

CITIES, HEALTH AND WELL-BEING

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Investigating Health and Well-Being in Cape Town



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Artwork by Marcos Almada Rivero , 2011



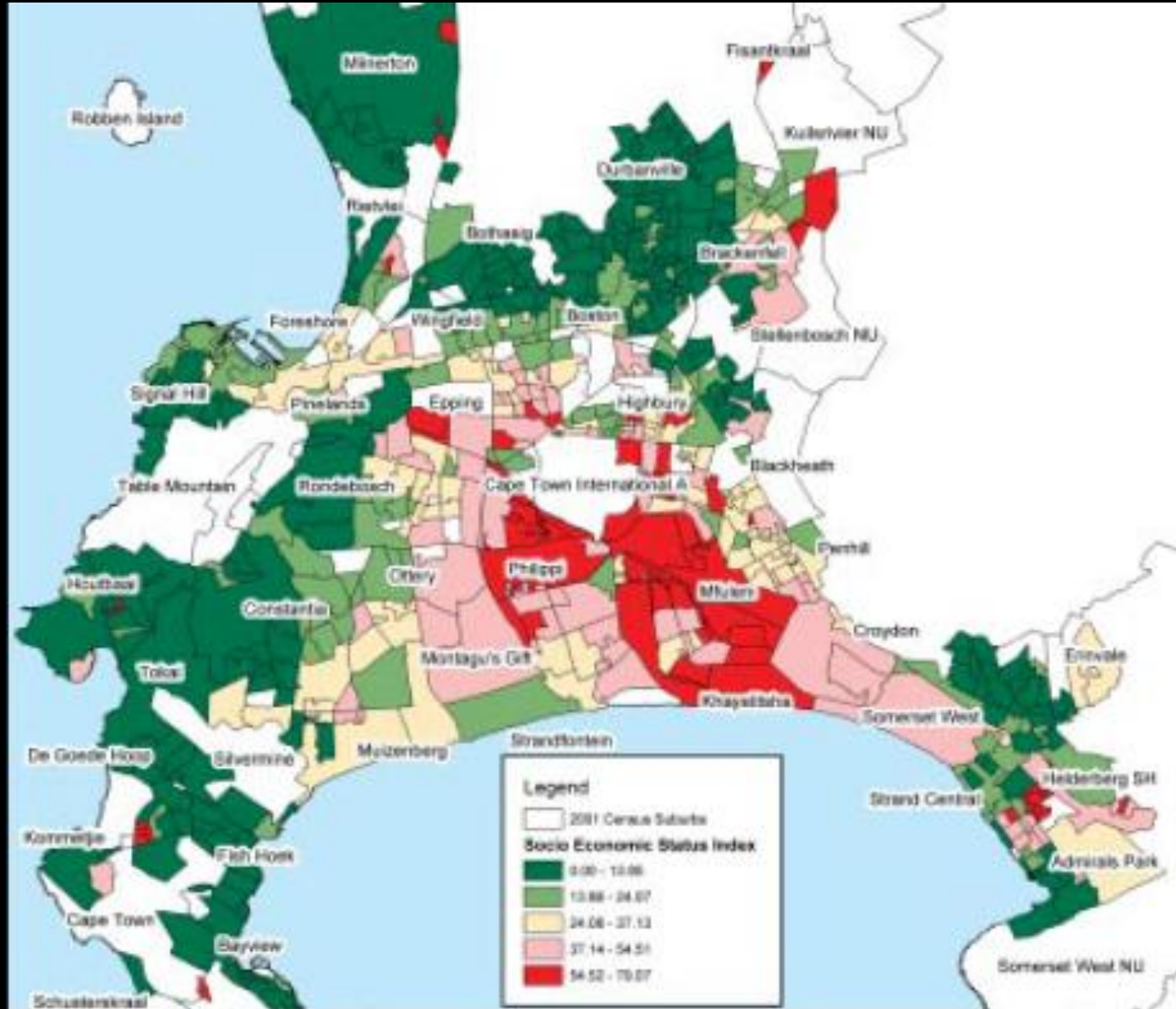
Structure of presentation

- Context of Cape Town
- Healthy Cities CityLab
- Preliminary findings of fieldwork
- Improving health and well-being in Cape Town

Context of Cape Town

- Third largest city in South Africa - population of 3.7 million.
- High levels of poverty and inequality, with 280 000 households living in informal dwellings.
- Sprawling and segregated spatial structure; low average density (about 3000 people/km²). Poorer residents are largely located in peripheral areas and are particularly negatively impacted by this spatial form.
- High, and complex, quintuple burden of disease: HIV/AIDS; high levels of other communicable diseases, e.g. TB; rapidly increasing chronic diseases, e.g. diabetes; high levels of injuries (murder, traffic accidents); high levels of psychosocial stresses.
- High level of health inequities, e.g. mortality rate for communicable diseases varies by up to 5 times between health districts.

Socio-spatial inequity in Cape Town



Health inequities: age-standardized mortality rates for two health districts 2003-2006

Indicator	Khayelitsha	Southern Peninsula	Cape Town
Non-communicable disease	844	526	618
HIV/AIDS	229	30	79
Other communicable diseases	321	82	135
Homicide	111	26	58
Traffic accidents	59	13	27
Total	1619	713	956

Cape Town



Central Cape Town



Informal settlements, Cape Town (1)



Informal settlements, Cape Town (2)



Informal settlements, Cape Town (3)



Informal settlements, Cape Town (4)



The Healthy Cities CityLab

- Although Cape Town faces enormous health challenges, for various reasons (lack of data, short-term political timeframes, competing discourses), health has largely fallen off the urban agenda (apart from HIV/AIDS).
- Existing body of knowledge on health/well-being and the physical urban environment (and how to create healthy cities) is of limited use in cities such as Cape Town. In response, the African Centre for Cities established the Healthy Cities CityLab to bring together researchers from different disciplines to undertake research on health and the urban environment in Cape Town and engage with policymakers.
- The first phase of the research involves focus groups/interviews with residents in different types of neighbourhoods and various quantitative measures.

Preliminary findings of fieldwork

- Highlights that health and well-being need to be understood in a more nuanced, context-specific way.
- Confirms that neighbourhood physical urban environments have a significant impact on health/well-being of residents, and residents understand these links better than anyone.
- The relationship between the neighbourhood physical urban environment and health/well-being is made more complex by the local social context, e.g. fear of violent crime greatly constrains use of outdoor space.
- Most low-income households in Cape Town live in spatially-marginalized areas cut off from socio-economic opportunities, which has a profound impact on health/well-being of residents.

Improving health and well-being in Cape Town

- In addition to better provision and maintenance of services/ facilities, neighbourhoods need to be designed /retrofitted to make them safer, more conducive to outdoor activity and more conducive to better diet and nutrition.
- Possible interventions include: redesign of streets for pedestrians/ cyclists, better street lighting, greening of public spaces, encouragement of urban agriculture, better infrastructure for food markets/ street food sellers.
- At city-wide scale, densification, compaction and integration of land uses/socio-economic groups are required (through participatory processes that use disaggregated health data, and utilizing tools such as slum upgrading, inclusionary zoning, and land taxation) to ensure that all residents have easier access to socio-economic opportunities and to reduce health inequities.