Healthy Urban Planning: Meaning of Sustainable Development to Improve the Quality of Human Life in the City

Haryo Sulistyarso

Sepuluh Nopember Institute of Technology, Surabaya, Indonesia e-mail: urplan@its.ac.id

Abstract. Urban planning, as one of the first important process in developing a city, should also accommodate ethical dimensions of sustainable development which could promote health and the quality of human life, through a harmonious relation between human and nature. A healthy city should meet the basic needs for all the city's people, among others promoting a high health status and low levels of disease, a high degree of participation and control by the public over the decisions affecting their lives, health and wellbeing. Other planning policies and qualities of a healthy city are also discussed.

Key words: urban planning, sustainable city development, quality of life

Abstrak. Perencanaan kota, sebagai salah satu proses penting pertama dalam mengembangkan sebuah kota, seyogianya juga mengakomodasi dimensi etis pengembangan yang berkelanjutan yang mampu meningkatkan kesehatan dan kualitas hidup manusia, melalui hubungan harmonis antara manusia dan alam. Sebuah kota yang sehat wajib memenuhi kebutuhan dasar seluruh penghuni kota, antara lain peningkatan status kesehatan yang tinggi dan langka penyakit, tingkat keperansertaan yang tinggi dan kontrol ketat oleh masyarakat menyangkut putusan yang memengaruhi kehidupan, kesehatan, dan kesejahteraannya. Didiskusikan pula kebijakan perencanaan dan kualitas kota sehat yang lain.

Kata kunci: perencanaan kota, pengembangan kota yang berkelanjutan, kualitas hidup

A healthy city is one that is continually creating and improving those physical and social environment and expanding those community resources which enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential (Hancock & Duhl, 1988, p. 98).

A healthy city is defined by a process and not just an outcome. A healthy city is not one that has achieved a particular health status level; it is conscious of health and striving to improve it. Those any city can be a healthy city, regardless of its current health statues; what is required is a commitment to health and a structure and process to achieve it. (International Healthy Cities Foundation, 2004).

The recent issue (about global warming) in both national or international discussions and meetings is also one of the environmental problems that we must think about this problem more intensively. The problem could be caused by ineffective urban/city planning and the ineffective implementation of the development planning concepts. Recently, urban planners try to find and implement the new concepts to reduce the negative effects of ineffective urban/city planning (spatial planning, land use planning). One of the planning and development concepts is "sustainable development," which have been presented for many years. But, however, it is only within the past view years that sustainable development has assumed prominence as an important concept and philosophy to guide economic development and environmental management. By the time, there is tendency to view and present sustainable development as 'a new environmental technologies' or 'population stabilization'.

History of the City Planning

Patrick Geddes is hailed as one of the founding fathers of the modern town planning movement, explained in his theory of the city and its practical

^{*} This article was presented at the International Conference on Improving the Quality of Human Life: Multidisciplinary Approach on Strategic Relevance for Urban Issues, on September 6-7, 2007 in Surabaya. Courtesy of Dr. Ing. Haryo Sulistiarso

application in the form of city design. He declared that "place, work and folk" (Geddes famous analytical triad) and cities, should be understood from three viewpoints: the geographical, the historical and the spiritual. These three aspects of the cities were correspond to place, work and folk. The City is for Geddes the most distinct form that human life can take, it is the form human life should take, especially in its highest development as cooperative and communal life (Mather, 2007).

Another model of city planning was offered by Ebenezer Howard in 1890. He accepts that cities are attractive to people, and his concept of the social city ("garden city" as it is usually called today), starts from this basic premise. Howard envisions a complex of smaller cities surrounding congested places; each of these complexes is to be encircled by a country belt and connected by tramway and high speed train systems. The economic basis of this social city is publicly owned land whose value rises with the city's growth. Howard also claims that the social city is a marriage of town and country, as its distributes the inhabitants of an existing big city over a large area (Reps, 2003).

According to the Geddesian's and Howard's theories, a French anarchogeographer Reclus (1895, p. 35) wrote:

What was once the most densely inhabited part of the city is precisely the part which is now becoming deserted, because it is becoming common property, or at least a common centre of intermittent life. Too useful to the mass of the citizens to be monopolized by private families, the heart of the city is the patrimony of all....The community claims...the use of open spaces of the city for public meetings and open-air celebrations. Every town should have its agora, where all who are animated by a common passion can meet together.

However, the new issue about the concepts of the city planning is also how "the sustainable cities" will be created and designed. Discussions about sustainability in East Asia (incl. Indonesia) revolve around how to improve environmental quality, manage processes of rapid urban growth, encourage of public participation, and share the benefits of economic prosperity. On the other side, discussions in the West have focused on finding ways to increase densities, facilitate increased mixing of land use, and enhance public transit use. According to these issues, Satterthwaite (1997) suggests that a "successful" city has to meet three goals, (a) pro-

vide a healthy living and working environment for inhabitant, (b) furnish safe water, sanitary conditions, rubbish collection and disposal, drains, paved roads, and other essential infrastructure for health and economic development, and (c) remain in an ecologically-balanced relationship with local and global ecosystems.

"Modernization" and the City

After the Monetary and Economic Crisis in Indonesia in 1997's, strong pressures towards "liberalization" and "democratization" of the political system are being expressed. Spatially, "modernization" is concentrated in the capital cities and the regional centres. The primate cities (for examples Jakarta, Surabaya and other big cities in Indonesia) are the places of articulation of globalization, national integration and localization. The cities are regarded of corrupted way of life, in contrast and contradiction to genuine Indonesian cultures. The City's "face" and landscape bear a powerful imprint of globalization in the form of shopping centres, hotels, office building and even dominance with the "Ruko" (Home and Shop).

Modernity and change is, actually, symbolized by modern economic institutions and by the construction of new buildings connected with a modern, formalized economy. But, however, the question of this paradox development process (between "modern" and "traditional" or even in the architectural meanings "vernacular") is still in debate: Is the rise of urban symbolism in Indonesia an expression of a new regionalism, or a revival of ethnic identity?

In the context of the urban development in most of the Indonesian cities, a specific place (market/"pasar," or open space/"aloon-aloon"), has a symbolic meaning, where goods are bought and sold, where the people share and make or construct the social life, and others. This is also a place for the production and reproduction of meaning and a powerful symbol of urban life. As a matter of fact, while capitalism transformed labour into a commodity and thereby into abstract labour and value, through globalization, space is transformed into abstract space and places and localities into commodities. The emergence of space as abstract space and the commodification of localities means more than

26 SULISTYARSO

exchange and the buying and selling of land (Le febvre, 1976).

Connected to this explanation, Santos (1979) divides the city in two sectors: An upper and lower circuit, each of which functions according to a rationality of its own but which are linked to one another by middlemen, mainly wholesalers and transport company owners. According to the reality of the culture and social condition in Indonesia, we must know exactly about the meaning of the culture itself, especially on the interpretation and perception of the city by inhabitants, who socially con struct the city through their action.

Urban Planning and health: Mutual Symbiosis

Urban planning, as one of the first important process by developing of the City, refers to the institutionalized process of making decisions about the future use and character of the land and buildings in city regions. However, urban planning can either promote or damage health and the quality of life. Healthy urban planning involves planning practices that promote health and wellbeing and has much in common with the principle of sustainable development. Urban planning implies also a need to place values such as equity and collaboration (intersectoral cooperation and community participation).

According to equity, healthy urban planning is a need to implement policies aimed at improving the living standards of disadvantaged and vulnerable populations and to bear in mind the diversity of city users in terms of age, gender, physical ability, ethnic origin and economic circumstances. The equity in this context reduces the imbalance in the urban fabric and problems associated with access to transport, air and noise pollution, and increases the quality of public spaces, social cohesion, healthy lifestyles and employment opportunities.

Otherwise, the health objectives and collaboration in urban planning is therefore essential (collaborative approach, working in partnership toward agreed objectives). Collaboration in urban planning involves both different approaches to decision-making and conscious attempts to engage the community.

Table 1 sets out the relationship between the main planning policy areas and relevant determinants of

health. These determinants consist of four levels of variables (from lifestyle to broad environmental variables): (a) Individual behavior and lifestyle. The propensity of people safety (pedestrian, cycling route, open space, etc.) promotes a sense of wellbeing and protects older people from depression, (b) Social and community influences. The sustaining of local facilities (schools, post office, resto, safe streets, market, etc.) and networks depends in part on coherent long-term strategies for housing, economic development and transport, (c) Local structural conditions. Planning policy very directly affects personal health in a number of ways (inexpensive transport system can reduce the transport cost problem, accessible work opportunities can help alleviate poverty and depression), (d) General socioeconomic, cultural and environmental conditions. Local urban planning (in Indonesia: Detail spatial planning/RDTRK, Technical spatial planning/ RTRK) affects the quality of air, water and soil resources.

Conclusion

Sustainable development has been defined as "development that meets the needs and aspirations of the present without compromising the ability of future generations to meet their own needs" (Campbell & Heck, 1997). The ethical dimensions of sustainable development are two folds: (a) Our relationship to fellow inhabitants of our country and planet, (b) our relationship to the land and plant and animal inhabitants of the world.

According to the definition and to the ethical dimensions of sustainable development, it is also important to understand, that the relation between the human and nature, between the human it self and nature and nature give the positive result for human wellbeing. Furthermore, wild places, green parks, smaller squares, open spaces ("blue spaces": Lagoon, lake, etc.) and other community spaces are all important. Otherwise, public open spaces play an essential role in safeguarding and promoting the health of community. Individuals must be able to relax in contact with the elements of nature in green or blue spaces in numerous ways: recreation, social, cultural and physical activities.

Table 1
Matrix of Planning Policy Areas and The Social and Environmental Determinants of Health

		Planning policy areas								
	determinants of health	Building les	Jula libris Housing F	plicy Economic of	Social ser	Jices and benefit	e Transport	Ereigy was	er and drainage	Urban legeneration
1	Personal lifestyles				•	**	**		*	
2	Social cohesion				*	*	*		**	*
3	Housing	**	**					**	*	•
3	Work	*		**						*
3	Access		**		**	*	**		**	*
3	Food					*			*	
3	Safety	*	*				**		*	*
3	Equity	*	**	*	**	*	**	*	**	*
4	Air quality									
	and aesthetics	*	*	**		*	**	*	*	*
4	Water and sanitation	**		*		*		**		
4	Soil and solid waste	*		*						**
4	Global climate	**	*	**	*	*	**	**	**	*

Source: adapted from Barton and Tsorou (2000)

Planning is defined in terms of the development of land and buildings and towns. This chart does not therefore highlight the subsequent regulation levels of pollution and other factors. Nor does it focus on the social, education, and health services *per se* but rather their accessibility.

The qualities of a healthy city can be defined as follows (Hancock & Duhl, 1988): (a) A clean, safe physical environment of high quality (incl. housing quality), (b) an ecosystem that is stable now and sustainable in the long term, (c) a strong, mutually supportive and non-exploitative community, (d) a high degree of participation and control by the public over the decisions affecting their lives, health and wellbeing, (e) the meeting of basic needs (for foods, water, income, safety and work) for all the city's people, (f) access to a wide variety of experiences and resources, with the chance for a wide variety of contact, interaction and communication, (g) a diverse, vital and innovative city economy, (h) the encouragement of connectedness with the past, with the cultural and biological heritage of city dwellers and with other groups and individuals, (i) a form that is compatible with and enhances the preceding characteristics, (j) an optimum level of appropriate public health and sick care services accessible to all, (k) high health status (high level of positive health and low levels of disease).

It is also therefore vital, that each land use not be treated as a separate planning problem, as this can result in a disaggregated and dispersed pattern. However, the planning of space is in separable from other social, economic and resource issues. A good spatial planning, with impressing the two important factors (health and sustainable development) gives an optimum result for the people and nature. Health and sustainable development are intimately interconnected, and lack of development adversely affects the health of many people. In the future, sustainable development for the healthy cities (begins from a perspective of human health) is a mechanism to improve the health, wellbeing and quality of life of human beings.

References

Alan C Turley, A. C. (2005). Urban culture: Exploring cities and cultures. New Jersey: Pearson Prentice Hall.

^{*} Important influences on health

^{**} Critical or prime influences on health

28 SULISTYARSO

Barton, H. & Tsourou, C. (2000). *Healthy urban planning: A WHO guide to planning for people*. London: Spon Press.

- Campbell, C. L., & Heck, W. W. (1997). An ecological perspective on sustainable development.
 In F. D Muschett (Ed.), *Principles of sustainable development* (pp. 47-67). Delray Beach, FL.: St.Lucie Press.
- Duhl, L. J., & Sanchez, A. K. (1999). *Healthy cities* and the city planning process: A background document on links between health and urban planning. Copenhagen: WHO Regional Office for Europe.
- Evers, H-D, & Korff R. (2000). Southeast Asian urbanism: The meaning and power of social space. New York: St. Martin's Press.
- Hall, P. & Ward, C. (1998). *Sociable cities*. Chichester, WS: John Willey & Sons.
- Hancock, T., & Duhl, L. (1988). Healthy cities: Promoting health in the urban context. Copenhagen: WHO Regional Office for Europe.
- International Healthy Cities Foundation. (2004). *Phase one: Project launch*. Retrieved July 4, 2007, from http://www.healthycities.org/phase1. html
- Lefebvre, H. (1976) *De l'état: De hegel à marx par staline* (Vol. 2). Paris: Union Générale d'Éditions.

- Mather, A. (2007). School of town & regional planning: Patrick geddes. Retrieved July 4, 2007, from http://www.trp.dundee.ac.uk/general/geddes html
- Reclus, E. (1895). The evolution of cities. *The Contemporary Review*, 67(2), 246-264.
- Reps, J. W. (2003). *Garden cities of tomorrow*. Retrieved July 4, 2007, from http://www.library.cornell.edu/Reps/DOCS/howard.htm
- Santos, M., (1979). The shared space: The two circuits of the urban economy underdevelopment concept. London: Methuen.
- Satterthwaite, D. (1997). Sustainable cities or cities that contribute to sustainable development. *Urban Studies*, *34*(10), 1667-1691.
- Sorensen, A., Peter, J., Marcotullio, P. J., & Grant, J. (2004). Towards sustainable cities: East Asia, North American and European perspectives on managing urban regions. London: MPG Books Ltd.

Bibliogaphy

Agenda 21 (2000). UN Division for Sustainable Development. New York: UN Department of Economic and Social Affairs