

Teachers Training Workshop

Belgrade, June 16-17, 2022



OBJECTIVES AND METHODOLOGIES





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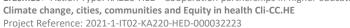








OUTLINE >>>> DOCUMENTS FROM INTERNATIONAL SCENARIO











Action for Equity in Europe Statement of the WHO European Healthy Cities Network in Phase III WHO Regional Office for Europe, 2000

WHO Framework Convention on Tobacco Control WHO, 2003

PREVIOUS COMMITMENT **DOCUMENTS**

Belfast Declaration for Healthy Cities: The Power of Local Action WHO Regional Office for Europe, 2003

Designing Healthier and Safer Cities: The Challenge of Healthy Urban Planning Statement of the WHO European Healthy Cities Network and European National Healthy Cities Networks

WHO Regional Office for Europe, 2005

Health for All: the policy framework for the WHO European Region – 2005 update WHO Regional Office for Europe, 2005

European Charter on Counteracting Obesity WHO Regional Office for Europe, 2006



Gaining health: the European Strategy for the Prevention and Control of NCD

WHO Regional Office for Europe, 2006

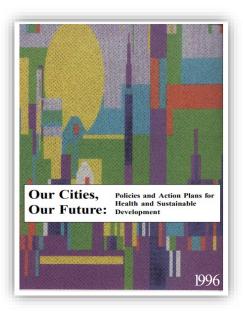
NCD=Noncommunicable Diseases





Organization Europe OUTLINE





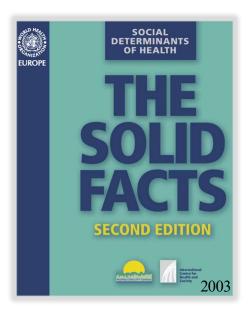
AIM Policies and action plans for health and sustainable development

Examples of innovative policy making and action are mainly drawn from cities belonging to the WHO Healthy Cities project and the Ecological Cities Programme of Organisation for Economic Co-operation and Development (OECD).



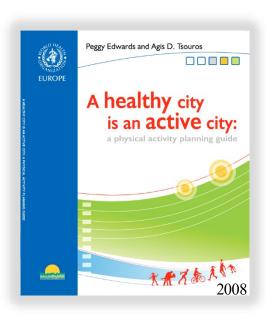
AIM To addresses the social, economic, health and environmental state of Europe's cities and towns and outlines the concerns for future development

The first document in a series on sustainable development and health produced by the WHO Healthy Cities project within the framework of the European Sustainable Cities & Towns Campaign.



AIM To develop tools and resource materials in the areas of health policy, integrated planning for health and sustainable development, urban planning, governance and social support.

Publication of the Centre for Urban Health, responsible for the Health Cities and Urban governance programme.



AIM to create a plan for physical activity, active living and sport in their city or community.

Describes how the approach relates to the Healthy Cities movement, why people need active living opportunities and who to involve; how to create, implement and evaluate the plan; what tools, good examples and other sources to use.

















PREVIOUS COMMITMENT DOCUMENTS





INTERNATIONAL GUIDELINES ON URBAN AND TERRITORIAL PLANNING

2015

A framework for improving global policies, plans, designs and implementation processes, which will lead to more compact, socially inclusive, better integrated and connected cities and territories that foster sustainable urban development and are resilient to climate change.

THE GOALS

To develop a universally applicable reference framework to guide urban policy reforms;

- ■To capture universal principles from national and local experience that could support the development of diverse planning approaches adapted to different contexts and scales;
- To complement and link to other international guidelines aimed at fostering sustainable urban development;
- To raise the urban and territorial dimensions of the development agendas of national, regional and local governments.



URBAN AND TERRITORIAL PLANNING

Apowerful instrument for reshaping the forms and functions of cities and regions in order to generate endogenous economic growth, prosperity and employment, while addressing the needs of the most vulnerable, marginalized or underserved groups.





International Guidelines on Urban and Territorial Planning, 2015

Promote key
urban and
territorial
planning
principles.

recommendations
that can assist all
countries and
cities to
effectively guide
urban
demographic

Promote

changes (growth,

stagnation or

decline).

Improve the quality of life in existing and new urban settlements.

Co-funded by the Erasmus+ Programme of the European Union

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Erasmus+ Action Type: KA220-HED - Cooperation partnerships in higher education Climate change, cities, communities and Equity in health Cli-CC.HE
Project Reference: 2021-1-IT02-KA220-HED-000032223

At supranational and transboundary level

 Could help direct investiment to address global issues such as climate change and energy efficiency.

At national level

• To support structure and balance system of town and cities.

At city-region and metropolitan level

 To strengthten adaptation to climate change impacts addressing social and spatial disparities.

At city and municipal level

• Land-use clould contribute to the protection of environmentally sensitive areas.

At neighbourhood level

Participatory planning could contribute to improved spatial integration and connectivity, human security and resilience.

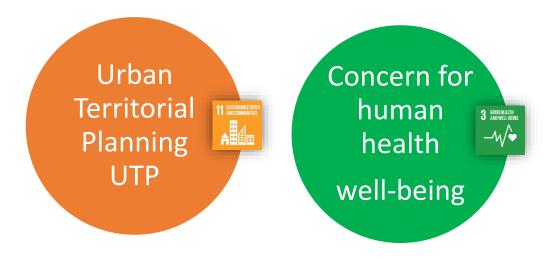
INTERNATIONAL GUIDELINES ON
URBAN AND TERRITORIAL
PLANNING, 2015

MEDICAL

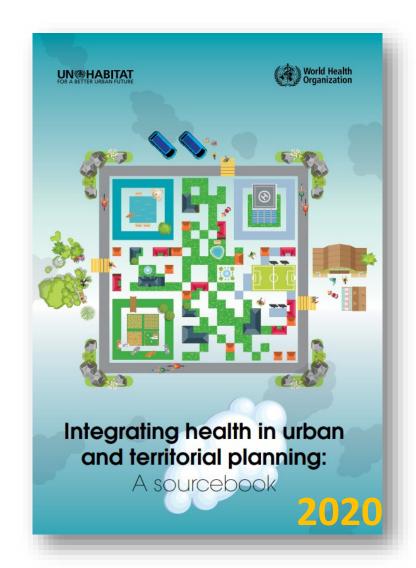


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Two vital elements needed to build habitable CITIES on a habitable PLANET



IG-UTP ADVOCATE FOR URBAN AND TERRITORIAL PLANNING
AS AN INTEGRATED AND PARTICIPATORY
DECISION-MAKING PROCESS TO PLAN AND MANAGE OUR
CITIES AND TERRITORIES IN A HOLISTIC MANNER



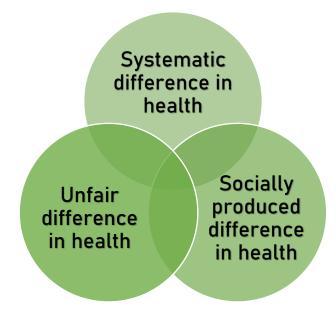








Spatial Factor INEQUITY IN HEALTH





Ms Maimunah Mohd Sharif Executive Director UN-Habitat



Dr Tedros Adhanom GhebreyesusDirector-General
World Health Organization

he way we plan and build our cities defines our **quality of life.** affects not only the quality of our living spaces and transport, but also the air we breathe, the water we drink, and our access to nutritious food, education, health care services and employment.

INTEGRATING HEALTH IN URBAN AND TERRITORIAL PLANNING: A SOURCEBOOK.2020





How spatial factors impact on HEALTH ANDHEALTH

SPATIAL FACTORS Resources Land use Urban form and design Transport and movement networks Green, blue and public open space

URBAN AND

TERRITORIAL

PLANNING

PUBLIC HEALTH Protect from harm Air pollution, noise disturbance and exposure to risk Promote health Everyday physical activity, food access and inclusion Provide services Accessible nearby facilities and amenities

PHYSICAL HEALTH

MENTAL HEALTH

HEALTH EQUITY

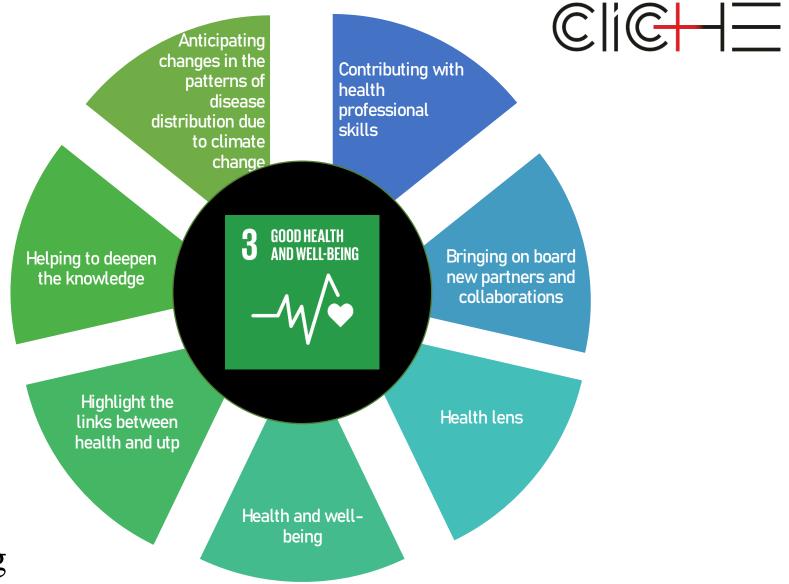
How can

HEALTH

unlock



new opportunities for Urban and Territorial Planning



INTEGRATING HEALTH IN URBAN AND TERRITORIAL PLANNING: A SOURCEBOOK, 2020



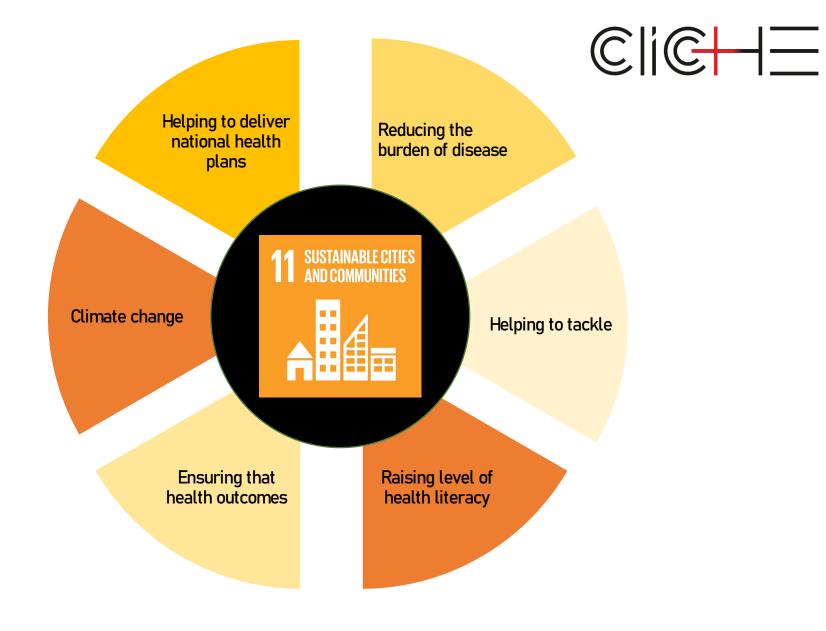
How can

URBAN AND TERRITORIAL PLANNING

contribute



HEALTH



INTEGRATING HEALTH IN URBAN AND TERRITORIAL PLANNING: A SOURCEBOOK, 2020



1. Planning more compact places



FOSTERING SUSTAINABLE URBAN AND

TERRITORIAL

PLANNING

5. Institutionally integrated planning

2. Planning more socially inclusive

5 QUALIFIERS

4. Planning places that are more resilient to climate change and natural disasters

3. Planning better connected places

INTEGRATING HEALTH IN URBAN AND TERRITORIAL PLANNING: A SOURCEBOOK, 2020



Sustainable Development Goals and ENVIRONMENT-HEALTH Links







- Health is threaded throughout the 17 SDGs, and not restricted to SDG3 (*health and well-being*).
- Non-communicable diseases threaten the resiliency and sustainability of cities.
- The strong reciprocal links that exist between UIP and health protection and supporting health promotion also provide a basis whereby many of the targets in SDG 11 (sustainable cities and communities) support population health.

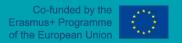
KEY POINTS







SUGGESTED OBJECTIVES







SUGGESTED OBJECTIVES



Identify / map the areas at greatest risk in terms of exposure to Urban Health Impact (UHI), urban/demographic and socio-health factors.



Altitude

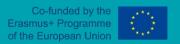
Urbanization

Vegetation

Population

High traffic roads

Deprivation index

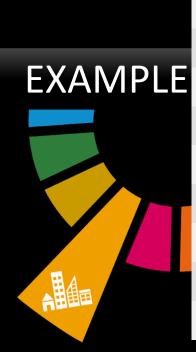






SUGGESTED OBJECTIVES

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Territorial characteristics: land use

Surface (Km²)

City center altitude (m)

% surface area with high population density

% surface area with low population density

% surface for industrial use

% area for agricultural use

% area with urban green

Public green per capita (m²)

% surface with dense vegetation (NDVI)

Population density per km²







SUGGESTED OBJECTIVES

Identify / map the areas at greatest risk in terms of exposure to Urban Health Impact (UHI), urban/demographic and socio-health factors.

Distribution of the population by vegetation level

NDM: mean (SD)

Population (%)

1. Open soil (0.1-0.2)

2. Sparse vegation (0.2-0.4)

3. Moderate vegetation (0.4-0.6)

4. Dense vegetation (0.6-0.8)

missing





OUTLINE

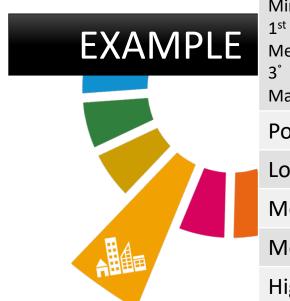
Project Reference: 2021-1-IT02-KA220-HED-000032223



SUGGESTED OBJECTIVES

Identify / map the areas at greatest risk in terms of exposure to Urban Health Impact (UHI), urban/demographic and socio-health factors.

Distribution of the population by summer temperature (May-September) of average temperatures °C Min



Mean

Max

Population (%)

Low (1st qnt)

Medium low

Medium high

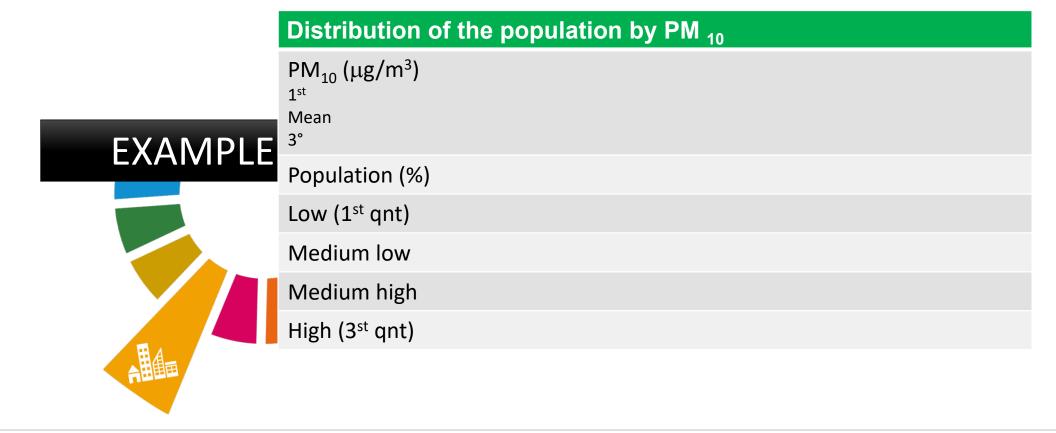
High (3st qnt)





SUGGESTED OBJECTIVES

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SUGGESTED OBJECTIVES

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DEPRIVATION INDICATORS

 X_1 :% of population aged 13-60 with an education equal to or lower than primary school

 X_2 :% of the active population unemployed or seeking their first iob

 X_3 :% of households with rented dwellings

 X_i :% of single-parent families with dependent children <18 years living together

 X_5 : population density



The index is a continuous variable and represents the deviation from the municipal mean, reduced, of the deprivation indicators (x)

Deprivation index Population (%) 1. Low level 5. High Level missing

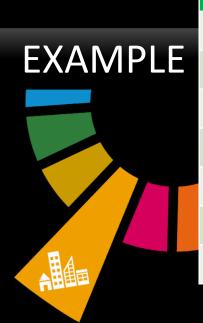






SUGGESTED OBJECTIVES

Identify / map the areas at greatest risk in terms of exposure to Urban Health Impact (UHI), urban/demographic and socio-health factors.



Description of some morphological characteristics

Resident population

Altitude

% area with high population density

High speed roads density

Density other roads

Railway density

% public green area

% with the presence of water





Report on the quality of life in European cities, 2020

European Commission, Directorate for Regional and Urban Policy
October 2020



Main Questionnaire

Q1. [PROG: SINGLE RESPONSE GRID]

Generally speaking, please tell me if you are very satisfied, rather satisfied, rather unsatisfied or very unsatisfied with each of the following issues in your city or area.

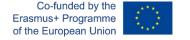
Rows [PROG: Randomise items 1-10]

- Public transport, for example the bus, tram or metro.
- Health care services, doctors and hospitals.
- Sport facilities such as sport fields and indoor sports halls.
- 4. Cultural facilities such as concert halls, theatres, museums and libraries.
- 5. Green spaces such as parks and gardens.
- 6. Public spaces such as markets, squares, pedestrian areas.
- 7. Schools and other educational facilities.
- 8. The quality of the air.
- 9. The noise level.
- 10. Cleanliness.

Columns

- 4. Very satisfied
- 3. Rather satisfied
- 2. Rather unsatisfied
- 1. Very unsatisfied
- 99. Don't know/No Answer/Refuses (DO NOT READ OUT)

https://ec.europa.eu/regional_policy/en/information/maps/quality_of_life





CIICHI

SUGGESTED OBJECTIVES



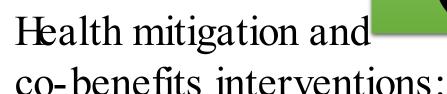
Identification of UHI mitigation interventions in urban areas / "win-win" strategies with greater co-benefits in terms of health.





Construction of the three-dimensional model ENVI-met.





GHG Mitigation Actions

Manifacturing &industry

Construction & Buildings

Transportation & Energy

Water

Waste

Exposure Health Pathways Air

Green Space Urban Heat Island Physical Activity



conceptual framework

Exposure Response Functions

Health Benefits

Cardiovascular Disease All-cause Mortality Mental Health Oucomes

Reproductive Health Outcomes Respiratory Disease





- Socioeconomic disadvantage (deprivation index) is a determinant of health outcomes.
- The variability of the deprivation index in the city tends to assume geographical patterns.
- Some indicators of soil characteristics and anthropization bring out signals potentially correlated with the deprivation index.







OUTLINE

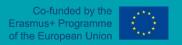


DOCUMENTS FROM INTERNATIONAL SCENARIO

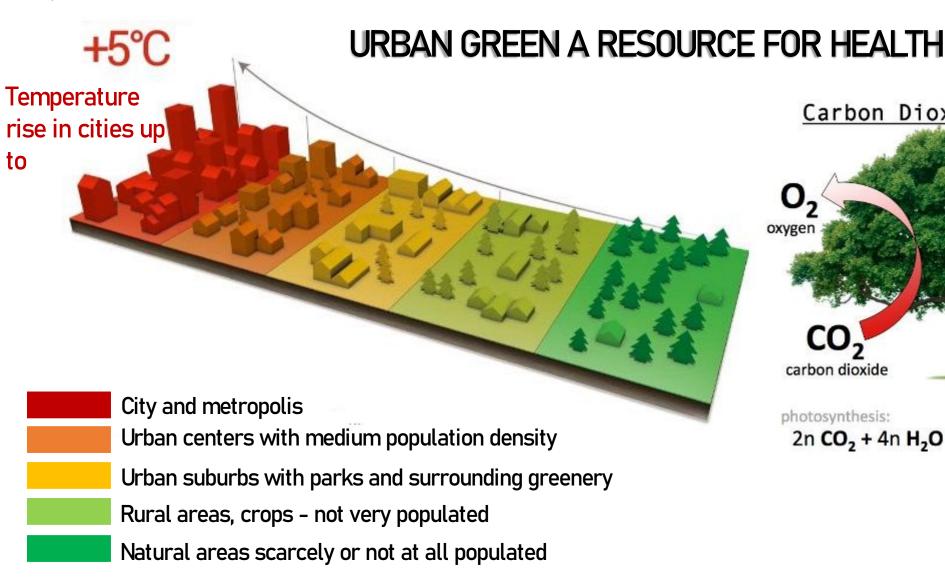


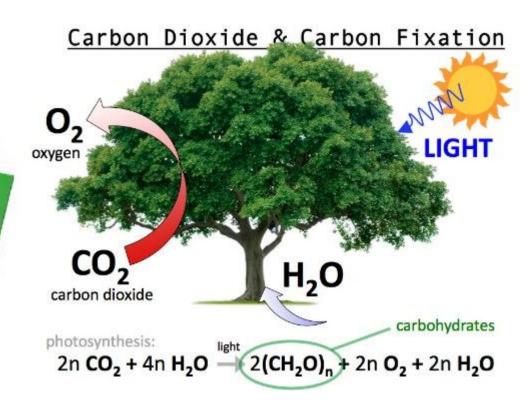


HEALTH MITIGATION INTERVENTION









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URBAN GREEN ARESOURCE FOR HEALTH







URBAN GREEN A RESOURCE FOR HEALTH

HEALTH MITIGATION INTERVENTIONS

Total and average annual reduction of deaths attributable to a temperature reduction of 1.3°C of the specific city average temperature in the period

Total and average annual reduction of deaths attributable to a temperature reduction of 2°C of the specific city average temperature in the period

Total and average annual reduction of deaths attributable to a temperature reduction of 1.3°C and 2°C of the specific city average temperature in the period





EXAMPLE

Selected area for NBS interventions

Selected area: examples of critical issues

- heavily built up area
- poor vegetative cover
- high prevalence of population65 years
- presence of pollutant production activities



- analysis of the actual state of the area using the ENVI-met microclimatic software
- survey of plant species present and selection of tree, shrub and herbaceous species to be included
- elaboration of different cooling scenarios
- simulation through ENVI-met of the scenes with quantification of the benefits (temperature, relative humidity, etc.)





EXAMPLE

Selected area for NBS interventions

Selected area: examples of critical issues

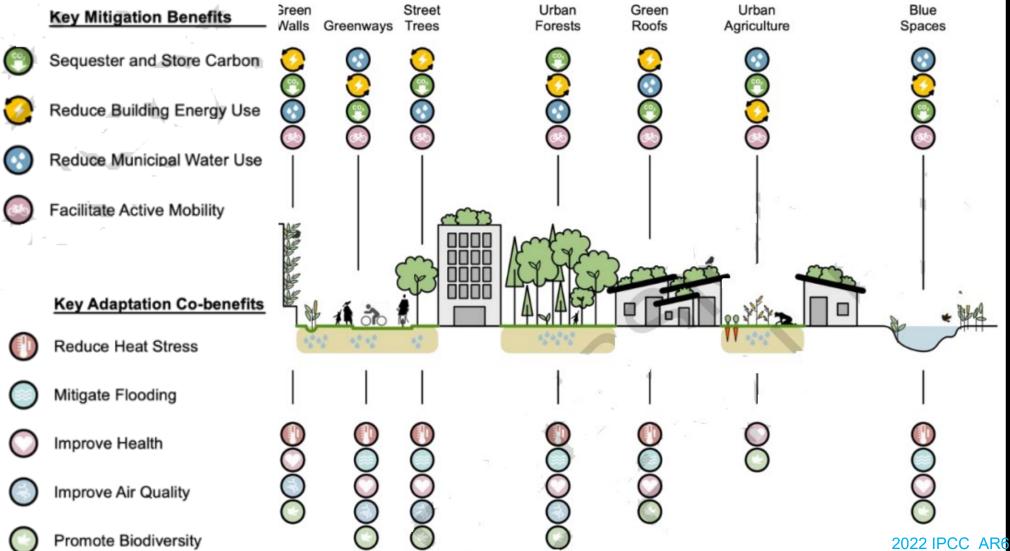
- heavily built up area;
- poor vegetative cover;
- high prevalence of population> 65 years;
- presence of pollutant production activities.

What to do: examples of activities

- analysis of the actual state of the area using the ENVI-met microclimatic software;
- survey of plant species present and selection of tree, shrub and herbaceous species to be included;
- elaboration of different cooling scenarios;
- simulation through ENVI-met of the scenes with quantification of the benefits (temperature, relative humidity, etc.).



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Potential integration of various green and blue infrastructure strategies within an urban system

2022 IPCC_AR6_WGIII_FinalDraft_Chapter08.pdf





<u>Urban forests</u> and <u>street trees</u> provide the greatest mitigation benefit because of their ability to sequester and store carbon while simultaneously reducing building energy demand.

	Urban Green and Blue Infrastructure	Mitigation Benefits	Adaptation Co-benefits	SDG Linkages
Urban Forests				2 MANUEL STATES 8 MORTH WORK AND ADMINISTRATION OF THE PROPERTY OF THE PROPER
Street Trees				3 GOLD HALTS 8 BOOM FORM AND 9 MINISTRANSPORT 11 BECOMMENT OFFE 13 START 15 START 15 START 15 START 15 START 16 START 17 START 18 START 18 START 19 MINISTRANSPORT 10 MINISTRANSPORT 10 MINISTRANSPORT 11 START 12 START 13 START 15 START 15 START 16 START 17 START 18 START 18 START 18 START 19 MINISTRANSPORT 10 MINISTRANSPORT 10 MINISTRANSPORT 10 MINISTRANSPORT 11 START 12 START 13 START 15 START 16 START 17 START 18 ST

2022 IPCC_AR6_WGIII_FinalDraft_Chapter08.pdf





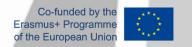


The assessments of mitigation benefits are dependent on context, scale, and spatial arrangement of each green infrastructure type and their proximity to buildings.



Local implementations of urban green infrastructure can pursue toward inclusive sustainable urban planning (SDG 11.3) and the provision of safe, inclusive and accessible green and public spaces for all.







OUTLINE



DOCUMENTS FROM INTERNATIONAL SCENARIO



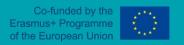
SUGGESTED OBJECTIVES



HEALTH MITIGATION INTERVENTION



CONCLUSIONS





CONCLUSIONS



The importance of urban green infrastructure for reducing the total warming in urban areas due to its local cooling effect on temperature and its benefits for climate adaptation.



Urban green infrastructure involves the protection, sustainable management, and restoration of natural or modified ecosystems while simultaneously providing benefits for human well-being and biodiversity.











Thanks for your attention stefania.lagrutta@ift.cnr.it



