

Outline

- Putting Health in Context
- 2 Urban Poverty and Health: The Evidence Base
- Under-Appreciated Urban Health Issues
- 4 Conclusions

Putting Health in Context:

Millennium Development Goals

- Absolute poverty, in both rural and urban areas
- Target 11: Improving lives of slum-dwellers
- Unmet basic needs in water supply, sanitation, housing
- Child survival, maternal health, tuberculosis, HIV/AIDS

Urban Demographic Transformation

Migration versus natural increase; Large versus small cities and towns

Decentralization

Municipal and other sub-national tiers of government

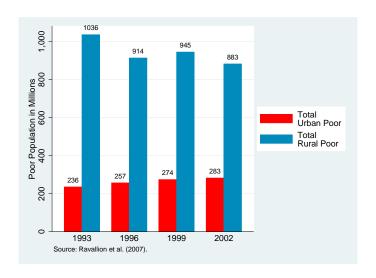
Health: Look Beneath the Averages

Recognize the Diversity of City Populations

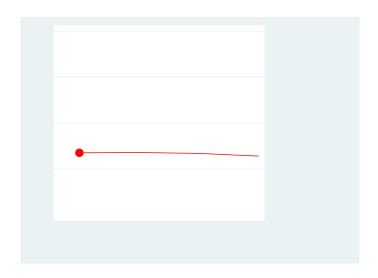
- On average, today's urban residents enjoy better health than rural villagers (apart from HIV/AIDS)
- But urban averages mask enormous within-city inequality
- Urban poor often face health risks like those of rural villagers.
- Among urban poor, slum-dwellers can face risks well in excess of rural risks

Fewer Rural Poor, More Urban

\$1 a Day Measure



Little Progress in Reducing Urban Percentage Poor



The Urban Health System

Distinctive Features

- Risks from spatial concentration of population.
- Urban system is much more monetized than rural—those who lack cash are excluded
- Private sector far more important
- Do not assume that urban health services (public or private) are of minimally acceptable quality.
- Larger versus smaller cities—di erences in managerial, technical abilities; health personnel; revenue-raising.

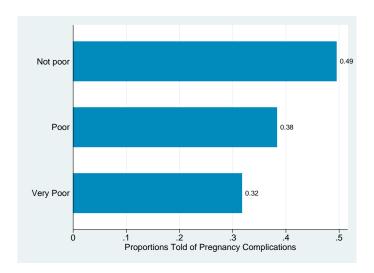
The Evidence Base

A small sample of results from the Demographic and Health Surveys program. Over 160 surveys now available. Only a selected few will be shown today.

- Urban households ranked relative to other urban households;
 rural households ranked relative to other rural.
- "Very poor" households are lowest 10 percent of households;
 "Poor" range from 11–25 percent; "Near-Poor" from 26–50 percent; and "Other" are the remaining households in the 51–100 percentile range.

Quality of Care: Prenatal Visits in Urban India

Told of Complications



Prenatal Care in Urban Philippines

Told of Complications and Where to Go



Quality of Health Care in Delhi

Studies by Das and Hammer in 2007

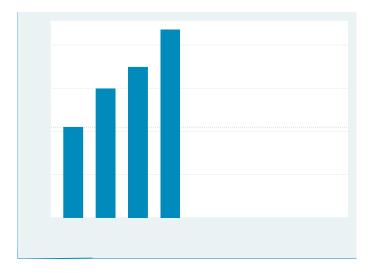
"Money for Nothing"?

- Public and private providers plentiful, readily accessible
- But both score poorly on clinical knowledge (vignettes)
- When observed with patients, they score even lower.

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Attendance at Childbirth: Urban and Rural India

Trained Nurse-Midwife or Physician Present

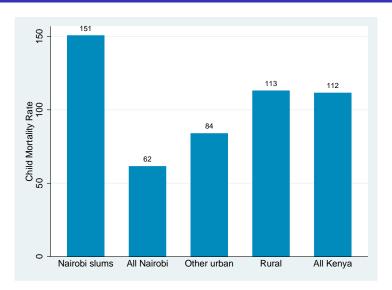


Children's Malnutrition: Urban and Rural India

Percent Stunted—Much Too Short for Age

Child Mortality in Nairobi's Slums

African Population and Health Research Center



What Urban Health Issuesoked?

Women's Mental Health

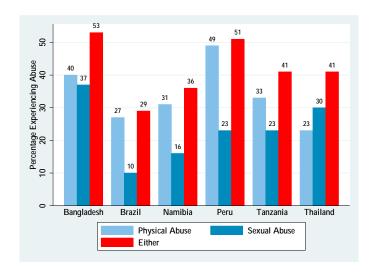
What Aspects?

Focus on depression, anxiety, fearfulness—common mental illnesses

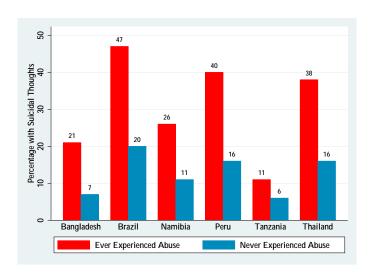
Why?

- Women (in study after study) are more a icted by anxieties, stress, and depression than men.
- Women bear the burden of safe-guarding the health of their families
- Women also sustain much community organizational life
- For poor women, mental ill-health saps sense of self-confidence needed to seek out health care for themselves and their families.

Contributing Factor: Intimate-Partner Violence WHO (2005)



Thoughts of Suicide, by Experience of Violence



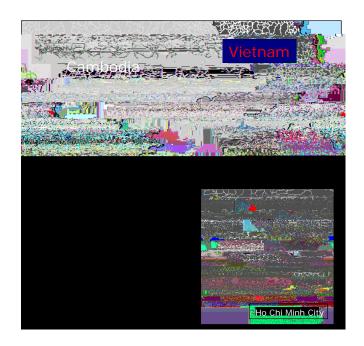


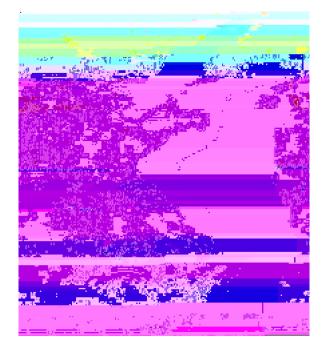
Upcoming Risks from Climate Change

Research by Satterthwaite, Huq, McGranahan, others

Which Risks?

- More frequent extreme-weather events (e.g., hurricanes)
- Storm surges, flooding
- Heat waves
- Eventually, sea-level rise





The Urban Adaptation Agenda