

# Correspondence

## Health and the city

With interest I read the editorial of one of the previous issues<sup>1</sup>. Most if not all countries in the so-called 'developed world' face the problem of aging. Usually it is just taken for granted that this is indeed a problem; instead of explaining why this might be the case, most reporters just mention the numbers: the share of people who are liberated from the constraints of having to earn a living by active participation on the labor market is rapidly increasing.

In the long run, the imbalance between the size of the working population and the elderly is believed to be unsustainable. Moreover, the elderly are often held responsible for an explosion of medical costs, threatening the viability of our public health systems. In the perception of aging, economic problems apparently merge with the undeniable consequences of physical and mental deterioration in the last phases of life, resulting in a rather grim picture that often obscures the positive contribution of the elderly in modern society<sup>2</sup>.

One of the admirable contributions of the network presented by Doevendans<sup>1</sup> is that it escapes from this rhetoric and, instead, focuses on what cities can do to improve the quality of life of the elderly. Pointing out that the WHO's healthy city's network emerged from initiatives linked to the modern movement, Doevendans focuses on the city's architectural and urban characteristics as enhancing, or frustrating, their age-friendliness.

Few public health experts doubt that preventive measures are much more effective in improving the health status of citizens than investments in the medical industry, which in most countries account for about 90% of public health costs – the awareness that public health systems have become unaffordable gradually opens ways to seek a new balance, which sometimes implies a battle with the vested interests of an economic sector that, representing anything between 10 and 20% of the national economies<sup>3</sup> in most countries, is immensely powerful and prestigious.

Architectural and urban interventions have been proven to be very effective in preventing diseases and even in promoting health<sup>4</sup>. Most of these interventions target the public domain: streets, squares, parks, community gardens – precisely the urban elements that have been neglected in the heydays of post-war modernism, when their use was limited to that of spaces for traffic, and for outdoor leisure<sup>5</sup>.

In the modern megalopolis, urban life centered on the two poles of the individual home (filled to top with the wonders of electrical household appliances and the television set), and mono-functional urban zones. The revitalization of public spaces as places for social interaction and physical exercise incorporated in people's everyday activities (rather than being artificially added to it by fitness schools and wellness resorts) is an important goal of all healthy

cities concepts. Comparative research has made it clear that suburbia, once celebrated as a catalyst of social cohesion and, with its abundant greenery, a promotor of health, is less healthy than densely built-up inner-city areas, post-war housing estates showing the worst statistics (even if the effects of the lower economic status of their inhabitants is left accounted for)<sup>6</sup>.

Social hubs (preventing social isolation, which is guaranteed to result in health problems), access to healthy food, opportunities for positive distraction, street scenery that invites people to walk and leave the car at home, a high enough density to allow efficient systems of public transportation (inviting people to walk to the bus stops and metro stations), parks attracting enough people to prevent feelings of unsafety often associated with the abandoned green fields in suburban neighborhoods – all this is part and parcel of the city, and hard to compensate for in suburbia.

So, cities, face an immense task in re-arranging their architectural and urban set-up, forcing them to think of design methods to upgrade suburbia (which is there to stay), and make cities age-friendly, remembering that an age-friendly city is friendly for all age categories.

## References

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