
BOOK REVIEWS

Ambe J. Njoh

Urban Planning and Public Health in Africa: Historical, Theoretical and Practical Dimensions of a Continent's Water and Sanitation Problematic

Ashgate, Surrey, 2012, 237pp, \$220.

Reviewed by Franklin Obeng-Odoom

Research in urban planning has neglected public health issues, but so has research in public health which does not usually take the 'urban' seriously. The neglect of the two themes in broader debates about health, which have tended to shift gradually but conspicuously from state, to market, and then to civil society led approaches to healthcare, is even more disturbing. Urbanists write variously about land, affordable housing, water, informal economies, employment, and food, among others, but they rarely strike the links with planning and health matters. Opportunities for synthesis and interdisciplinary research on urban and spatial aspects of health exist and can be published in heterodox political economy outlets such as this journal. Yet, to this day, the related fields of urban planning and public health continue to drift apart, especially in commentaries on Africa where the urban population is gradually becoming proportionately more than the rural population - albeit in an environment of great urban health penalty.

Urban Planning and Public Health in Africa has been written to address these matters, and to reflect on possible, probable, and preferable health and urban planning futures. The author is a highly respected urbanist and Africanist, with a long and sustained track record of stimulating urban analysis. The work under review is his tenth book on cities and planning in Africa – all of which have become major reference material for students, teachers, and researchers. He has consulted widely for the UN and carried out research in many African countries and on a variety of topics on urban life and society, planning, politics, society, environment, and economy.

He draws on his skills as a planner, teacher, and researcher to construct a compelling and credible case for change. Taking a distinctively postcolonial approach in his investigation, the author carefully and systematically links dots from the past to the present and from the local to the external in order to provide a critical account of the current state of public health and urban planning in Africa. He pays attention to the continuing effects of colonial and colonising urban planning creeds in the form of bye laws to understand their racist origins and expose the harm their continuing implementation brings to the burgeoning population of Africans in cities. The role the state has played to date is remarkable but even more remarkable, the book reveals, is how seemingly local interests intersect with global aspirations to shape urban form and health.

Following this diagnosis, the book presents a novel remedy which is based on non-pecuniary proposals. Unlike the dominant and common 'more money is best' approaches which characterise the analysis of some major global development groups, this book calls for life style changes, the reconfiguration of power relations, and transformation of urban planning codes that harm, rather than heal. Above all, the book makes a strong case for urban planning and urban health to be re-coupled, if not married, in a way that is not modernist but is indigenised socially, culturally, and economically. It presents a direct challenge to the view that it is better modern technology that will improve the conditions in urban areas in Africa. To Njoh, matters such as sanitation require more than a change in gadgetry. Community or citizen participation, for example, is very important to him and is arguably based on Africanist principles of coming together to think about the collective good, for example, of a village or community. Such principles, Njoh argues, should be revisited or where they exist be substantially extended.

The book makes a strong case for taking public and urban health seriously in formulating development policy not only because health is an outcome of development but also because good health is a driver of development. Institutional change, the book argues, should not be driven by mimicry of Western society but should look inwards to learn from history and culture. The author is on solid grounds when talking about issues of tradition and custom for only a while ago, he published *Tradition, Culture and Development in Africa: Historical Lessons for Modern Development Planning* (Ashgate 2006) – also a major book, but focusing mainly on culture. In the current book, the interest is primarily in health and so the author gives copious examples of health-based

traditions to help correct historically misleading representations of Africans as having disease prone culture or having a culture of disease. Consequently, *Urban Planning and Public Health in Africa* calls on planners on the continent to ‘Africanize’ planning policies (37).

Often, titles with ‘in Africa’ tend to generalise about a continent where variety is the only common feature. Not so for this book. The author provides context and region-specific analysis in appraising urban health and planning dynamics on the continent. Thus, the book is rich in giving an African wide picture but nuances this representation by recognising, in a meaningful way, the differences that exist on the continent. The recognition of differences can be seen in the ‘geographical twist’ in the ten chapters that make up the book.

For readers looking for the scope of the book in this review, the following chapters are covered: history of public health and the built environment; the state, ideology, health and built space in Africa; town planning, public health and the colonial project; racism versus health concerns as the rationale for racial segregation; and public health implications of modernist planning. The rest of the chapters are hygiene and sanitation conditions in West and Central Africa, Southern Africa region, and Northern Africa, Solid waste disposal and sanitation technologies, determinants of access to improved sanitation, and sustainable hygiene and sanitation strategies – in that order.

This book is well-written and engaging, the argument persuasive, and the material well-structured - with only minor quibbles. While the nexus between poverty and health was convincingly analysed, unfortunately not much attention was given to inequality and questions of health - a topic which we know from the work of Kate Picket and Richard Wilkinson, *The Spirit Level: Why Greater Equality Makes Societies Stronger* (2009), is extremely important. There is already impressive analysis of segregation and inequality in the book, so it should be easy for the reader to make the connection or for the author to make it more explicit, if he chooses to write a second edition of the book. If he did, this reviewer wondered whether he would want to do away with the subtitle of the book. *Urban Planning and Public Health in Africa*, for this reviewer, is a more succinct title but, of course, this is a matter of personal preference and takes nothing away from the book.

Urban Planning and Public Health in Africa succeeds in achieving its goals and, in addition, powerfully reminds us of the need to eschew

monodisciplinary approaches to urban studies and indeed in the social sciences or even knowledge production generally. By doing so, the book is able to reveal that the several colonial projects portrayed as being for the public good, mostly ended up being racist and impacting negatively on the health of the natives. Fast forward to the post-colonial era and what we have is not entirely sanguine. Njoh shows that all too often, claims about modernisation, development, public health are ideological projects meant to advance the interest of certain classes and interest groups.

Ambe Njoh has once again made an important intervention in urban studies in Africa. This book is a must read for those interested in health studies generally, but also for those interested in public health and urban studies more specifically. Researchers, teachers, and practitioners in the fields of urban planning, geography, international development, and development studies will find this book very useful as will urban political economists, and those generally interested in African studies.

Howard Waitzkin

Medicine and Public Health at the End of Empire

Paradigm Publishers, Boulder CO, 2011, 256pp, \$60.

Reviewed by David Legge

Health is determined before and beyond the health care system: stunted girls in India, buried miners in China, AIDS in Southern Africa, gun violence in the US. It is self-evident that stocks and flows of the global economy powerfully influence population health and accordingly the political structures and relationships which shape the global economy powerfully determine population health outcomes. The challenge facing the institutions and practitioners of public health is how to engage with the structural determinants of health, including the dynamics of the global economy and its control.

The magnitude of the challenge is reflected in a grumbling debate between Anglophone public health which talks about the 'social determinants' of health and the Latin American social medicine movement which insists on the 'social determination' of health (Breilh 2013). The Anglophone focus has been on pathways of influence; the