SRMUN Atlanta 2014
Revitalizing "An Agenda for Peace": Preventative Diplomacy,
Conflict Resolution, and the Making of Peace in Our Time Movement
November 20-22, 2014

Dear Delegates,

I welcome you to the United Nations Human Settlements Programme (UN-Habitat) committee and to the Southern Regional Model United Nations (SRMUN) Atlanta 2014 Conference. My name is Brittany Davis and I will serve as your director for the conference. I have been a part of SRMUN for a few years now and this will be my first time serving as Director. Our dais will also include my invaluable Assistant Director Samantha O'Brien. Sam has done a tremendous job and I am proud at her achievements over the course of the writing period. We have been working throughout the spring and summer to make this an excellent committee in terms of substance, by preparing this background guide with other subsequent materials. We hope that the issues found in this guide inspire you to have an amazing SRMUN experience.

UN-Habitat was mandated by the General Assembly as an organization that promotes socially and environmentally sustainable towns and cities with the goal of providing adequate shelter for all. Since its inception UN-Habitat has promoted programmes and initiatives that focus on the promotion of housing as well as rehabilitation. UN-Habitat's current Executive Director Dr. Joan Clos, elected in 2010, comes with a reputation that emphasizes relationship building as well as municipal management. It is this direction and spirit of Dr. Clos that we have decided to revisit challenges in need of these necessary components. The topics we have chosen for the delegates will also reflect the very necessity for such relationships and management approaches, which we anticipate to reflect in your work. Our topics for SRMUN Atlanta 2014 are:

I: Eradicating Urban Poverty through Health Policies
II: Rehabilitating Slum Settlements through Urban Development

Our committee touches upon the notion that lack of adequate health care policies in conjunction with outdated and inconsistent urban planning strategies inhibits the achievements of the Millennium Development Goals (MDG). UN-Habitat plays a crucial role in the alleviation of all MDGs, as their role and primary functions serve to provide a better standard of living for all humankind. We as a dais very much believe in this ethos and look forward to seeing how you all incorporate this while balancing the demands of individual Member States.

Every delegation must submit a position paper which addresses each of the topics listed above and only those listed above. These papers should adhere to SRMUN's guidelines on position paper format and style. The objective of the position paper is to concisely lay out your delegation's plan for approaching the topics, provide a brief insight into your Member State's history on the topic, its goals and actions desired to be taken. This will be the first work my Assistant Director and I will see from you; we expect that each delegation to have well developed and researched papers that will serve as the foundation for our discussions and debate. For specific details of formatting or if you need help in crafting a position paper, please visit the SRMUN website. **All position papers MUST be submitted by October 31st, 11:59pm EST via the on-line submission system at http://www.srmun.org.**

Sam and I are very excited about the possibilities that this committee has in crafting a more equitable world. We are also equally anxious to see your ideas, energy and research set into motion during our time in Atlanta. Should you have any questions about the topics, structure of the committee, or position paper, please do not hesitate to contact us. I am truly looking forward to a great conference and some incredible work out of what I am sure will be the best committee at SRMUN Atlanta 2014!

Brittany Davis   Samantha O'Brien   Stefanie Vaught
Director   Assistant Director   Deputy Director-General
unhabitat_atlanta@srmun.org   unhabitat_atlanta@srmun.org   ddg_atlanta@srmun.org

The History of the United Nations Human Settlements Programme

At the time of the United Nations Human Settlements Programme's (UN-HABITAT) inception, two-thirds of the world's population lived in rural areas.[1] Established during Habitat I in Vancouver, Canada, little focus on the promotion of sustainability coupled with ameliorating and preventing crisis that stem from urban growth, characterized the new organization tasked with a declaration to "promote socially and environmentally sustainable towns and cities along with the goal of providing adequate shelter for all."[2] As rural to urban migration increased, UN-Habitat shifted its focus and responsibility on urbanization problems. In 1996, this refocus was written in the *Habitat Agenda* and adopted by 171 Member States at Habitat II in Istanbul, Turkey.[3] The work of UN-HABITAT continues to grow in importance and with the Millennium Declaration, providing adequate shelter for urban citizens, preventing crime, disease, pollution and environmental degradation. The *Millennium Declaration* affirmed Member States' commitment to improving the lives of 100 million slum dwellers by the year 2020.[4]

The governing council of UN-Habitat is responsible for reviewing all partnerships and work to achieve its agenda meeting every 2 years to set UN-Habitat's policies, objectives and guidelines regarding existing and planned programmes of work in the field of human settlements. Other roles of the governing council include setting the biennial budget and overseeing working relations with partners by closely following the activities of the United Nations agencies and other international organization in the field of human settlements and proposing ways through which the overall human settlements policy objectives within the UN system might best be achieved. The governing council has identified six key focus areas to facilitate the necessary conditions for concerted international and national efforts to stabilize the growth of slums and to set the stage for the subsequent reduction in and reversal of the number of slum dwellers.[5] These key focus areas to recognize are (1) Effective advocacy, monitoring and partnerships,(2) Participatory planning, management and governance, 3) Access to land and housing for all, (4) Environmentally sound basic urban infrastructure,(5) Strengthened human settlements finance systems, and (6) Excellence in management; as a roadmap to sustainable urban areas.[6] As a result of the Rio+20 discussions in 2012 and the proposed Sustainable Development Goals (SDGs), the UN Secretary-General (SG) Ban Ki moon has tasked UN-HABITAT with leading a new Executive Committee on Sustainable Urbanization. World leaders are set to meet in 2016 at Habitat III to take a renewed look at UN-HABITAT's focus and function in the post-2015 development agenda.[7]

The work of UN-HABITAT has adjusted over time, according to how the landscape of cities and the world have changed. Currently, the primary goals of the body are to promote shelter for all, improve urban governance, reduce urban poverty, improve the living environment and manage disaster mitigation and post conflict rehabilitation among cities.[8] It runs two major worldwide campaigns, the *Global Campaign on Urban Governance* which aims to increase access to urban land, adopt enabling urban legislation and establish decentralized governance that foster equitable sustainable urban development including urban safety[9] and the *Global Campaign for Secure Tenure.* This campaign which aims to improve the conditions of people living and working in slum areas and informal settlements in major urban centres of the world by promoting security of their residential tenure and a direct contribution to the

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[1] "History, mandate and the role in the UN system." United Nations Human Settlements Programme.
   http://unhabitat.org/about-us/history-mandate-role-in-the-un-system/ (Accessed February 26, 2014).
[2] Ibid.
[3] Ibid.
[4] A/RES/55/2. *United Nations Millennium Declaration.* United Nations General Assembly. 8 September 2000.
[5] "World Urbanization Prospects, the 2011 Revision." United Nations Department of Economic and Social Affairs.
   http://esa.un.org/unup/CD-ROM/Urban-Rural-Population.htm (Accessed February 26, 2014).
[6] Ibid.
[7] "Post-2015 Agenda." United Nations Human Settlements Programme.
   http://unhabitat.org/urban-initiatives/post-2015-agenda/ (Accessed February 26,2014).
[8] "Operational Activities Report." United Nations Human Settlements Programme. http://hq.unhabitat.org/activities (Accessed
   February 26, 2014)
[9] "Urban Legislation, Land and Governance." United Nations Human Settlement Programme. http://unhabitat.org/expertise/1-
   %20urban-legislation-land-and-governance/ (Accessed February 26, 2014)

realization of the commitments of the Millennium Declaration[10].[11] UN-HABITAT also has joint programs with the World Bank to upgrade slum cities.[12]

Roughly seven percent of the UN-HABITAT budget is granted from the General Assembly, with the budget relying primarily on contributions from multilateral and bilateral partners such as Member State donations, Non-Governmental Organizations (NGOs), and International Governmental Organizations (IGOs) who partner in UN-HABITAT projects.[13] Each year funding is earmarked for specific trust funds that UN-HABITAT works with, such as The Special Human Settlements Programme for the Palestinian People.[14] In 2012, UN-HABITAT distributed its budget of $128.5 million between 220 programs in 60 countries including the expansions of the *Global Campaign on Urban Governance* and the *Global Campaign for Secure Tenure*.[15]

UN-HABITAT is governed by a Governing Council composed of 58 Member States reporting to the General Assembly through the Economic and Social Council (ECOSOC). The governments have representatives in Nairobi, where UN-HABITAT is headquartered. There are currently seven vacant seats on the Governing Council.[16]

The current members of the United Nations Human Settlements Programme are:

ALBANIA, ALGERIA, ANTIGUA AND BARBUDA, ARGENTINA, BAHRAIN, BANGLADESH, BENIN, BRAZIL, BURKINA FASO, CENTRAL AFRICAN REPUBLIC, CHILE, CHINA, COLOMBIA, CONGO, EL SALVADOR, FINLAND, FRANCE, GABON, GERMANY, GRENADA, HAITI, INDIA, INDONESIA, IRAN, ISRAEL, ITALY, JAPAN, JORDAN, LESOTHO, MADAGASCAR, MALI, MEXICO, MOROCCO, MOZAMBIQUE, NIGERIA, NORWAY, PAKISTAN, REPUBLIC OF KOREA, RUSSIAN FEDERATION, SAUDI ARABIA, SOMALIA, SOUTH AFRICA, SPAIN, SRI LANKA, SWEDEN, THAILAND, TURKEY, UGANDA, UNITED REPUBLIC OF TANZANIA, UNITED STATES OF AMERICA, VENEZUELA.

I: Eradicating Urban Poverty through Health Policies

"Overcoming poverty is not a gesture of charity, it is an act of justice. Like Slavery and Apartheid, poverty is not natural. It is man-made and it can be overcome and eradicated by the actions of human beings." --
- Nelson Mandela[17]

Introduction

The United Nations Human Settlement Programme (UN-Habitat) has been promoting the need for health care policies in order to assist Millennium Development Goal (MDG) One, which focuses on the eradication of extreme poverty and hunger.[18] Member States are encouraged to advance public health through strategic health policies that

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[10]"Global Campaign for Secure Tenure." United Nations Human Settlement Programme.
  http://cn.unhabitat.org/categories.asp?catid=24 (Accessed March 22, 2014).
[11] Operational Activities Report." United Nations Human Settlements Programme. http://hq.unhabitat.org/activities (Accessed March 22, 2014)..
[12] Ibid.
[13] "History, mandate and the role in the UN system." United Nations Human Settlements Programme.
  http://unhabitat.org/about-us/history-mandate-role-in-the-un-system/ (Accessed March 22, 2014).
[14] "Annual Report 2012." United Nations Human Settlement Programme. http://unhabitat.org/un-habitat-annual-report-2012/ (Accessed March 22, 2014).
[15] Ibid.
[16] Ibid.
[17] Nelson Mandela, http://foodpoverty.wordpress.com/2013/10/21/overcoming-poverty-is-not-a-task-of-charity-it-is-an-act-of-justice/. (Accessed March 22, 2014).
[18] "Millennium Development Goals," The United Nations, http://www.un.org/millenniumgoals/poverty.shtml. (Accessed March 22, 2014).

promote quality and standard of life for those they affect. With strong health policies, Member States benefit from human capital, increasing productivity and contributing to economic development. The poor and malnourished are more likely to become sick and are at a higher risk of dying from their illnesses. High numbers of people with life-threatening illnesses undermines efforts to reduce poverty as good health is crucial for economic development.[19] Healthcare policies to combat extreme poverty could reduce the urban poor's death toll. Urban poverty, in conjunction with structured and working health care policies, poses a problem that is difficult to eradicate. A person living in urban poverty lives below the global poverty line or the equivalent of $1.25 USD/day.[20] Due to the nature of their poverty, affordable health care remains difficult to attain for the urban poor. Health concerns for urban residents living in poverty include little to no access to clean and safe drinking water, poor ventilation, safe sanitation systems, and access to medical doctors and other healthcare professionals.[21] Poor ventilation, such as contamination of water supply, air or noise pollution, or natural disasters, increases the likelihood of spreading contagious diseases. In 2011, over 750 million people still lacked access to clean and safe drinking water.[22] The largest portions of these individuals live in overcrowded homes in widely overpopulated urban areas. The diseases carried in water are easily spread to tenants throughout the community; thus, unhealthy drinking water is one of the largest factors contributing to the poor average health of citizens within these impoverished urban communities. Furthermore, sanitation facilities are substandard in most of these urban developments, with a total of 2.5 billion people in developing countries lacking access to modernized sanitation systems.[23]

Urban poverty exists in many places within the international community, predominately in the developing world; where these areas are the fastest growing population in the world. The World Health Organization (WHO) estimates that by the middle of the 21st century the urban population will double, but the continued urbanization of the globe will not accelerate at the same rate. Therefore, while the urban population rapidly increases, the urban space in which they live will not grow at the same rate and create even more severe overpopulation. This is going to greatly increase the number of people living in urban poverty and cause even greater health concerns as overpopulation allows diseases to spread at a more rapid rate.[24] Over 90 percent of urban growth is occurring in the developing world, adding an estimated 70 million new residents to urban areas each year.[25] Member States' cities also provide opportunities for many, particularly the poor who are attracted by greater job prospects, the availability of services, and for some, an escape from constraining social and cultural traditions in rural villages. However, urban city life can also present conditions of overcrowded living, congestion, unemployment, lack of social and community networks, stark inequalities, and crippling social problems such as crime and violence.[26]

Health and the Poor

Global health communities, including WHO, recognize a cycle of poverty in which the poor are more vulnerable to chronic diseases and premature death due to their standard of living. This furthers their family's overall poverty status due to the high costs and difficulty in accessing healthcare.[27] This poverty cycle also contributes to the listed problems in urban developments, including poor access to health care, overcrowding, access to clean water, and

[19] " Partners for Urban Health," United Nations Human Settlements Programme, http://ww2.unhabitat.org/mediacentre/unhsp1104.asp (Accessed March 29, 2014).
[20] "Poverty Facts and Statistics," Globalissues.org, http://www.globalissues.org/article/26/poverty-facts-and-stats (Accessed March 29, 2014).
[21] Ibid.
[22] "We Can End Poverty: Millennium Development Goals and Beyond 2015," The United Nations, http://www.un.org/millenniumgoals/environ.shtml. (Accessed March 29, 2014).
[23] Ibid.
[24] "Hidden Cities: Unmasking and Overcoming Health Inequities in Urban Settings," The World Health Organization, http://whqlibdoc.who.int/hq/2010/WHO_NMH_WKC_10.1_eng.pdf. (Accessed March 29, 2014).
[25] " Urban Poverty: An Overview," World Bank, http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTURBANDEVELOPMENT/EXTURBANPOVERTY/0,,contentMDK:20227679~menuPK:7173704~pagePK:148956~piPK:216618~theSitePK:341325,00.html (Accessed March 31, 2014).
[26] Ibid .
[27] "Chronic Diseases and Health Promotion," World Health Organization. http://www.who.int/chp/chronic_disease_report/part2_ch2/en/. (Accessed March 31, 2014).

malnutrition.[28] Further, they suggest that not only are they so closely tied to each other, they further harm economic growth and stability, leaving these areas impoverished. Productivity is lessened in these cities with more frequent illnesses and what little, if any, economic surpluses exist are used for life sustaining healthcare.[29] The nature of this not only causes more illnesses to spread easily, it causes economic disparity throughout the entire community. With this idea that the two are so intimately related, there may be a solution to both by implementing health policy to eradicate urban poverty.

UN-Habitat has also been working in conjunction with WHO to identify health crises and improve health in poor cities.[30] They have shown that social and economic environment, including access to economic and educational opportunities, safety and security, social support and cohesion, and gender equality has a major impact on the health of those living in urban poverty.[31] People within these developments parameters have limited to no access to education or basic safety, having adverse effects on health. There is a large variety of factors that contribute to overpopulation in growing urban areas with the largest being the lack of reproductive healthcare access the poor have. Women living below the poverty line in these cities lack access to not just contraception but education about reproduction as well. Substantial evidence suggests that slower population growth and investments in reproductive health and HIV prevention (particularly among adolescents), education, women's empowerment, and gender equality reduce poverty.[32]

Access to education about reproductive and sexual health further perpetuates the increasing number of individuals living in urban poverty. The spread of incurable diseases such as HIV/AIDS and others as well as unplanned pregnancy is highest amongst adolescents in poor urbanized areas. Not only do they have no access to education in preventing pregnancy or the transmission of disease, but they also cannot afford adequate health care once in the situations. In a study of 400 adolescent girls in an impoverished city, more than half (217 total) were unable to identify the way HIV/AIDS is spread. The remaining girls were able to identify ways in which the disease was transmitted to varying degrees. Of those surveyed, 63 of them understood that HIV/AIDS is spread through unsafe sex, 94 knew it can be passed through blood transfusions, 67 believed it to be passed in pregnancy and breast feeding, and 24 recognized that it is transferred through sharing a contaminated needle.[33] With such statistics, it is clear that the urban poor is lacking necessary health care education in order to better their situation and alleviate their hardships. Access to education about health will be a critical factor in promoting necessary health policies in these poor urbanized areas.

Impoverished city dwellers face a three-pronged threat to their health due to the poverty in which they reside. This triple threat consists of (a) infectious diseases such as HIV, tuberculosis, pneumonia, and diarrheal infections; (b) noncommunicable diseases and conditions such as heart disease, cancers, and diabetes; and (c) injuries and violence. Infectious diseases are a major threat in many cities due to population density, overcrowding, lack of safe water and sanitation systems, international travel and commerce, lack of provision of health care services, and poor healthcare access.

[28] The Cycle of Poverty and Poor Health." Health Poverty Action, http://www.healthpovertyaction.org/policy-and-resources/the-cycle-of-poverty-and-poor-health/ (Accessed April 17, 2014).

[29] Ibid.

[30] "Hidden Cities: Unmasking and Overcoming Health Inequities in Urban Settings." The World Health Organization, http://whqlibdoc.who.int/hq/2010/WHO_NMH_WKC_10.1_eng.pdf. (Accessed April 17, 2014).

[31] Ibid.

[32] "Reducing Poverty and Achieving Sustainable Development," United Nations Population Fund, http://www.unfpa.org/pds/poverty.html. (Accessed April 17, 2014).

[33] Hanmanta V Wadgave, "Knowledge of HIV/AIDS Transmission Among Adolescent Girls in Slum Areas," *Indian Journal of Sexually Transmitted Diseases and AIDS* (2011 Jul- Dec), http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3195184/. (Accessed April 17, 2014).

The Role of UN-Habitat: Past and Current Programmes

UN-Habitat has been increasing its efforts to improve the living conditions of individuals living in rapidly expanding urban developments.[34] A large portion of the world's urban poor live in slum settlements and UN-Habitat has been working within those slums to help eradicate urban poverty by improving health. Most importantly, UN-Habitat has been implementing or improving sanitation systems in slums and providing access to clean and safe drinking water. Improving the water and sanitation systems in these slums is not an easy task, as the required infrastructure, either new or upgraded, needs to be accommodated by already existing infrastructure, such as roads or buildings, but must also be able to sustain future urban developments and expansion. The intrusive nature of these projects, often involving disruptive and expensive construction work, poses a major challenge to these development efforts as it requires substantial funding.[35]

UN-Habitat programmes provide policy, technical, and financial support to Member States' governments and local authorities. This contributes to the achievement of the internationally agreed upon MDGs. UN-Habitat′s support specifically targets Goal Seven which aims to halve the proportion of people without access to safe drinking water and basic sanitation, as well as improve the lives of at least 100 million slum dwellers by 2020. Focus is particularly set on the urban poor which is a critical factor to facilitate equitable social, economic, and environmental development.[36] Its program WATSAN is responsible for the implementation and upkeep of safe sanitation and water systems in urban developments.[37] They have a number of goals for the programme including expanding awareness of water and sanitation issues by forming partnerships with Member States, the UN donors, urban centers, non-governmental organizations and others. This awareness will promote investments in programmes such as WATSAN, educate stakeholders to enable the development and management of improved water and sanitation systems, encourage existing water and sanitation institutions to expand local operations to a wider array of suffering people, to track changes being made and the work towards sustaining MDG Seven and publish the results. The last goal is important in order for Member States and partners to track successes and continue to help areas which continue to struggle to meet water and sanitation needs of slum developments.

Despite these efforts, there is much that cannot be done without the involvement of local and state authorities. The implementation and improvement of water and sanitation systems requires building and land codes in many Member States. "This calls for strong legislation, guidelines, and building codes, which can only be instituted and monitored by national and local governments. Member States may also look into subsequent legislation of pre-existing laws in order to meet the needs of safe drinking water and sanitation systems. They are the key actors in setting up the conditions of sound development in the water and sanitation sectors. Member States not only need to endorse the roles of policy makers and resource allocators, but function as regulators of service provisions to guarantee universal access, quality standards, and fair pricing. This becomes even more relevant in places where water and sanitation services are externalized to the private sector."[38] UN-Habitat works to partner with Member States to insure water and sanitation policies are created and implemented to help combat urban health disparity. The continuance of supporting Member States to create health policies will greatly impact on urban poverty.[39]

Case Study

While urban poverty and health is an extreme issue in many different cities within Member States, there are variations behind what causes poverty and disease depending on the region in which the city is located. UN-Habitat, in conjunction with the WHO, has created a program in which urban areas can target and understand the specific needs of their area and begin to improve urban problems posing the greatest threat to the health of the urban poor. "

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[34] "Water and Sanitation, " United Nations Human Settlement Programme, http://unhabitat.org/urban-themes-2/water-and-sanitation-2/ (Accessed April 17, 2014).

[35] "Strong Frameworks for Better Development." United Nations Human Settlement Programme, http://unhabitat.org/urban-themes-2/water-and-sanitation-2/. (Accessed April 17, 2014).

[36] Ibid.

[37] "Water and Sanitation, " United Nations Human Settlement Programme, http://unhabitat.org/urban-themes-2/water-and-sanitation-2/ (Accessed May 19, 2014).

[38] Ibid.

[39] Ibid.

"The Global Urban Observatory (GUO) was established by UN-Habitat in response to a decision of the United Nations Commission on Human Settlements, which called for a mechanism to monitor global progress in implementing the Habitat Agenda and to monitor and evaluate global urban conditions and trends."[40] These institutes study the basic lives of those living in the city in which they are built and record data about health, the economy, sanitation, and other troublesome factors of day-to-day life. Once the most problematic areas are identified, UN-Habitat works with the Member State, as well as other partners, to determine the best course of action to improve the lives of those being most adversely effected.[41] The program supports the cooperation of local Member State governments, UN bodies, and NGOs to determine the needs of the city in which it serves.[42]

Once a GUO is established it works to record data about the aforementioned possible issues within a city. Through observation and group data analysis, it is determined which poverty issues are most affecting the economic instability of the region, including health related issues of malnutrition, unsafe water, poor ventilation, and infectious diseases.[43] Once the data is analyzed, the cooperating parties develop an action plan of regional policies in order to help alleviate the issues at hand to better the economic situation in the city being served.[44] The cooperation of these parties once indicators are identified will be the final step in helping to alleviate urban poverty. A wide variety of GUOs have been established within a number of Member States that suffer from global poverty. One such program was implemented in Jinja, Uganda, an urban area that suffers from many problems UN-Habitat works to combat including widespread poverty, unemployment, insufficient low-cost housing, malnutrition, unaffordable water and energy supplies, and inadequate health and educational facilities.[45] The Local Urban Observatory for the Jinja Municipality was built to study the urban problems of poverty and health. It has since determined that 89.8 percent of the urban population of Jinja lives in poverty.[46]

This region is also heavy with health issues felt by many in urban poverty. With the plumbing system having failed, public latrines with no sanitation systems are used by everyone.[47] There is no healthcare facility within the city, so those who can afford to have to travel outside for care. The few who are able to do so either cannot afford or do not have access to the necessary medical treatments to rid their prevalent diseases.[48] What little safe drinking water that exists is privately owned and extremely expensive, thereby making it nearly impossible for access to clean and safe drinking water.[49] These indicators have been determined by the observatory to be the leading causes of economic and health distress within Jinja, since the observatory's development in 2010. Since then, those involved have been working to create an action plan in order to draw in cooperation from local, Member State and regional government systems with UN-Habitat with policies that will better the lives of those living in urban poverty in Jinja, Uganda. The action plan has not yet been completed which has been a lower point in an otherwise successful program to help pinpoint the most prominent issues faced by those living in urban poverty and determine the most beneficial and effective ways to combat them.

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[40] "Global Urban Observatory," United Nations Human Settlement Programme, http://ww2.unhabitat.org/programmes/guo/default.asp (Accessed May 19, 2014).

[41] Ibid.

[42] Ibid.

[43] "Monitoring Urban Inequities," United Nations Human Settlement Programme, http://ww2.unhabitat.org/programmes/guo/muip.asp (Accessed May 19, 2014).

[44] "Country and City Projects," United Nations Human Settlement Programme, http://ww2.unhabitat.org/programmes/guo/country_and_city_projects.asp. (Accessed May 19, 2014).

[45] Ibid.

[46] Global Urban Indicators Database,. United Nations Human Settlements Programme. 2007. http://www.cityindicators.org/Deliverables/Global%20Urban%20Indicators%20Databa_12-4-2007-1028705.pdf. (Accessed May 19, 2014).

[47] Jinja Municipality Slum Profile, Jinja City Profile Report. Shack/Slum Dwellers International. 2010 . http://www.sdinet.org/media/upload/documents/Jinja_Profile_1.pdf (Accessed May 19, 2014).

[48] Ibid.

[49] Ibid.

Conclusion

UN-Habitat believes that health policies created by Member States in conjunction with the UN will be the most significant way to improve the lives of those living in urban poverty. The urban poor are unable to leave their current economic standing partially due to poor health and quality of life that is directly caused by the impoverished conditions in which they live. This cycle of poor health and poverty is not easily broken; however, it is possible with Member State authorities in cohorts with the international community's work to develop health policies to better the lives of the urban poor. Without policies preventing substandard living conditions, many of the urban poor are living in overpopulated areas with poor ventilation systems where diseases are easily spread. Furthermore, there is little to no access to clean and safe drinking water or sanitation systems, which further promotes the easy spread of illnesses. Health care is not easy to find in these areas and what little is accessible is extremely expensive. If families are able to afford the healthcare, it can exhaust all the excess funds they have and eliminate their ability to improve their socio-economic status and their lives. UN-Habitat has seen recent successes in health policies improving the quality of life for the urban poor, which is changing the lives of thousands of people. Programs such as WATSAN, GUO, and GVAC/EPI have given the urban poor access to life-sustaining and life-improving technologies, such as clean and safe drinking water, sanitation systems, and vaccinations against diseases that kill easily. UN-Habitat has shown that health policies are necessary in order to better the lives of the vast populations living in urban poverty and that it can alleviate and ultimately eradicate urban poverty.

Committee Directive

Poverty, especially in urban areas, is a cycle that is easy to become part of and nearly impossible to leave. A large factor leading to urban poverty is poor health conditions and the easy spread of disease in impoverished cities. Consider previous programs as well as the importance of education about health, such as reproduction and disease prevention in this context. What can the global community, within UN-Habitat, do to create health policy in order to eradicate urban poverty? Should this be done regionally or as one global initiative? What role should UN-Habitat play within Member States to ensure these health policies are enacted and being met? What can be done to address certain modifiable health risks such as sewage run-off, waste disposal, public lighting, and hygiene as well as other health risks to eradicate urban poverty? What, if anything, should be done within urbanized areas that do not meet health quality standards?

II: Rehabilitating Slum Settlements through Urban Development

> "*Man has almost constant occasion for the help of his brethren, and it is in vain for him to expect it from their benevolence only.[50]*"
> *-Adam Smith*

Introduction

The landscape of the urban community over that last half century can be characterized by an expansion of informal settlements and cities facing unprecedented demographic, environmental, economic, social, and spatial challenges.[51] Industrialization, later exacerbated by inter-city migration and population increase, became the precursor to slum development. UN-Habitat adopts initiatives and programs to assist and assess vast migration from rural to urban areas. The Global Report on Human Settlements defines slums as a heavily-populated, urban area characterized by

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[50] Adam Smith. BrainyQuote.com, Xplore Inc, 2014. http://www.brainyquote.com/quotes/quotes/a/adamsmith136391.html, (Accessed May 19, 2014).
[51] "Un-Habitat at a Glance", United Nations Human Settlements Programme UN-Habitat, http://unhabitat.org/about-us-4/un-habitat-at-a-glance/ (Accessed May 19, 2014).

substandard housing and squalor; an area addressing 31.6 percent of the world's urban population.[52] The report concentrated on the challenges of slums and presented two main threats causing slum formation: rapid urbanization and the urbanization of poverty. Slums represent the physical and spatial manifestation of urban poverty and intra-city inequality.[53] Slum settlements lack basic infrastructure of transportation, sanitation, water, electricity, and security of tenure. On the margins of formal city life, slums are not defined in the administrative boundary of a town or city through legal address or recognized official territory.[54] Member States may also recognize and attribute slums to be neglected parts of cities or territorial boundaries where social exclusions and economic depravity are prevalent. Social exclusions and the status of slum dwellers inhibits them from receiving access to social services of formal institutions of society which acquiesces a community where formal governance is non-existent.

The informality in slum settlements and the vast expansion of their presence are replacing the traditional form of city planning and community housing development. The World Bank attributes slum development to inefficient and outdated urban planning strategies.[55] Commonalities of slums, such as intolerable living conditions, high concentrations of poverty, social and economic deprivation, present an idea that all slums are homogenous. Many are characterized according to the economic status of Member States and the solutions provided for "adequate shelter for all" by developed Member States can be considerably different for developing or lesser developed Member States. Without proper action, global slum settlements are projected to increase to an estimated two billion residents by the year 2030.[56] The coupled treatment of slum dwellers by official and unofficial governance gained global awareness in which UN-Habitat adopted the Habitat Agenda in conjunction with the MDGs, particularly MDG Seven Target 11; to improve the lives of at least 100 million slum dwellers by the year 2020. The UN-Habitat Agenda mandates sustainable development through social development and environmental protection with full respect for all human rights. These fundamental freedoms including the right to development, offers a means of achieving a world of greater sustainability and peace. It is essential for Member States, in the succession and occupation of residential groups, to actively keep pace with changes in city life through urban development.

Current Situation

Many Member States' cities still retain remnants of preemptive urban development planning strategies consisting of either colonial-style cities, planned ethnic separations, saucer or hollowed cities, or multi-centers.[57] Colonial-style cities have a well-built formal core surrounded by large areas of informal settlements consistent with many African and Asian Member States. Planned ethnic separations are an extreme example of urban social exclusion and segregation is common in areas of apartheid or informal occupancy. Saucer or hollowed cities are the norm for some Member States of Eastern Europe consisting of low-rise center surrounded by public housing.[58] Multi-centers are common in Southeast Asian and Latin American cities in which travel became the basis of city planning. Trends of continued income inequality, lack of economic growth, and interregional migration transmogrifies affordable housing into slum formation. Cities of Member States with a capitalist market environment allocate land that is driven by the search for higher returns and of optimal land use, leaving slums as a residual designation for older market systems.[59] The nature of the capitalist city leads to the physical expression of inequality in built form at which slums lie at the lowest socio-economic level.[60]

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[52] *The Challenge of Slums: Global Report on Human Settlements, 2003,* United Nations Human Settlements Programme, (London, UK and Sterling, VA: United Nations Human Settlements Programme, 2003). (Accessed May 19, 2014).

[53] Ibid.

[54] Nisha Kumar Kulkarni, February 26, 2013. "Revisiting Property Rights for Slum-Dwellers," *Tracking Urban Poverty Trends in India, Bangladesh and Pakistan*, World Wide Web. Online Monthly Newsletter, http://urbanpoverty.intellecap.com/?p=701 (Accessed June 17, 2014).

[55] "Land, Housing and Urban Services", The World Bank, http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTURBANDEVELOPMENT/EXTURBANPOVERTY/0,,contentMDK:20233970~menuPK:475144~pagePK:148956~piPK:216618~theSitePK:341325,00.html (Accessed June 18, 2014).

[56] *The Challenge of Slums: Global Report on Human Settlements, 2003,* United Nations Human Settlements Programme, (London, UK and Sterling, VA: United Nations Human Settlements Programme, 2003). (Accessed May 19, 2014).

[57] Ibid.

[58] Ibid.

[59] Ibid.

[60] Ibid.

Immigrants are common residents of slums utilizing the ease and immediate access to housing as a preparatory adaptation into formal society. These formal planning structures lack the mobility and enterprise industry services that are essential to slum settlements and, as a consequence, has given rise to an informal sector vibrant with economic activity and lack of governance. Slums, poverty, and the informal sector are closely related, but are by no means congruent.[61] This sector's constant growth rate is absent of tax and regulations. In some Member States, the informal economy could account for 91.4 percent of its GDP.[62] The economic activities of the informal sector in slum settlements extend beyond the tertiary parameters forming coadunate relationships with formal society. Projected to generate 50 percent of the world's economic growth over the next 15 years, the informal economy's representation of the slum community is becoming a major driver and source of economic stability for existing and new markets.[63] Newer urban market systems are expanding its services to consumers with the inclusion of concentrated specialty shops utilizing slums as income generators rather than new market innovators. This is driven by the changing landscape in the urban community where urban planning has evolved enough to include the private sector and it's bidding for landholdings.

Multinational companies such as Proctor and Gamble© generate 20 percent of its growing profits from the informal economy by using high-frequency stores. High-frequency stores, no larger than a storage closet, are visited multiple times a day by consumers purchasing single-use products.[64] United Africa Company (UAC) Foods is a global company that utilizes the informal sector to generate sales for its gala sausage roll throughout Africa and the Middle East.[65] Gala sausage cannot be found in the formal economy of markets and retail stores. UAC has recognized that its product generates profit only on the streets being sold as a snack. The socio-economic environment of slums has gained international attention, in that the relationships from the informal sector foster multicultural partnerships and community, inciting new changes in culture. The changes brought new strategies for proposals in dealing with slum settlements. One such proposal is the rehabilitation of slum settlements through urban development. What was once the culture of traditional market buying, the formality of buying first from the manufacturer, has become the informal sector providing consumers with the same traditional product but in a second hand trade center.[66] The promotion of urban development in the incorporation of slum settlement towns can rehabilitate social, economic, and political well-being. The United Nations Development Assistance Framework now foments urban poverty reduction issues and challenges Member States work together to find corresponding tangible solutions.

Actions taken by UN-Habitat

The initiatives and programs that UN-Habitat has in sustainable urban development continue to involve the rehabilitation of slums. Since the 2003 global report on the challenges of slum, UN-Habitat has been bridging the gap between slum settlements and the more affluent formal society. In 2009, the global report on planning sustainable cities emphasized the effectiveness of urban planning as being the key determinant to the prevalence of informality in cities.[67] Providing specific policy directions with institutional and regulatory frameworks for planning provides an avenue to assess urban development with the inclusion on future needs of low income populations as rural to urban migration continues to increase. The National Urban Policy Framework for rapid diagnostic focuses on transforming urbanization into a source of wealth all the while reducing externalities.[68] The rehabilitation of slum

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[61] Ibid.

[62] Mehtab Haider, "Size of Informal Economy at 91.4 Percent of Gdp: Study," *The News International,* November 16, 2012. http://www.thenews.com.pk/Todays-News-3-143058-Size-of-informal-economy-at-914-percent-of-GDP-study (Accessed June 24, 2014) .

[63] Films Media Group. and TED., *Tedtalks Robert Neuwirth -- the Power of the Informal Economy* (2012). (Accessed June 17, 2014).

[64] Ellen Byron, "P&G's Global Target: Shelves of Tiny Stores: It Woos Poor Women Buying Single Portions; Mexico's 'Hot Zones'," *The Wall Street Journal* 2007. (Accessed June 17, 2014).

[65] Films Media Group. and TED., *Tedtalks Robert Neuwirth -- the Power of the Informal Economy* (2012). (Accessed June 17, 2014).

[66] Ibid.

[67] *Planning Sustainable Cities : Global Report on Human Settlements 2009,* United Nations Human Settlements Programme, (London ; Sterling, VA: Earthscan, 2009).

[68] *National Urban Policy: Framework for Rapid Diagnostic,* United Nations Human Settlements Programme, http://unhabitat.org/national-urban-policy-framework-for-a-rapid-diagnostic/ (Accessed June 17, 2014).

settlements utilizing a conditional framework to redefine spatial boundaries promotes transformative, productive, inclusive, and resilient urban development for the long term. The Participatory Slum Upgrading Programme (PSUP) was launched in 2008 with the aim of improving the living conditions in towns and cities. Slums are often the recipients of industrial effluence and noxious wastes, and/or fragile, dangerous, and even polluted lands.[69] This program directly impacts MDG Seven Target 11 by strengthening the capacity of local, central, and regional institutions. Key stakeholders in improvement projects should contribute to policy development and implementation frameworks through the use of good governance, management approaches, and pilot projects.[70] PSUP's three-phase approach of urban profiling, planning, and implementation strategies for slum settlement creates opportunity assessments for urban policy integration.[71] UN-Habitat emphasizes integration strategies with major roles involving stakeholders, as well as target groups, to reinforce beneficial community relationships in the urban environment. PSUP currently involves 34 Member States in Africa, the Caribbean, and the Pacific States (ACP). The Planned Cities Extension Initiative, another potential solution to assist in the rehabilitation of slums expounds urban development by redefining territorial boundaries that incorporate slum settlements within city limits. The goal of the initiative is to increase residential and economic densities with compact communities while guiding new redevelopment to areas better suited for urbanization. The success of PSUP has been measured through acknowledgement and awareness of Member States' recognition to redefine urban development with slum settlements in mind. This awareness has gained national, regional, and local attention.[72]

Challenges

Member States are faced with incorporating slum settlements as part of national urban development policies. The integration of global trade policies and the focus on macro stability, Member States have neglected the changes in the urban environment. The lack of sufficient income for affordable housing creates an informal market in which slums are rapidly constructed to house the urban poor. Government response to such informality has resulted in demolitions or poor and biased land policies and, instead of positive and effective change, has resulted in increased inequality. Slums are characterize by three main settlement types: squatter settlements residing on public or private land, illegal commercial suburban land subdivisions on private or customary land, and occupation of overcrowded, dilapidated buildings in city centers or densely urbanized areas. The resistance to this type of encroachment as the current perception of settlements must be redefined. Member States should utilize precaution in the integration of informal settlements within the broader community. Consider conventional tenure regularization and the provision of freehold titles to promote community cohesion and to dissolve social links and induce or accelerate segregation processes through market eviction. Conventional land allocation policies, in which Member States utilize optimal returns, must work together with local and regional stakeholders to break through the stigma of slum perception and promote change that is both valuable to the broader community and economic status of each region. Security of tenure is not the only essential tool in proper slum development, but should be the first step. Member States, through the defining framework of UN-Habitat National Urban Policy, must decide whether slums can be recognized as legal entities and configured within the scope of national, regional, and local territories. Global financial support is limited as other factors in achieving the MDGs present constraint in effective policy solution for slum settlements. One of the main impediments to effective problem solving in slum settlements is due to finances and the lack or misuse of financial resources at the national and city levels, including weak tax systems that create pressure on municipal budgets.[73] Urban aid has been small in proportion to total aid given which hinders the infrastructure necessary to invest in local and regional communities. Planning systems can be changed so that they are able to function as effective and efficient instruments of urban change.[74]

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[69] "Participatory Slum Upgrading Programme", United Nations Human Settlements Programme, http://unhabitat.org/initiatives-programmes/participatory-slum-upgrading/ (Accessed June 23, 2014).

[70] Ibid.

[71] "Participatory Slum Upgrading Programme: Implementation Set-Up", United Nations Human Settlements Programme, http://mirror.unhabitat.org/content.asp?typeid=19&catid=592&cid=10984&activeid=10980 (Accessed June 23, 2014).

[72] "Participatory Slum Upgrading Programme: Achievements", United Nations Human Settlements Programme, http://mirror.unhabitat.org/content.asp?typeid=19&catid=592&cid=11015 (Accessed June 23 2014).

[73] *The Challenge of Slums: Global Report on Human Settlements, 2003,* United Nations Human Settlements Programme, (London, UK and Sterling, VA: United Nations Human Settlements Programme, 2003). (Accessed May 19, 2014).

[74] Ibid.

Case Study: Republic of Mauritius

In December of 2013, UN-Habitat launched PSUP in the Republic of Mauritius with the hopes of improving the country's towns and cities.[75] The Member State selected its largest growing urban population regions to serve as pilot projects for the program. In 2011, Mauritius' urban economy in the regions of Port Louis, Beau-Bassin, and Black River composed the National Urban Profile for the Member State. "Located on the northwest coast of the island, Port Louis, the capital city of Mauritius, is characterized by its administrative importance as well as the buoyancy of economic and commercial activities."[76] Beau-Bassin is located on the western side of Mauritius in the lower part of the inland district of Plaines Wilhems.[77] The town has evolved as a residential area with a high density of businesses. Black River, primarily a dominant sugar-producing industry town is undergoing gentrification in order to promote the district's Integrated Resort Scheme increasing land value. These towns have seen rapid urban population influx from uncontrolled squatter settlements and the top-down approach from the State Ministry of Housing and Land management renders solutions to squatter settlements inefficient. The characteristics of these regions are high concentrations of slums settlements, low levels of social inclusion, and land tenure biases that are aimed at development of the State.[78]

All regions are subject to the State Ministry of Housing and Land Management, yet municipalities are allowed to set their own rules and regulations so long as they follow the governing standards outlined in the Local Government Act of 2011. The act delegates responsibilities and duties to municipal councils involving construction, care, and maintenance of each region. The act also accounts for how finances are accumulated and generated from local citizens. Utilizing UN-Habitat's three-phased approach of urban profiling, action and planning programme formulation, and, finally, implementation strategies, the Member State of Mauritius has implemented a governmental policy that legalizes the situation of squatter settlements. This is contingent upon the availability of land suitable for housing. The institutional setup of slum settlement in Port Louis revolves around the Ministry of Housing and Lands as well as a series of departments specialized in dealing with the poor. The rise in slum settlements is primarily due to the economic attractions of the capital. "This problem of overcrowding profoundly affects those in slum areas, leading to the increased vulnerability of these populations."[79] Through an Empowerment Foundation, the town of Port Louis utilizes funds as a loan to poor families who are qualified for slum upgrading. The town of Beau-Bassin cannot afford to provide slum dwellers with integrative housing solutions due to the demand of the sugar industry. For Black River, recent tourism projects impede squatter settlements leaving residents evicted from supporting housing structures.

Through the implementation of the Participatory Slum Upgrading Programme, the Republic of Mauritius has been able to assess regions high in urban population growth as well as managing the influx in slum settlements. As of today, the Member State has realized that not all slum dwellers will be eligible for upgrading and the location of housing will not always be in conjunction with settlers. Due to the size of the Member State, economic factors that promote sustainable housing for slum dwellers must be taken into account along with factors that produce revenue. Challenges that the Member State has found are the reluctance of slum dwellers to leave their settlements and relocate, inability to replenish the Endowment Foundation due to defaulting loans, and configuring socio-economic stability with economic activity and revenue generation.

Conclusion

The PSUP is one of many solutions in the rehabilitation of slum settlements. Though the PSUP may not contain guides in effective policies for all Member States, it does serve as an outline in assessing the status and situation of

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[75] "Microsoft Powerpoint - Mauritian Uban Profile - 6868mauritian Uban Profile.Pdf," (2014) (Accessed June 23 2014).

[76] *Mauritius: Port Louis Urban Profile*, 2011, United Nations Human Settlements Programme, ,"
http://mirror.unhabitat.org/pmss/getElectronicVersion.aspx?nr=3384&alt=1 (Accessed June 23, 2014).

[77] "Beau Bassin-Rose Hill Urban Profile – Mauritius," United Nations Human Settlements Programme,
http://unhabitat.org/publications/beau-bassin-rose-hill-urban-profile-mauritius/ (Accessed June 23, 2014).

[78] "Mauritius – National Urban Profile," United Nations Human Settlements Programme,
http://unhabitat.org/publications/mauritius-national-urban-profile/ (Accessed June 23 2014).

[79] *Mauritius: Port Louis Urban Profile*, 2011, United Nations Human Settlements Programme, ,"
http://mirror.unhabitat.org/pmss/getElectronicVersion.aspx?nr=3384&alt=1 (Accessed June 23, 2014).

slum dwellers. Commonalities of slums such as intolerable living conditions, high concentrations of poverty, and social and economic deprivation present an idea that all slums are homogenous. Many are characterized according to the economic status of Member States and the solutions provided for "adequate shelter for all" by developed nations can be considerably different for developing or lesser developed Member States. The lack of sufficient income for affordable housing creates an informal market in which slums are rapidly constructed to house the urban poor. Member States are faced with the incorporation of slum settlements as part of national urban development policies. Member States should utilize precaution in the integration of informal settlements within the broader community. Conventional land allocation policies, in which Member States utilize optimal returns, must work together with local and regional stakeholders to break through the stigma of slum perception. Promoting change that is both valuable to the broader community and economic status of each region can ease tension and negative definitions of slum settlements. UN-Habitat has placed central focus on the rehabilitation of slums as part of the broader achievement to the MDG Seven Target 11. Many initiatives are able to spread awareness and foster communication on the situation of slum settlements. It is through continued collaborative efforts that we can continue to learn and provide solutions to dealing with an informal situation through new formal urban planning strategies.

Committee Directive

Slum settlements, especially those that have maintained historical reference often generate their own community through the shared experience of social exclusions. What factors should Member States consider in the inclusion of slum dwellers with formal society? How can urban planning contribute to improving the living conditions of current slum dwellers by providing adequate alternatives to new slum formation? The informality in slum settlements and the vast expansion of their presence are replacing the traditional form of city planning and community housing development. Formal planning structures of Member States ignore the influx of informal settlements and thereby an informal economy. What are some actions Member States can take to mitigate such informal governance? What formal planning structure characterizes your Member State? How, through the principles and guidelines of UN-Habitat's programs and initiatives, can your State deal with the integration of slum settlements? Member States must also consider diplomatic ways to eliminate peace conflicts as well as involve stakeholders and target groups in the integration of a unified cohesive society. Consider the financial constraint of the global community donors in the completion of other MDGs and other commitments as a guide in providing adequate solutions to rehabilitating slums settlements through urban development. Member States must also consider the role of the informal economy in their respective region. Remember, the informal economy could account for 91.4 percent of some Member States' GDPs. Although they are independent, of each other the informal sector and slum settlements share responsibilities in income generation for both new and emerging markets. Each Member State must decide how to capitalize on this sector in the assistance of slum rehabilitation.

Technical Appendix Guide

Topic I: Eradicating Urban Poverty through Health Policies

Agarwal, S.; Satyavada, A.; Patra, P. and Kumar, R. (2008) 'Strengthening Functional Community-Provider Linkages: Lessons from the Indore Urban Health Programme', *Global Public Health*, 3.3: 308-325
http://uhrc.in/downloads/Publications/Articles/Global_Public_Health.pdf
Weak linkages between health providers and slum communities hinder the improvement of health services for Member States' urban poor. To address this issue, an urban health programme is implementing two approaches: the demand-supply linkage approach and ward coordination approach. This paper examines these two approaches. This paper explores the impact of these approaches and whether the utilization of services among slum communities and helped improve immunization coverage and other maternal and child health indicators were enhanced.

Capon, A.G. (2007) 'Health Impacts of Urban Development: Key Considerations', *NSW Public Health Bulletin,* 18.9-10: 155-156
http://www.publish.csiro.au/?act=view_file&file_id=NB07087.pdf
The urban environment is an important determinant of health. Health impact assessment is a tool for systematic analysis of the health consequences of urban development and management. This paper identifies key considerations, including opportunities for physical activity, food access and local economic development. Health impacts should be considered a primary outcome of urban development and management.

Chandola, T. (2012) 'Spatial and Social Determinants of Urban Health in Low-, Middle- and High-Income Countries', *Public Health*, 126.3: 259-261
http://www.ncbi.nlm.nih.gov/pubmed/22325618
Urban populations around the world face increasingly common health problems. This is partly because of common spatial and socio-economic factors that result in substantial inequalities in health among urban populations. Spatial methods can now map out dimensions of urban living, such as the segregation of poor communities as a result of population concentration of poverty in deprived neighborhoods. Some communities can be resilient to the health-damaging aspects of living in a poor neighborhood if they have access to social support and other social ties.

Chatterjee, M. (2010) 'Urban Health: Policy and Polity', *India Health Beat*, 4.6
http://www.phfi.org/images/pdf/policy_notes_vol_4_no_6.pdf
This note examines selected issues in urban health from a social perspective. In particular, it brings out the key challenges in targeting and planning for the urban poor; their mobilization and participation in improving their health conditions; and in health information and education which plays an important role in changing behaviours not only for seeking health care but also for preventive health

Dyson, T. (2003) 'HIV/AIDS and Urbanization', *Population and Development Review*, 29.3: 427-442
http://onlinelibrary.wiley.com/doi/10.1111/j.1728-4457.2003.00427.x/abstract
This article examines the relationship between HIV/AIDS and urbanization in the developing world, with particular attention to selected countries in sub-Saharan Africa. While it has long been known that urban levels of HIV infection are usually appreciably higher than rural levels within countries, insufficient attention has been given to variation in levels of urbanization when trying to account for different rates of infection between populations. The process of urbanization - that is, the rise in the proportion of a country's total population that lives in urban areas - is a fundamental feature of socioeconomic development. Yet, there has been little consideration of how, in the worst-affected populations, this process may be already constrained by the demographic impact of HIV/AIDS.

Elledge, Myles F.; Rosensweig, Fred and Dennis B.Warner (with John H. Austin and Eduardo A. Perez). 2002. Guidelines for the Assessment of National Sanitation Policies. Environmental Health Project (EHP).
http://pdf.usaid.gov/pdf_docs/pnacq104.pdf
Comprised of the USAID Environmental Health Project (EHP) and its partners, a taskforce was formed to assess national sanitation policies. The Guidelines for the Assessment of National Sanitation Policies serves as a tool for program managers and implementers to examine and evaluate sanitation policies. It is organized into the following sections: Background Information; Key Elements in National Sanitation Policies; Assessment Methodology; Guidelines to Assess National Sanitation Policies; and Building on the Assessment.

Fotso, J.C. (2006) 'Child Health Inequities in Developing Countries: Differences Across Urban and Rural Areas', *International Journal for Equity in Health*, 5.9
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1544325/pdf/1475-9276-5-9.pdf
This article aims to document and compare the magnitude of inequities in child malnutrition across urban and rural areas, and to investigate the extent to which within-urban disparities in child malnutrition are accounted for by the characteristics of communities, households and individuals. It finds that the urban advantage in health masks enormous disparities between the poor and the non-poor in urban areas of Sub-Saharan Africa. Specific policies geared at preferentially improving the health and nutrition of the urban poor should be implemented, so that while targeting the best attainable average level of health, reducing gaps between population groups is also on target. To successfully monitor the gaps between urban poor and non-poor, existing data collection programs such as the DHS and other nationally representative surveys should be re-designed to capture the changing patterns of the spatial distribution of population.

USAID. 2004.Advancing environmental health for disease prevention: past experiences and future priorities -- lessons learned from EHP 1999-2004. Environmental Health Project (EHP).
http://pdf.usaid.gov/pdf docs/PDACA584.pdf
The Environmental Health Project II (EHP II) was the follow-on project to EHP I and Water and Sanitation for Health (WASH) projects supported by the USAID Bureau for Global Health from 1999 to 2004 which implemented a wide range of environmental health activities. These report documents key lessons learned from the EHP to prevent disease, with emphasis on the applications of the Hygiene Improvement Framework (HIP) to various programming such as child health, primary health care, and vector control.

Topic II: Rehabilitating Slum Settlements through Urban Development

Fengler, Wolfgang. "Can Rapid Population Growth Be Good for Economic Development?" Worldbank Blogs. The World Bank   Group, 15 Apr. 2010. Web. 14 Oct. 2012.
The author parallels the relationship between rapid urbanization and the growing global population. What will be the socioeconomic changes or developments? The green fertile belt runs through Kenya, Uganda, and the Congos. Kenya is aiming imports though Africa, and it also supports many of the countries in the green belt due to the quantity or lack of what they can produce. It is crucial for population migration to centralize in urban sprawls, to increase innovation and sustainability. While many factors contribute to urbanization, it seems that increasing populations can subsidize African development. Wolfgang Fenger is the World Bank's leading economist in the Nairobi office where he covers Kenya, Rwanda, and Eritea. He does expensive research on the economics of African regions and in this particular article analyzes economic growth in relation to booming populations election.

Rashed, Sabina Faiz. "Strategies to Reduce Exclusion among Populations Living in Urban Slums in Bangladesh."
J.Health Popul Nut. Aug. 2009; 27(4):524-586. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2928105/
Keeping in mind target 11 of MDG 7, which calls for the improvement of at least 100 million people that live in slum settlements, this article takes a specific look at one Member State, Bangladesh, and the policies and actions that impact political and economic exclusion. Additionally, delegates should look at the assessment of access to health and human rights of the urban poor which are also addressed in this article.

USAID. 2008. Moving toward a strategic approach to sanitation at USAID. Background paper prepared for: USAID Sanitation Consultation, 19-20 Jun 2008. Washington, DC: Academy for Educational Development (AED).
http://pdf.usaid.gov/pdf docs/PNADN288.pdf
This document serves as a background paper for the USAID Sanitation Consultation, which took place in June 2008. Its contents include the rationale for prioritizing sanitation at USAID, current USAID sanitation programs, and the way forward in developing and implementing a strategic approach to sanitation at USAID.

Urban Development: The Challenges and Promises. The World Bank.
http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSDNET/0,,contentMDK:22306448~menuPK:64544 78~pagePK:64885161~piPK:64884432~theSitePK:5929282,00.html
This section of The World Bank website takes a look at urban development, specifically the challenges faced with such a daunting task. Undeniably, access to and implementation of urban development is incredibly difficult and

exacerbated in Developing Member States. As our population grows, with the urban population predicting a 60% increase in the next two decades, of which 90 percent of that growth will occur in the Developing World. Delegates need to be aware of these statistics and take them into consideration when addressing this topic in committee.

Satterthwaite,David. "Meeting the MDGs in urban areas and the forgotten role of local organizations."
http://pubs.iied.org/pdfs/G00463.pdf
This is an interesting article written by a Senior Fellow at the International Institute for Environment and Development, drawing attention to the need for organization on a local level to ensure that the MDGs are fulfilled. Delegates need to be able to draw these conclusions and extrapolate for the committee and topic at hand. Think of how local governments and organizations are lacking when it comes to the rehabilitation of slum settlements and how that is impeding the progress in development.