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WORLD HEALTH ORGANISATION TARGETS URBANISATION

Tuesday, 04 May 2010 | Written by Graham Jarvis |

The World Health Organisation (WHO) celebrated World Health Day on 7 April 2010. This year the event, which marked the organisation's 62nd anniversary, kicked off a year-long campaign to highlight health threats arising from the worldwide trend toward urbanisation. Traditionally the WHO has fought to eliminate diseases and reduce the incidence of slums, poor sanitation and hunger. Health education plays a key role within the organisation's mandate, and over the years its collaborative platform has successfully engaged governments in international co-operation to reduce both the spread and mortality rates of diseases such as malaria, tuberculosis, HIV/AIDS, cancer and SARS. The goals and ambitions set forth at this year's World Health Day – themed 'Urban Health Matters' – are equally commendable, even if they do occasionally evince a touch of international nanny statism.

PERSONAL FREEDOM VERSUS COLLECTIVE RESPONSIBILITY The WHO wants to reduce automobile usage to free city streets from traffic. Undeniably exhaust emissions need to be reduced – lower air pollution levels translate into notable health improvements among urban dwellers; and it is likewise right and proper to educate motorists to take less risk in order to reduce accidents and personal injury. But in 'encouraging' people to abandon their cars as a means of reducing road traffic accidents in our towns and cities, the WHO now runs the risk of being perceived as pursuing an anti-car agenda. People often know very well what's good and bad for them, and they tend not to like being told what to do – taking risks is part of life, and indeed essential to the human learning process. Neither the state nor supranational organisations can or should protect us absolutely, particularly in this context; however they can provide us with the information and education that we all need to make informed choices. In the latter scenario, a reduction in road traffic accidents could just as well come from the enactment of more stringent driver training and driving standards. Toxic exhaust fumes, meanwhile, could be eliminated through the introduction of alternative fuels and technologies to improve air quality.

As far as alternative modes of transport go, cycling is certainly enjoyable, and eliminating motor vehicle traffic would make it a safer and more attractive mode of transport. However, it is not always practical to visit the shops or commute on a bike – which is probably why so many existing traffic-free zones, including the one in San Francisco, only operate outside normal working hours.

People will still want to use some form of motorised transport, particularly if they live in the suburbs (and almost without exception if they live in rural areas). Public transport in London, for example, is quite good, so that alone should reduce the number of people using their cars (save for those die-hards who either don't feel safe or don't like travelling on public transport). But it doesn't necessarily follow that you'll be healthier if you take the bus and/or train: while you might walk marginally more than you would if you were to drive from A to B, you might still be going from 'seat to seat' and eating all the wrong foods. It's also worth noting that buses and trains contribute to pollution, albeit less so than cars.

The WHO's intentions are good, but it will be difficult to reconcile personal freedom with collective responsibility – particularly if the resulting initiatives are enforced by national governments, city authorities and city planners in the wrong tone of voice. Not everyone can be expected to welcome traffic restrictions, which would inevitably have some sort of impact on businesses that operate within regulated zones.

THE PLANNING IMPERATIVE Still, sensible planning is a prerequisite to sustainably managing the growth of urbanisation. Beyond creating cycling routes and alternative modes of transport, the key challenges of increasing urbanisation in many parts of the world revolve around the provision of better sanitation, clean water, suitable housing for the incoming population and round-the-clock access to healthcare.

In the future the strain on resources will be huge. Dr Jacob Kumaresan, Director of the WHO's Kobe Centre in Japan, predicts that 70 per cent of the world's population will live in cities by 2050 – a far cry from the 1950s, when most people lived in rural areas. 'If the basic infrastructure of the world's cities does not grow in line with the speed of urbanisation, people will be stranded in slums and informal settlements,' he says, before revealing the shocking fact that such settlements are already home to one in three city inhabitants worldwide.

But the WHO's initiatives shouldn't be mistaken for a campaign against urbanisation: the organisation recognises that the migration toward cities is created by a widespread need for education, employment and in many cases access to the kind of healthcare that isn't always available in rural areas, particularly in less developed countries. Given that the poor suffer disproportionately from a wide range of diseases and health problems, urbanisation is a positive phenomenon to the extent that it is linked to growing income levels. With all of these issues in mind, the WHO believes that the major drivers of good health within urban areas exist beyond the healthcare sector – that's why urban planning and collaboration are central to its campaign.



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