URBAN REPRODUCTIVE HEALTH PRE-CONFERENCE MEETING

Gates Institute and IUSSP - Kigale

11-12, November 2018

Transforming Cities and Saving Lives: Making the Case for Urban Reproductive Health

SITUATING THE CONTEMPORARY URBAN MOMENT AND ITS IMPLICTIONS FOR REPRODUCTIVE HEALTH: SUSAN PARNELL, KIGALE, 2018

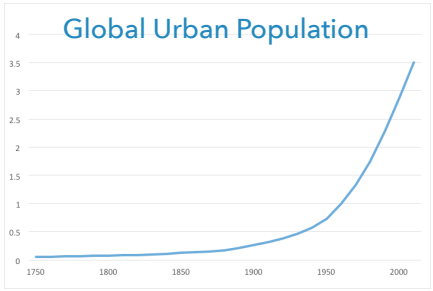
CONFLUENCE, IF NOT CONSENSUS, ON THE PRIMACY OF CITIES IN AN AGE OF GLOBALISATION & PLANETARY CONSTRAINT

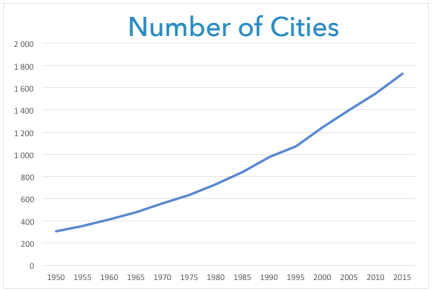
* Demographic shift (urban age) where the > in urbanization is driven by URBAN population growth

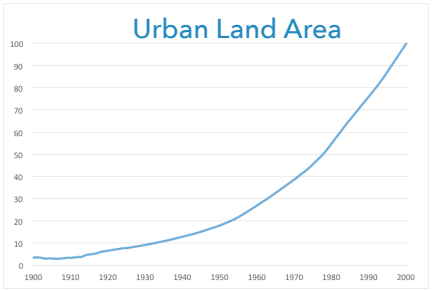
- **Spatial dynamics of development (concentration)**
- **Material and design lock-in of the built form and regulation**
- **Challenges to Westphalian system of governance (devolution)**
- **Modernity vs tradition – debates now urban**
- **Technological revolution (cars vs renewables, smart cities, personalized health data etc.)**
- **HEALTH**, conflict & risk – now urban

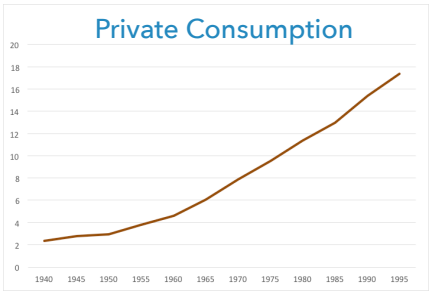
SHIFT FROM MAJORITY URBAN TO PREDOMINANTLY URBAN WORLD: WITH CRITICAL 2 DECADES AHEAD

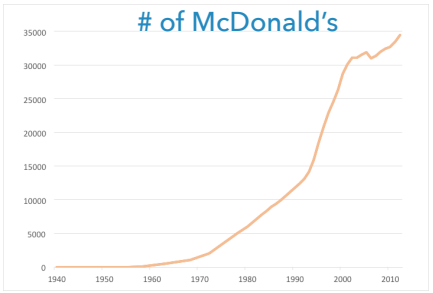
THE GREAT URBAN ACCELERATION

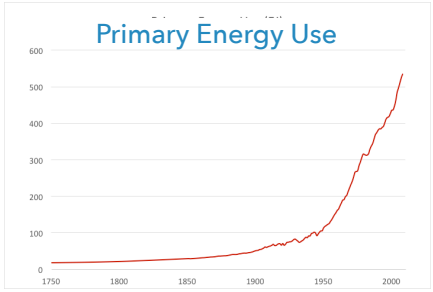


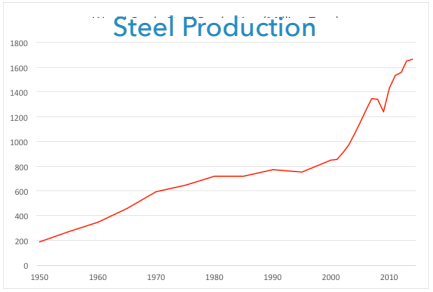


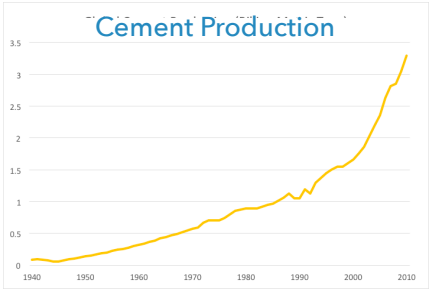






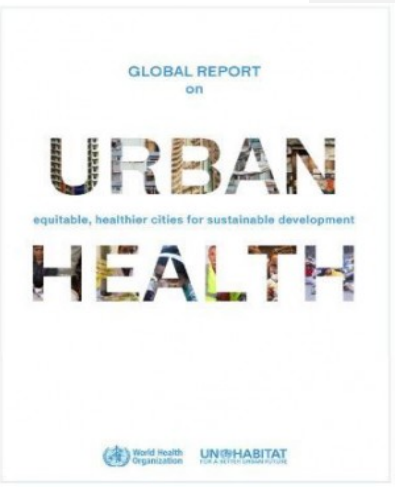




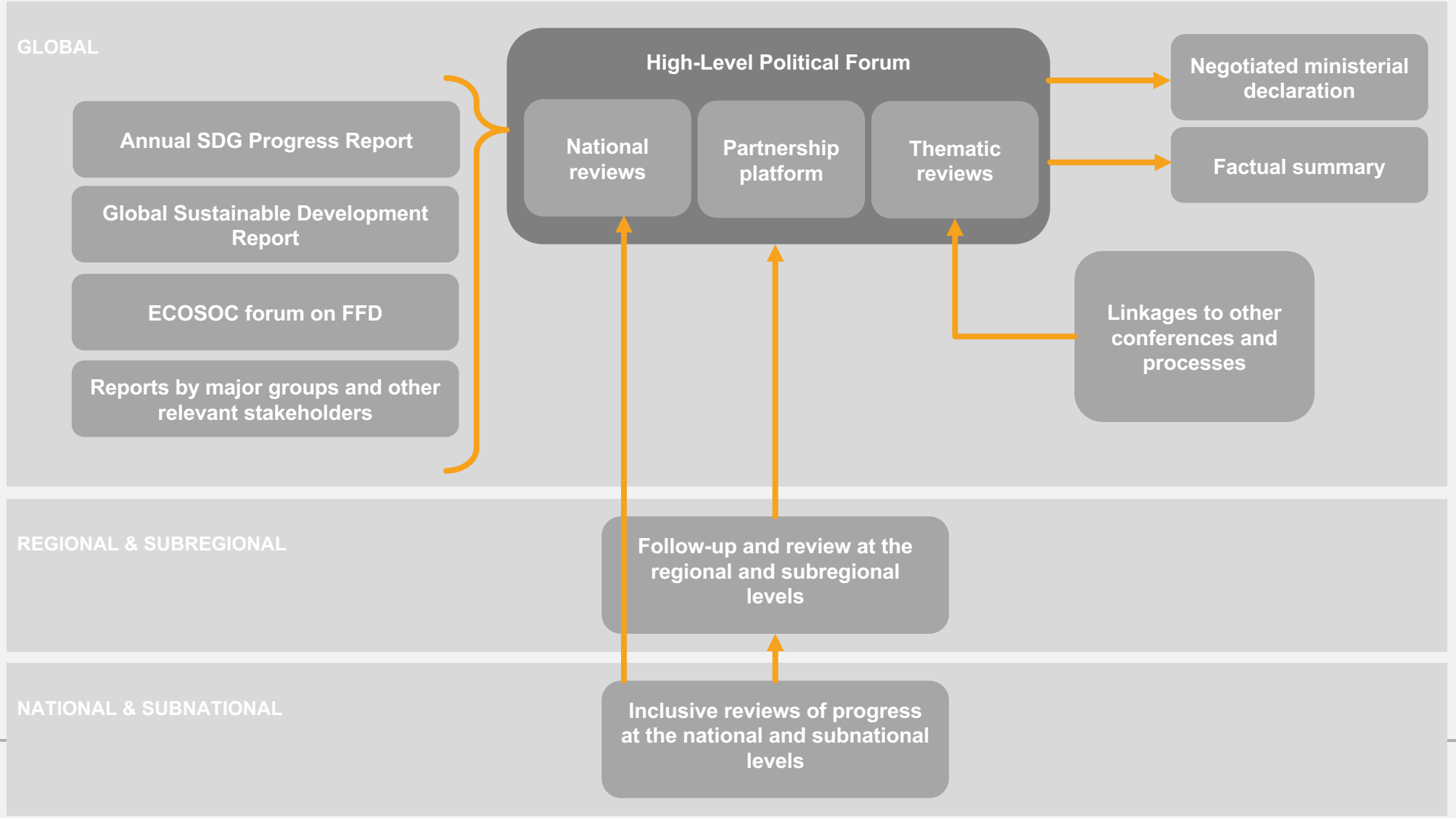


McPhearson et al. *Nature*, 2016

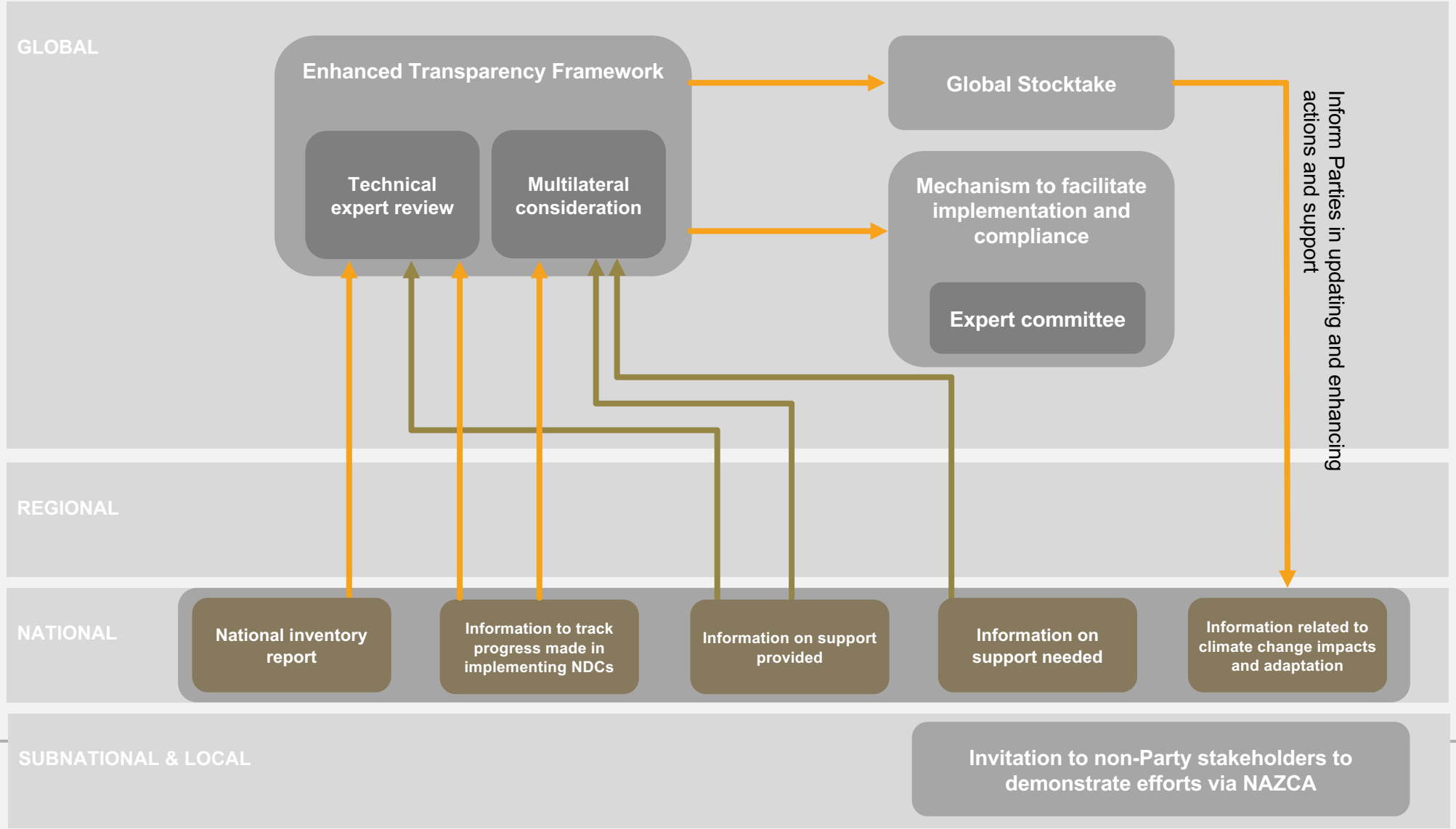
CITIES ARE INCREASINGLY CENTRAL TO THE GLOBAL POLICY AGENDA – BUT MISSING A STRONG HEALTH FOCUS (WORDCLOUDS FROM IPCC AND CBO)



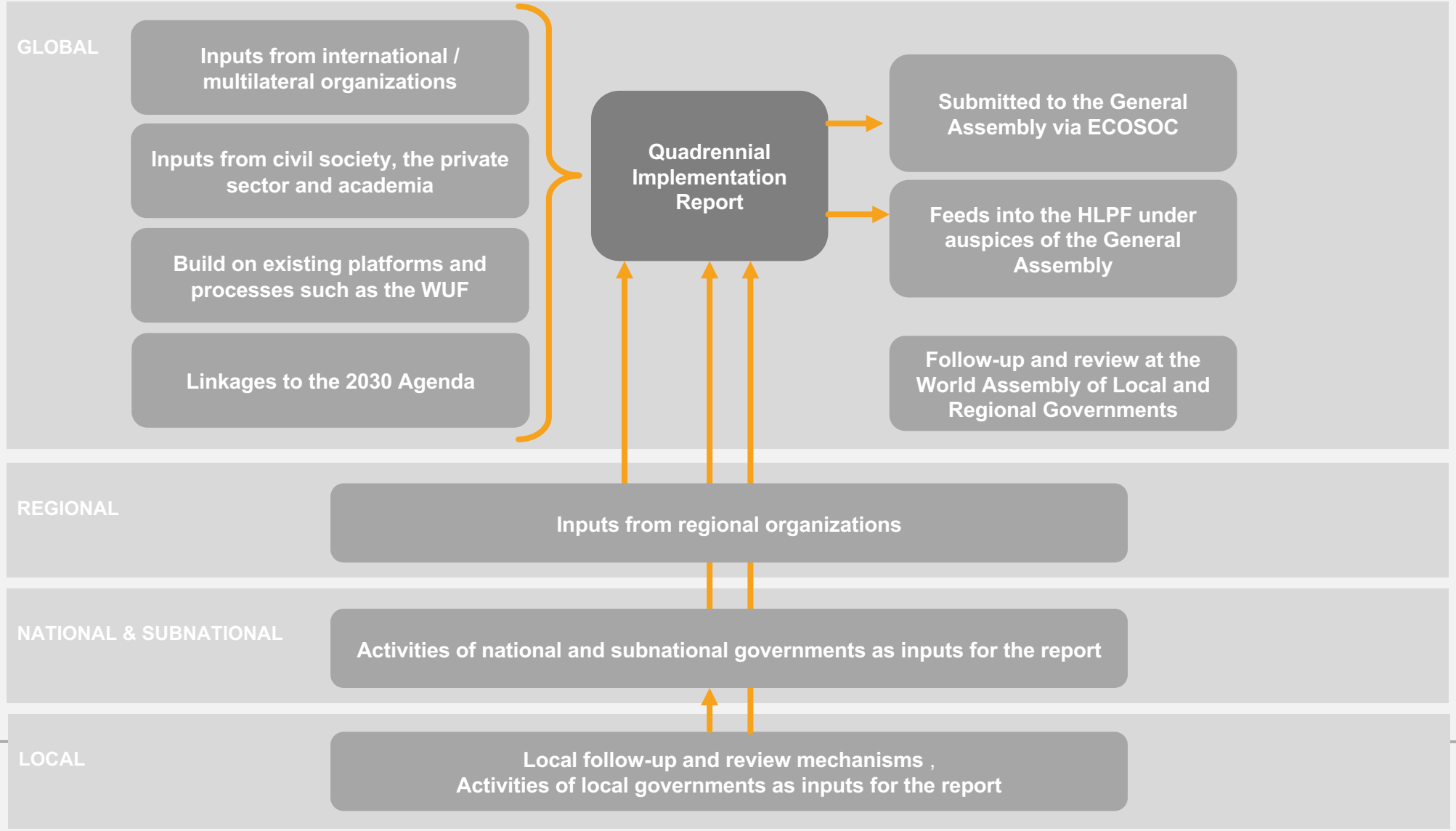
2030 AGENDA


GLOBAL
Annual SDG Progress Report
Global Sustainable Development Report
ECOSOC forum on FFD
Reports by major groups and other relevant stakeholders
High-Level Political Forum
National reviews
Partnership platform
Thematic reviews
Negotiated ministerial declaration
Factual summary
Linkages to other conferences and processes
REGIONAL & SUBREGIONAL
Follow-up and review at the regional and subregional levels
NATIONAL & SUBNATIONAL
Inclusive reviews of progress at the national and subnational levels

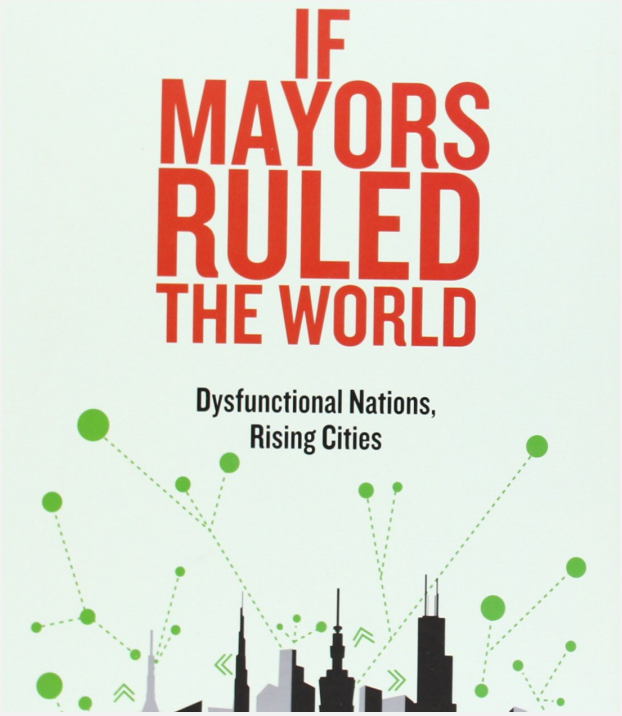
PARIS AGREEMENT



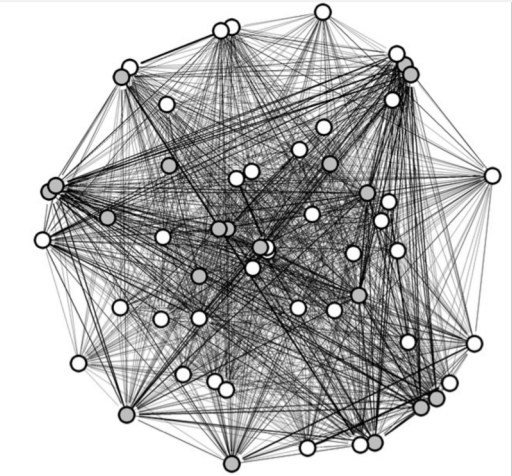
NEW URBAN AGENDA



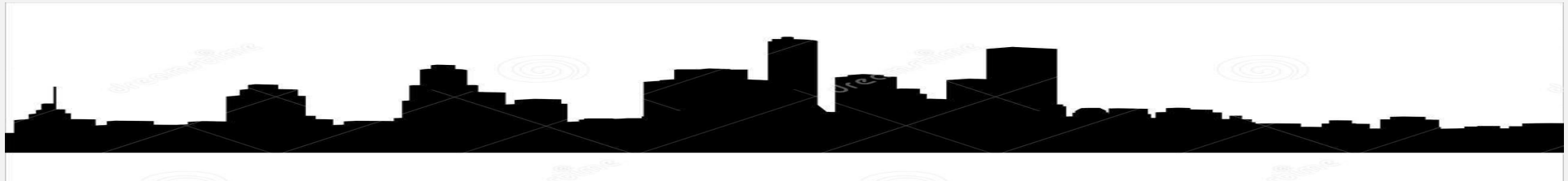
TO HAVE ANY SPECIAL ISSUE (E.G. REPRODUCTIVE HEALTH) IN THE COMPETING AND COMPLEX ASPIRATIONS OF THE 2030 URBAN AGENDA, NEW INSTITUTIONAL ARCHITECTURES OF MULTI-LEVEL (FUSION/HYBRID) AND CROSS SECTORAL GOVERNANCE ARE KEY – **HEALTH POLICY HAS TO CHANGE TO BE RELEVANT**



GIVEN URBANIZATION, 2030 MULTILEVEL HYBRID GOVERNANCE MUST DEAL WITH THE MULTIPLE DIMENSIONS OF COMPLEXITY & INCOMMENSURABILITY THAT CITIES PRODUCE



- Multiple interests (states, residents, business, professions, land owners etc.)
- Conflicting temporal imperatives (generations; political, fiscal and infrastructure cycles etc.)
- Complex interacting elements (nitrogen, carbon, pathogens, religion etc.)
- Competing sectors (water, schooling, risk, health etc.)



THE NEXUS OF REPRODUCTIVE HEATLH AND CITIES

- Cities as **sites** of improved reproductive health
  - As an increasing percentage the population now live in cities effective services must be designed to work for urban realities
    - **WORK WITH LOCAL PARTNERS TO MAKE REPRODUCTIVE HEALTH SERVICE PROVISION CITY SENSITIVE (opening housrs, safety, access etc)**

- Cities as **hubs** of improved reproductive health
  - City prosperity is key to national prosperity and reproductive health contributes directly to labour market and productivity improvement & Improved wellbeing of urban residents, especially when the population is young as in the global south
    - **WORK WITH NATIONAL GOVERNMENTS (NUPs?) TO MAKE THE HEALTH ARGUMENTS to create the kind of cites that enhance reproductive health via spending on mobility, density, cross subsidization etc.**

- Cities as **drivers** of improved reproductive health
  - Urbanisation is associated with a long term decline in fertility
  - Containing population is part (with reduced consumption) of long term global ecological sustainability
  - Gender equity is key to long term social sustainability
    - **WORK WITH ALL STAKEHOLDERS not only on population policy or human rights but also to ensure that there is no anti urban bias**

THIS IS THE TIME FOR A RADICAL (RE)FRAMING OF THE URBAN DETERMINANTS OF HEALTH

2030 is a new normative agenda that could put health at the core of SD in a predominantly urban world - health as a flagship global urban priority?

- ✓ Shaping how capacity & resources are targeted at urban SD & health related activities implies **operational change – translational research is imperative**
- ✓ SDG 11+ enhancing urban health interventions demand political legibility & administrative accountability – the politics and design of urban health systems suggests **mixed methods not just more open-system 'urban epidemiology' or chemistry**
- ✓ Comparing, linking & aggregating improved urban health outcomes in human settlements across scales – **summative and strategic trends based on new types of global urban health data and data science innovation**
- ✓ We cannot analyze or prioritize responses to what we don't know about SD and urban health **- the geographical reorientation of urban enquiry is at the frontier of knowledge innovation about complex systems, SD & healthy cities**

BARRIERS/OPPERTUNITIES

- No obvious existing platforms for global urban science policy engagement
- Multiple follow up and review processes for 2030
- Diffused responsibility with no strong UN champion & divided key agencies
- Urban (health) depends on multiple actors and organizational scales – esp the local that has weak global representation
- Weak urban health science/evidence, with major analytical & geographical gaps – esp in global south
- Inadequate visible & credible urban health leadership in the health and in the urban sectors

RECOMMENDATION: **STRENGTHEN RESEARCH CAPACITY ON REPRODUCTIVE HEALTH TO LINK TO THE 2030 URBAN AGENDA**

- Focus research funding on links between reproductive health & urbanisation.
- Focus on areas where rapid urbanisation and reproductive health problems will be greatest & where research capacity is least developed.
- Build scientific leadership that can synthesize existing urban knowledge & define gaps
  - Locally (in partnership with local government)
  - Nationally (use specialists for National Urban Policies)
  - Globally (composite and comparative research - big lessons)