lives is a global initiative coordinated by the WHO Centre in Kobe, Japan, to encourage cities, towns, neighborhoods and individuals to conduct health-promoting activities on or around WHD. For more information, visit: [www.paho.org/whd2010](http://www.paho.org/whd2010).
The Roundtable

Attendees

14. Public health officials from Member States attending the Directing Council will be joined by representatives of academia, United Nations agencies, and civil society organizations.

Program Format

15. The roundtable will be of two hours duration, as follows:

Opening session (20 minutes)

- Opening remarks by the President of the Directing Council
- Keynote address (15 minutes): Presentation by a special guest on the topic of Improving Health in Cities
- Presentation on urban health by Dr. Luiz A. Galvão, Area Manager, Sustainable Development and Environmental Health

Discussion Groups (60 minutes)

16. After the opening session, discussion groups representative of each of the subregions and taking into consideration language preferences, will be convened to discuss the pertinent elements of the White Paper on Urban Health. Each group will include a moderator, a motivational speaker, and a rapporteur. The format of the group discussions will be as follows:

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3 This document will be available in the second week of July, 2010.
### Discussion panels: (60 minutes)

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<th>Discussion panel #1</th>
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| **Subject:** | Health Determinants for Human Security  
Healthy Urban Governance and Equity  
Urban Infrastructure and Urban Planning  
Ecosystem Change, Crisis/ Emergency Preparedness and Response |
| **Moderator:** | Directing Council President (TBD*) |
| **Rapporteur:** | PAHO Advisor (TBD) |
| **Presentation of the discussion item:** | Minister of Health (TBD) |
| **Countries:** | Antigua and Barbuda, Bahamas, Barbados, Belize, Canada, Dominica, Grenada, Guyana, Haiti, Jamaica, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, United Kingdom Overseas Territories (Anguilla, British Virgin Islands, Montserrat) and United States of America |

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<th>Discussion panel #2</th>
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| **Subject:** | Health Determinants for Human Security  
Healthy Urban Governance and Equity  
Urban Infrastructure and Urban Planning  
Ecosystem Change, Crisis/ Emergency Preparedness and Response |
| **Moderator:** | Directing Council Vice President (TBD) |
| **Rapporteur:** | PAHO Advisor (TBD) |
| **Presentation of the discussion item:** | Minister of Health (TBD) |
| **Countries:** | Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Paraguay, Peru, Uruguay, Venezuela |

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<th>Discussion panel #3</th>
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| **Subject:** | Health Determinants for Human Security  
Healthy Urban Governance and Equity  
Urban Infrastructure and Urban Planning  
Ecosystem Change, Crisis/ Emergency Preparedness and Response |
| **Moderator:** | Directing Council Vice President (TBD) |
| **Presentation of the discussion item:** | Minister of Health (TBD) |
| **Rapporteur:** | PAHO Advisor (TBD) |
| **Countries:** | Costa Rica, Cuba, Dominican Republic, El Salvador, Guatemala, Honduras, Mexico, Nicaragua and Panama |

* To be determined.
Presentation of the Report in Plenary Session (30 minutes)

17. The conclusions of the group discussions will be presented at a subsequent plenary session of the Directing Council.

Expected Outcome

18. The document with the discussions and conclusions will provide additional input and serve as the basis for PAHO to develop a regional plan of action on urban health with clear objectives, outcomes, and indicators for monitoring program implementation.

Action by the Executive Committee

19. The Executive Committee is invited to note the preparations underway for the roundtable and to provide guidance to the Pan American Sanitary Bureau, in order to improve the outcome.

References