Tackling Africa’s slums

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The rate of urbanization in the less developed countries over the last few decades is far higher than that in the more developed countries over the past hundred years. In Africa, particularly, most of the urban populations are concentrated in just a few cities. And the urban process is largely unplanned in both physical and social terms.

Inevitably this results in the uncontrolled physical expansion of the cities. City growth has leapt far ahead of city planning and management, to the point where development of structures and activities in the cityscape is simply haphazard. In the older “core areas” of city slums and in the relatively new built-up areas, the scene is one of overcrowding, lack of access roads, scarcity of drinking-water, ramshackle buildings, uncollected garbage, lack of sewers, inadequate air-space, and a housing environment littered with human faeces. All of these are conducive to the spread of tuberculosis, pneumonia, influenza, threadworm, cholera, dysentery and other diarrhoeal diseases.

Just as intensive planning activities prevent diseases and promote health, so the lack of planning, or its inadequacy, breeds diseases and contributes significantly to a high rate of mortality, especially among children.

From ancient times

The relationship between urban planning and health was known to the ancient Greeks and Romans, who promoted the orderly arrangement of houses and streets and the provision of water as a means to prevent diseases and to control them. More recently, in the United Kingdom, concern for the health of people who crowded into the major cities during the industrial revolution gave rise to housing regulations which evolved into public health regulations, and eventually became the town and country planning laws. In Nigeria, modern town planning activities were triggered by bubonic plague which hit Lagos in 1924. Besides the immediate measures taken such as disinfection, removal of patients to the infectious diseases hospital and campaigns to wipe out rats, the epidemic brought into being the Lagos Executive Development Board, which pioneered the development of new housing estates after demolishing some of the worst slums.

The pre-colonial settlements in Africa evolved without any conscious planning as we know it today. Compounds and houses were built with paths radiating from the centre, and roads were unknown. During the colonial period, Western concepts about the design of cities were introduced side by side with the traditional situation. Most African cities still remain traditional in form and character.

One result is that an industrial plant generating fumes and excessive noise may be situated in a residential area, with serious implications for the health of the people living there. In Ibadan, Nigeria, the two main waste disposal sites currently in use are already surrounded by residential development. Apparently the sites were selected in the early 1930s when Ibadan was a much smaller city. With
appropriate urban planning, these waste disposal sites would have been relocated well away to prevent pollution of the city.

In cities like Kano, Lagos and Ibadan, a substantial proportion of houses cannot be reached by motor cars and refuse collection vans. Households wastes are dumped on any available open spaces or in drains. Heaps of garbage are therefore common sights, and serve as breeding places for disease-carrying insects and rodents.

**Inadequate roads**

At the same time, those areas of the cities that are served with access roads of some sort are well known for their high rate of accidents. This is another public health problem resulting from unplanned urban growth. Traditional pathways are unsuitable for motor traffic, since they often retain some of their original features of narrowness, dangerous curves and unpaved surfaces. Urban planning principles demand that roads should be laid and other essential services installed before house construction starts. Many lives are lost and many are injured in African cities because of the defective road system. Children are specially at risk because, without playgrounds, they are obliged to play in the streets.

Another source of accidents is the high rate of collapse of buildings. In Nigeria alone, hundreds of lives are lost each year when homes fall down. In Port Harcourt recently a two-storey school building collapsed and killed several pupils, while scores of others were seriously injured. Such accidents are mainly due to lack of control by planners, engineers and architects, which means that developers feel free to flout the relevant planning and building regulations.

Unplanned urbanization has also led to inadequate water supplies. In Dar es Salaam, for example, 47 per cent of the population have no piped water supply either inside or immediately outside their houses. Many other cities are in this position.

Hardest hit by the lack of drinking-water are the inhabitants of the spontaneous slum settlements that develop on the city outskirts. Such people rely largely on streams, brooks and shallow wells for their daily water supply, and these sources are frequently polluted. Where there is a piped supply, it is rarely adequate. In Ibadan, the taps may not run for a whole week; it is not surprising that the incidence of typhoid has been increasing in the past few years.

Owing to unplanned urbanization, there are inadequate sewage systems in Lagos, Ibadan, Kinshasa and Dar es Salaam. People largely depend on individual septic tanks, pit toilets and undeveloped open spaces. It is not uncommon to see children and even adults defecating in open spaces in the worst slum areas. This helps to create conditions favouring the spread of typhoid, hookworm, dysentery and diarrhoeal diseases.

Overcrowding also encourages the spread of diseases. As long ago as 29 November 1884, the Nigeria Pioneer noted the link between smallpox incidence and overcrowded housing in certain districts of Lagos. Although smallpox has been eradicated worldwide, overcrowding encourages the spread of other diseases like measles, mumps and tuberculosis, all of which are easily transmitted through person-to-person contacts.

Newly developing areas often do not conform to regulations aimed at ensuring that buildings are sited in well-drained areas. If they spring up in areas liable to flooding, this may encourage the spread of the vectors of malaria.

A recently completed study on Ibadan clearly reinforces the link between urban planning activities and public health conditions. Government residential areas and a few other housing estates of the city where urban planning is active enjoy better environmental conditions. By contrast, in the extensive traditional areas and the new suburban slums, where there are few or no development control activities, the quality of the environment is very poor.

**WHO initiative**

Unfortunately the prevention of diseases and the promotion of health do not figure high among the major concerns of urban planning. It is against this background that WHO took the initiative through its Environmental Health in Rural and Urban Development Programme to stimulate awareness about the association between planning and health, and to offer appropriate guidelines. This is an initiative that should be fully adopted in the less developed countries, particularly in Africa. Planners today should consciously start to emphasize the health implications of planning in urban development programmes. And they should be prepared to meet the challenges of urban decay and uncontrolled sprawling by applying the strategies of rehabilitation and upgrading of sub-standard housing, while keeping health as the central focus of attention.