

The link between city planning and health



Why do people in poorer communities live shorter than people in wealthy ones? “ People in the most deprived districts of an urban area may have a life expectancy that is twelve years shorter than those living in its most affluent areas is of direct concern to health and development planning policy alike” (107). City/Urban planning has been linked to inequalities in race, gender and wealth. These inequalities effect the quality of life of the people who lives in lower communities. The City/Urban Planning system needs to revert from segregation and isolation to inclusion of people of all race, gender , and class.

City planning originated in the 19th century to solve the unsanitary overcrowded, and in humane conditions of “ cities”. From reducing inequality in housing, employment or health, to clean air and water, these are all important factors that city planners work on to promote healthier cities. Hence why health and planning are historically linked. “ This link has been continually articulated in the modern era, with the environment seen as one of the key detriments of health alongside inherited characteristics, lifestyles, and social and economic values” (95)

In reality city planning has caused segregation and social inequalities. Despite the historical link between health and city planning, connections have been neglected. City planning has not improved but deepened inequalities in race, gender, and wealth. Segregation and Poverty of lower class communities are also at stake. Based on the evidence from the article “ Cutting with the Grain: Human Rights, Conflict Transformation and the Urban Planning System— Lessons from Northern Ireland” I learned that city planning has been used as a form of segregation and exclusion in order to

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control politically motivated violence that resulted from economic inequalities. These actions were assisted and facilitated by the government of Northern Ireland(347).

City planning based on segregation and systematic/social inequalities have a huge impact on the health and well being of the people who occupy cities. Increasing inequality, rising housing prices, economic and racial segregation can all determine the overall success and well being of a person. Social inequality has been linked to racial inequality, gender inequality, and wealth inequality. Keith Payne makes a strong case based on evidence that “ the perception of inequality affects us individually in ways that are also profound, life-changing, and predictable” (1/8).

Inequality can lead to major factors like stress and a lower quality of life depending on housing, inequalities in the workplace, and inequalities in pay and status. I am an African American woman who was born and raised in New Orleans, Louisiana. Being black living in a lower-lying neighborhood and being a woman means that I face social inequalities and poverty everyday. When I leave my home to go to school I pass up old houses, abandoned buildings, and horrible streets. It isn't until I get closer Uptown by my school where streets are better, businesses are blossoming, and everything's updated. The fact that I only live about ten miles from my school means that the poor city planning is the blame for this. According to the article “ Housing in Hard Times,”

[O]ur most excluded neighborhoods may be characterized by a fire tensions and problems, but they are not “ broken” or “ dislocated”. Most

residents living there share values and aspirations similar to the rest of us: fairness, hard work, and responsibility(7).

The WHO has been working with urban planners to promote healthier cities. Integration of health and planning professionals are very critical so that integrated solutions can emerge from everyone. According to Tim Chapman in “ Health and The Urban Planner” his role in the Healthy Urban Development Unit (HUDU) was relating the health and planning sectors to one another, and providing tools and processes to help both sides work together more effectively. Chapman finds that it is harder to engage the local Primary Care Trust (PCT) in the agenda than than the local planning authority(102). The author then suggest ways to reassess the health and planning relationship by planners taking much more account of health, and understanding what works and what doesn't.

In order to know what we need to do to reverse negative aspects like poverty, we need to know what is dividing us. The planning system needs to be changed from segregation and isolation to inclusion and social inequalities need to be addressed. Tim Chapman -Homes and Communities Agency- Advisory Team suggest that we reassess the health and planning relationships, we determine what works and what doesn't, and planners should take much more account of health(104). Reducing inequality by identifying it as a world health problem may help with the social inequalities. According to Keith Payne “ On the individual level he recommends shifting from a focus on comparisons with others to attention to what we value most”(1/8).

Works Cited

Malnati, Karen Venturella “ The New Urban Crisis: How Our Cities Are Increasing Inequality, Deepening Segregation, and Failing the Middle Class— And What Can We Do About It”

Library Journal . 3/15/2017, Vol. 142 Issue 5, p132-132. 1/8p.

This journal argues how about cities are increasing inequality, deepening segregation, and failing the middle class and exemplifies things to do about it. This journal also gives an insight on how inequality affects us individually in ways that are also profound, life-changing and predictable by using evidence from an array of surveys, experiments, and field observations

Cunningham, Tim. “ Cutting With The Grain: Human Rights, Conflict Transformation and the Urban Planning System-Lessons from Northern Ireland”

Human Rights Review Sep2016, Vol. 17 Issue 3, p329-347. 19p. DOI: 10.1007/s12142-016-0416-4

This article examines how the urban planning system in Northern Ireland served to concentrate segregation and systematic inequalities. By using documents uncovered from the Northern Ireland Public Record Office this article proves how the security forces ‘ cut with the grain’ of a planning system that had historically been predicated upon segregation and exclusion in order to better control and manage politically motivated violence leaving a divided city in which systematic inequalities have been built into the fabric of urban environment.

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McKee, Kim¹ Muir, Jenny² “ An Introduction to the Special Issue-Housing In Hard Times: Marginality, Inequality, and Class”

Housing, Theory & Society Mar2013, Vol. 30 Issue 1, p1-9. 9p.

DOI: 10. 1080/14036096. 2012. 682817.

This article questions the impact of economic change on housing policy and related areas, with a specific focus on concepts of class, poverty, and social exclusion to analyze the effect on the most vulnerable members of the society. The authors encourage “ bringing class back in” to these housing studies. This article concludes that if current trends continue access to housing, education, health services will become more difficult and expensive for lower-income families. As a result class will become an inescapable feature of housing studies as social divisions increase.

Crawford, Jenny “ Health at the Heart of Spatial Planning”

Planning, Theory, and Practice Mar2010, Vol. 11 Issue 1, p91-94. 4p.

DOI: 10. 1080/14649350903537956

Hypothesis/thesis The article focuses on the concerns of the impact of urban environment on health, and the lack of a shared vision on how to support healthy lifestyles.

This article contributes important perspectives and views from professionals that believe coordination and communication around the public health agenda is not only split between the planning and public health disciplines,

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but is divided into medical practice, social services, housing, and regeneration.

Hugh Barton “ Strengthening the Roots of Planning”

Planning, Theory, and Practice Mar2010, Vol. 11 Issue 1, p95-101. 6p. 1

Diagram

DOI: 10. 1080/14649350903537956

The evidence from this article indicates that although there is a link between environmental conditions and human health, the underlying fact is that we neglect environmental factors. Health authorities are supposed to provide services for people who are ill, while public health programs have concentrated on infectious diseases and addictions rather than healthy environments.

Tim Chapman “ Health and the Urban Planner”

Planning, Theory, and Practice Mar2010, Vol. 11 Issue 1, p101-105. 4p.

DOI: 10. 1080/14649350903537956

This author reflects on his role in HUDU relating the health and planning sectors to one another and providing tools and processes to help both sides work together more effectively. Chapman finds that it is harder to engage the local PCT in the agenda than than the local planning authority. PCTs often would remain focused on their core job. The author then suggest ways to reassess the health and planning relationship by planners taking much more account of health, and understanding what works and what doesn't.

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Martin Higgins “ Health Inequalities and Place”

Planning, Theory, and Practice Mar2010, Vol. 11 Issue 1, p106-109. 4p. 1

Diagram

DOI: 10. 1080/14649350903537956

Planners and public health specialists have attempted to address health inequalities to figure out why people living in less affluent areas suffer more illness and diseases than people who don't. These planners and public health specialists are aiming to reduce people exposure to factors in the physical and social environment that cause stress, are damaging to health and well being, and cause health inequalities.

Leslie, Deborah Catungal, John Paul “ Social Justice and the Creative City: Class, Gender and Racial Inequalities”

Geography Compass . Mar2012, Vol. 6 Issue 3, p111-122. 12p. DOI: 10. 1111/j. 1749-8198. 2011. 00472. x.

Critiques of the popular theory of the “ creative city” have concluded that this trend continues and even deepens class inequality. The author identifies three reasons that gender and racial inequality is at stake in the creative city (1) the conceptual spaces of the creative class idea(2) The workplaces of the cultural and creative industries and (3) the amenity and public landscapes of the creative city- as sites where class, gender and racial inequalities are maintained and exacerbated as a result of creativity-led urban economic development policies.

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