



Statement by

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Excellencies, Honourable Ministers, Distinguished Delegates, Colleagues, and Friends,

On behalf of UN-Habitat, it is both an honour and a privilege to express our full support to our sister agency, the World Health Organization, during the 78th World Health Assembly. As the proceedings draw to a close, we stand in solidarity with WHO at this pivotal moment—one marked by profound global challenges and the need for renewed collective action. In such times, our shared commitment and combined expertise are now more critical than ever.

Urbanization remains one of the most transformative forces of the 21st century. Cities are not merely the settings where health challenges manifest—they are the crucibles in which health outcomes are shaped. The way we design, govern, and invest in urban environments can have as significant an impact on public health as vaccines or clinical care. Safe and affordable housing, access to clean water, sanitation, and reliable basic services are essential components of a healthy life. Yet, today, the global urban landscape is being shaped by multiple and connected crises—climate change, conflict, forced displacement, and economic instability—all of which exacerbate existing urban health risks and widen inequalities.

So far at this assembly, we applaud the Member States approval of the **Pandemic Agreement**; we now face the critical task of turning commitments into action. Given that the majority of future pandemic risks will emerge or intensify in urban areas, it is essential that cities are recognized, not only as points of vulnerability, but also as central actors in preparedness and response. The effective implementation of the Pandemic Agreement requires the full integration of **local governments and urban systems** into national and global health security frameworks. This includes supporting cities with real-time data, inclusive governance mechanisms, and sustained investments in resilient infrastructure and public services.

Additionally, we fully endorse the **One Health approach**, recognising that the health of people is intimately linked to the health of animals and our shared environment. This integrated perspective is especially relevant in urban settings, where human-animal-environment interactions are highly concentrated, and where climate and biodiversity challenges intersect with human vulnerability. A One Health lens enables us to better anticipate, prevent, and respond to complex urban health risks.

As urbanization accelerates across all regions, we request the World Health Assembly to recognize the urgent need to fully integrate the housing, urban development, and public health agendas. This is not merely a question of intersectoral collaboration. It is about reimagining how we collectively deliver on the promise of “Health for All” through the spaces in which people live, work, move, and grow.

Over half the urban population in Africa and Asia already resides in informal settlements. With urban populations projected to triple in several regions by 2050, and with each 1% increase in urban population linked to a 2.3% and 5.3% rise in slum incidence in Africa and Asia respectively, the risk of deepening and persistent health disparities is both real and urgent.

We must identify new opportunities for coordinated investments and financing mechanisms that are commensurate with the scale, complexity, and urgency of the urban transition. Housing must be understood not simply as shelter, but as the foundation of human dignity and public health—impacting everything from mental well-being to disease resilience. Today, more than 2.8 billion people lack adequate housing, over 1.1 billion live in informal settlements, and over 300 million are homeless. These statistics are not just numbers—they are a call to action.

In this regard, I am pleased to highlight the recent agreement between WHO Director-General Dr. Tedros Adhanom Ghebreyesus and myself to strengthen and renew our joint collaboration. Together, we will revisit and enhance our strategic partnership with a renewed focus on housing and basic services—particularly in the context of climate emergencies and conflict—and co-develop new guidelines on housing and health. This dynamic, evidence-based tool will support national and local governments in aligning urban planning, housing, and health interventions to achieve measurable impact.

From informal settlements in developing regions to underserved urban areas in wealthier countries, communities are facing not one crisis, but many overlapping ones. Our challenge is to find the best management options for both non-communicable and infectious diseases.

In advocating for a more integrated, cross-sectoral response, we reaffirm our respect for and support to the health sector’s leadership. UN-Habitat stands ready to complement WHO’s efforts with the urban data, planning tools, and the technical capacity needed to turn our vision into action.

In conclusion, let us work together to build cities that safeguard public health, reduce inequality, and promote well-being for all. Our urban environments must become engines of opportunity and protection—not sources of vulnerability. Urban areas are no longer passive settings for health outcomes—they are active arenas of intervention. Let us rise to this challenge with vision, ambition, and unity.

Excellencies, ladies and gentleman, thank you for your attention !