

Healthy Cities, Healthy People A Common Position and Commitment to Action

Preamble

Belize City, Belize

Endorsers:

Roseau, Dominica

Manzini, Eswatini

Siteki, Eswatini

Adenta, Ghana

Lethem, Guyana

Kerala Institute of Local Administration, India

Kochi, India

Teinainano Urban Council, Kiribati

Windhoek, Namibia

Toba Tek Singh, Pakistan

Freetown, Sierra Leone

Port Loko City, Sierra Leone

Ministry of Local Government, Solomon Islands

Couva Tabaquite Talparo, Trinidad and Tobago The rapidly growing cities and towns of the Commonwealth are key drivers of economic growth and prosperity, but need to be healthy and safe in order to thrive.

The COVID-19 pandemic has highlighted the vulnerability of our urban communities, particularly those lacking adequate sanitation, water, housing, waste management, planning and transport infrastructure. Lack of access to basic services will continue to have a significant impact on our resilience to COVID-19 and other communicable diseases including future pandemics, which are highly likely to occur.

Over 600 million people in urban/peri-urban areas globally still lack access to clean running water and soap to wash their hands. The situation for urban sanitation is even worse. This is unacceptable in the 21st Century and a major cause of disease. An estimated 1.6 billion people do not have access to adequate housing with the greatest demand being in cities. Many of these people also depend on informal food markets and transport hubs that can be infectious disease hotspots.

The pandemic could provide the impetus for a new wave of cooperation and investment to make our cities and towns healthy and prosperous places to live. However, COVID-19 could also precipitate a major resurgence of other diseases including malaria, dengue, tuberculosis, soil transmitted helminths, rabies, schistosomiasis, and scabies in urban areas, due to disruption to supply chains and prevention activities. It already threatens to reverse progress towards the SDGs.

We have a Common Position...

We, the mayors and local government leaders of the Commonwealth, are at the frontline of the COVID-19 response. We have played a vital role in public communication, ensuring basic services, and responding to the crisis with targeted support to protect vulnerable communities. We have learned a lot about the importance of local and community-anchored approaches in controlling the pandemic.

We commit to play our part in preventive disease control through better planning and development of urban environments and we are the best actors to catalyse multi-sectoral and community-based efforts.

However local government is often poorly resourced; with ill-defined or contested responsibilities, set out in legislation that does not truly empower us to respond effectively to the needs of citizens; as leaders, we are ready to play a stronger role in



Point Fortin, Trinidad and Tobago

San Fernando, Trinidad and Tobago

Manchester, UK

Lusaka, Zambia

Supporting Organisations:

International Organisations:

Caribbean Development Bank

European Bank for Reconstruction and Development

UN Habitat

World Health Organization

Networks:

BOVA Network

Commonwealth Local Government Forum

Geneva Cities Hub

RBM Partnership to End Malaria

Stop TB

Uniting to Combat NTDs

Academic Organisations: global and national development debates and decision-making to ensure we leave noone and no place behind.

We are aware that there are many existing city-based networks who have already mobilized support, across a variety of sectors. We would aim to learn from their collective knowledge rather than to establish another network.

We need our national governments and global partners to work with us as partners in delivering a healthy and sustainable future for us all. We have the ability to generate truly multi-sectoral solutions to health challenges at the local level.

We need to put devolution into practice and build self-reliance, where cities are empowered with timely intergovernmental transfers and access to own revenue sources to enable the implementation of plans and policies. And we need to ensure that secondary cities and urban areas outside capitals and national financial centres are included in healthy cities strategies.

We have a shared Commitment to Action...

We seek the support of Commonwealth leaders and international partners to accelerate the healthy cities agenda and bring our own commitments to action, in a spirit of partnership.

We commit to accelerate the healthy cities agenda through a properly empowered and funded approach to urban development – emphasising housing, infrastructure development and maintenance, water and sanitation and environmentally safe waste disposal.

We commit to ensure engagement of community groups and leaders in defining the major public health challenges, identifying solutions and monitoring implementation results including for vector control, tuberculosis and NTDs. And, we will ensure women and young people are included in policy and decision-making.

We commit to sharing lessons, both successes and failures, across the entire partner network. Only through learning from each other can we build back better for all.

We commit to work with civil society organisations who provide an important bridge between local government and hard to reach communities alongside government, the private sector and other key stakeholders.

We invite other governments, international organisations, private sector, civil society and faith groups to support us and commit to:

Strengthen decentralised systems and local leadership to deliver targeted responses to local health challenges, and strengthen their capacity to deliver – administratively,



Centro de Investigação em Saúde de Manhiça, Mozambique (CISM)

Durham University

Ifakara Health Institute

Liverpool School of Tropical Medicine

London School of Hygiene and Tropical Medicine

Laboratory of Entomology, Wageningen University

Royal Danish Academy – Architecture, Design, Conservation

Technical University of Mombasa

University College London (Institute for Environmental Design and Engineering)

University of Malawi

Civil Society Organisations:

Catholic Relief Services politically and fiscally.

Support cities to plan for urban growth and renewal and invest in sustainable infrastructure which limits the opportunities for vector-borne diseases to spread and also prevents transmission of a range of other diseases, such as tuberculosis and Neglected Tropical Diseases.

Deliver water and holistic sanitation for all – a basic requirement for public health, including control of mosquito-borne diseases, as well as bacterial, parasitic and viral infections which can be mitigated through hand-washing (such as COVID-19) and consumption of clean water.

Plan for and provide adequate housing and reduction in the numbers of people living in informal settlements. Adequate housing is conducive to good health and physical and mental wellbeing. There is increasing evidence that improvements to housing may be protective against a number of important childhood infectious diseases, including tuberculosis and malaria.

Prevent vector-borne diseases and epidemics, thereby reducing the pressure of overcrowding on health systems.

Strengthen and reinforce local data collection systems to access community-based data, for use in decision and policy making.

Ensure top quality technical capacity and advice is available to cities and local government administrations.

Ensure city leadership and local governments continue to strengthen their voice in national and global development debate and decision making.

In conclusion, COVID-19 has put *prevention* of illness, especially in urban centres, at the forefront of national agendas. The vital role that we, as city leaders, have played in raising awareness of, and implementing, coronavirus control measures has made many of us highly visible. **We commit** to build on the new appreciation for local leadership to ensure city leaders are able to fulfill their role as key partners in addressing important health challenges, specifically vector-borne diseases, tuberculosis and Neglected Tropical Diseases.

With thanks to our founding partners:

