

Chapter 9

Best Practices Around the World: Some Suggestions for European Cities



Abstract In addition to European experiences, which are often trapped within consolidated paths, in other parts of the world, some cities are opening up to welcoming experimental forms of small-scale bottom-up urban planning. Questions related to social sustainability are in many cases the bearers of innovation outside of conventional urban planning and design paths. The examples of North American cities rely a lot on experimentation through close involvement with civil society, which assumes responsibility for the city's living spaces, becoming a promoter of health-based initiatives, even from the economic point of view. Experimentation in the field is frequently accompanied by guidelines and tools charged with providing technical offices and designers with orientations rather than rigid rules. In addition, the impression is that it is the context that guides the interventions, avoiding simplistic, ineffective generalizations. With all the differences among the situations, health and urban planning are also themes addressed by South American cities. In many cases, they deal with approaches that are specifically health related and aimed at guaranteeing a minimum level of services, especially in the very diffuse areas of contemporary urban "informality" (*vilas, favelas*, etc.).

Keywords Urban resilience · Flexible urban planning · Bottom up urbanism · Performative urbanism · Resilient management · Participatory, inclusive planning

In an attempt to build experience and activate useful interactions to promote a new model of the health-based city, we have expanded our field of investigation outside Europe with a few specific cases. Either directly or indirectly, these experiences recall Urban Healthy Design and provide, in our opinion, some initial responses to the invitation in the recent Lancet article that "...urban design should be a globally relevant public health priority" (Sallis 2016).

The first experience regards New York City in the United States, which has been involved for some years on multiple fronts to promote the health and well-being of its inhabitants with policies, plans, and projects that regard the reorganization of urban spaces, the improvement of social and working conditions in the most rundown neighbourhoods, and information to promote better lifestyles.

Many of these initiatives, promoted by public and private institutions, use guides and manuals that orient design and encourage the virtuous, responsible behaviour

of the local population. The result is support for the much-cited need for a renewed alliance between city design and community empowerment in the name of health and well-being for all.

In 2006, the New York City Department of Health and Mental Hygiene promoted a close collaboration with the American Institute of Architects New York Chapter (AIANY). One product of this collaboration was “The Active Design Guidelines” (NYC 2010). This guide, which is accompanied by more detailed documents, offers architects and urban planners a manual of strategies to create healthier buildings, streets, and urban spaces based on the latest academic research and best practices in the sector. In particular, these strategies refer to:

- urban design strategies for creating neighbourhoods, streets, and outdoor spaces that encourage walking, bicycling, active transportation, and recreation;
- design strategies to promote active lifestyles through the placement and design of stairs, elevators, and indoor and outdoor spaces;
- discussion of synergies between active and sustainable design initiatives such as LEED¹ and PlaNYC.²

The Active Design Guidelines are a fruitful example of breaking down disciplinary silos in terms of health, since they were developed with the partnership of twelve city departments, university instructors, and the AIANY, to name just a few. These active design guidelines were incorporated into the design interventions established by the City with reference to the following main elements:

- developing and maintaining mixed land use in city neighbourhoods;
- improving access to transit and transit facilities;
- improving access to plazas, parks, open spaces, and recreational facilities, and designing these spaces to maximize their active use where appropriate;
- improving access to full-service grocery stores and fresh produce;
- designing accessible, pedestrian-friendly streets with high connectivity, traffic-calming features, landscaping, lighting, benches, and water fountains;
- facilitating bicycling as a means of recreation and transportation by developing continuous bicycle networks and incorporating infrastructure such as safe indoor and outdoor bicycle parking.

In 2013, this guide was supported with a detailed document, “Active Design. Shaping the sidewalk experience”. Some of the principles contained therein seem to be inspired by good common sense: a well-designed sidewalk can favour pedestrian traffic, or well-lit spaces create safety. Other principles are not as expected, because they refer to psychological/intuitive principles that are implemented to increase the probability that residents choose the healthier option when using the city. The guide provides particular indications about what makes a route distinguishable, recognizable, and memorable and what makes it functional in relation to the size and

¹LEED is a certification program that can be applied to any type of building (both residential and commercial). It concerns the entire lifecycle of the building, from its design through to construction.

²PlaNYC is a comprehensive sustainability plan for New York City.

proportion of human beings, the speed at which they walk, and the way in which they can see or perceive objects and activities. These indicators aim to provide tools to help politicians, designers, and citizens to support the choice of pedestrianization through the sharing of knowledge and projects (NYC 2013a). Another supporting document is the *Community Guide* (NYC 2013b). This guide is aimed directly at local communities and focuses on five aspects: active transport, active recreational activities, active buildings, green spaces and nature, and food and healthy beverages. Each section describes how the built environment can promote physical activity every day and how design can promote physical and mental health, social and economic vitality, and environmental sustainability. The guide orients citizens in intervening in neighbourhoods and assuming responsibility. The section related to transport, for example, develops ideas on how to make neighbourhoods more pedestrian friendly and provides information on how to undertake a series of initiatives, including: requesting a CityBench, pursuing the removal of graffiti, adopting a waste bin, or working with the local city council to request a slow zone. The approaches presented in this guide, which come from documented experiences and the object of interactive workshops, can be replicated by other communities in different quarters.

Another initiative launched by the City is the “NYC Plaza Program” (NYC 2016), directed by the Department of Transportation, which aims to transform underused street space into neighbourhood services through partnerships with local communities and non-profit organizations. The program, which began in 2008, has created 22 new public spaces for New Yorkers. Mostly temporary materials are used because the creation times are short and the rules for financing are more flexible, allowing community members to take advantage of them as quickly as possible.

The experience in New York is marked by numerous interventions promoted and financed by private foundations that regard both interventions on physical spaces in the most degraded areas and the creation of work, education, safety opportunities, etc.

The New York State Health Foundation (*NYSHealth*), a private, state-wide foundation, is dedicated to improving the health of all New Yorkers, with the “Healthy Neighborhoods Fund Initiative”. This program is proposed to help New York State communities become healthier and more active places. The foundation has invested \$2 million over two years to support six communities in the State of New York in their efforts to increase access to affordable healthy food; improving the safety of living spaces; and educating children and adults about healthy lifestyles.

Another foundation, the New York Community Trust (The Trust) has joined NYSHealth in a complementary initiative “The South Bronx Healthy and Livable Neighborhoods”. The South Bronx is one of the poorest and least healthy communities in the United States. The program aims to improve the health and quality of life of the community by: expanding the availability of fresh, healthy, affordable food; creating safe streets, parks, and other public spaces conducive to physical activity; and improving job opportunities and income security for individuals and families, etc.

Another initiative from a non-profit community-development financial institution called Local Initiatives Support Corporation (LISC) instead aims to help community

residents transform distressed neighbourhoods into healthy and sustainable communities. In particular, NYC’s “Green and Healthy Neighborhoods Initiative” seeks to create healthier, more energy-efficient and environmentally sustainable housing and communities. This initiative, initially developed in response to rising energy and water costs, has grown over time into a comprehensive approach to developing sustainable communities by promoting a series of activities:

- providing opportunities to increase workforce skills in the green economy;
- improving residents’ health with improved indoor air quality and non-toxic cleaning products;
- increasing access to healthy food;
- supporting comprehensive neighbourhood-based greening initiatives;
- renovating community gardens and planting street trees.

Finally, one of the latest initiatives promoted by the City was launched in September 2016 by Mayor De Blasio. This is a public/private partnership aimed at improving health in twelve neighbourhoods. “Building Healthy Communities” (BHC) is a multi-agency initiative concentrated on three main objectives: increasing opportunities for physical activity, increasing access to affordable healthy food, and improving the level of public safety. BHC involves \$270 million of public investments in addition to \$12 million of private financing. The twelve neighbourhoods affected by the project are East Harlem, Brownsville, Canarsie, Mott Haven, Hunts Point, Morrisania, Bedford-Stuyvesant, Harlem Central, Corona, Flushing, Mariners Harbour, and Stapleton.

The second experience worth noting regards the city of Toronto.

In 2011, the City began intense fact-finding activities through studies and reports on how cities shape the health of their residents. The first report, “Healthy Toronto By Design” (Toronto Public Health 2011) is organized as a sort of manifesto about health and well-being for the city and promotes a vision of the city to be realized through a strategic decision-making process and careful implementation of policies and projects that respect the needs and challenges of inhabitants. The report expresses the conviction that the challenge of health and well-being in the city is undertaken through design activities, intentional investment, and the provision of infrastructures, programs, and services centred on health. The report, which focuses on the role that local governments have in creating healthy cities, has been followed by others, such as “The Walkable City; Creating Healthy Built Environments: Highlights of Best Practices in Toronto”, “Road to Health”, “Enabling Healthier Neighbourhoods through Land Use Planning”, “Toward Healthier Apartment Neighbourhoods”, “Creating Healthy Built Environments: Highlights of Best Practices in Toronto”, and “Green City: Why Nature Matters to Health—A Literature Review”³, etc.

Tools have also been developed to assist decision makers in making decisions in the fields of health and well-being, with the “Health and Environment Enhanced Land Use Planning Tool” (Toronto Public Health and Urban Design for Health 2013).

³All of these documents are accessible at: <http://www1.toronto.ca/wps/portal/contentonly?vgnextoid=e752105d4cff1410VgnVCM10000071d60f89RCRD>.

This software program helps policy and decision-makers understand how different approaches to neighbourhood design might impact health-related outcomes such as physical activity levels, body weight, and greenhouse gas emissions. A technical report synthesizes information on the development of the tool and the results of pilot testing.

The City has also developed a guide—“Active City, Designing for Health” (Toronto Public Health et al. 2014)—focused on the city’s physical built environment to create healthy places that encourage active living for all. The Guide outlines design principles to guide changes to neighbourhoods, streets, and buildings that allow people of all ages and abilities to incorporate physical activity into their daily routines without extra costs for physical exercise.

The guide outlines ten principles based on an active city and identifies good practices for each: “1. An Active City shapes the built environment to promote opportunities for active living; 2. An Active City has a diverse mix of land uses at the local scale; 3. An Active City has densities that support the provision of local services, retail, facilities and transit; 4. An Active City uses public transit to extend the range of active modes of transportation; 5. An Active City has safe routes and facilities for pedestrians and cyclists; 6. An Active City has networks which connect neighbourhood, to city-wide and region-wide routes; 7. An Active City has high quality urban and suburban spaces that invite and celebrate active living; 8. An Active City has opportunities for recreational activities and parks that are designed to provide for a range of physical activities; 9. An Active City has buildings and spaces that promote and enable physical activity; 10. An Active City recognizes that all residents should have opportunities to be active in their daily lives.”

Finally, the guide establishes close links with some city policies and general and detailed urban plans promoted by the City, including: the City’s Sustainable Planning Framework; Toronto’s Zoning By-law; Toronto Official Plan’s (OP); the Toronto Walking Strategy; The City’s Traffic Calming Policy, etc. Other tools for planning and urban design address key aspects of built and public open-space design, and vibrant, attractive streets. Some of these are: the Urban Design Guidelines; the Streetscape Manual; the Bike Plan, Toronto’s Parks Plan, etc.

The examples in North America rely a lot on experimentation through close involvement with civil society, which assumes responsibility for the city’s living spaces, becoming a promoter of health-based initiatives, even from the economic point of view. Experimentation in the field is frequently accompanied by guidelines and tools charged with providing technical offices and designers with design orientations rather than rigid rules. In addition, the impression is that it is the context that guides the interventions, avoiding simplistic, ineffective generalizations. The approach taken in the United States and Canada serves as an interesting field of comparison for European cities to avoid falling into simple generalizations, especially where, for example, too much trust is placed in the HIA as a tool to validate plans and projects and not, instead, as a tool to support decision makers and their work. Great importance is placed on training technicians, politicians, and local communities to guarantee the creation of a more equitable city.

With all the differences among the situations, health and urban planning are themes also addressed by South American cities. In many cases they deal with approaches that are specifically health related and aimed at guaranteeing a minimum level of services, especially in those very diffuse areas of contemporary urban “informality” (*vilas, favelas*, etc.). Urban-planning actions that specifically interact with the determinants of health are not attended to. As also highlighted by de Leeuw and Simos (2017), the actions mostly deal with health policies to provide better services and important hospital centres, guarantee access to services for all, and/or interact with urban projects aimed at renewing and regenerating cities in terms of locating basic provisions and/or mobile health units in order to educate and raise awareness about these themes. Here, health and urban planning means primarily the right to the city, access to services, and the right to housing. If a city of the rich and a city of the poor exist, as Bernardo Secchi stated and as recalled by Patrizia Gabellini in the Preface, surely in many urban situations in the southern hemisphere this difference between the two cities is strongly accentuated and denoted by very strong contrasts resulting in numerous different variations. With regard to strategies implemented by national governments and local administrations, the intersection of health/urban planning themes occurs in some inspiring practices and in policies and specific actions that respond to the demand for resilience, intended especially in the sense of social sustainability, which, here more than elsewhere, becomes the unmentioned element of any form of a healthy and safe city.

In this sense, it is interesting to consider two documents that deal with urban policies on different scales, but which, in interscalar continuity with each other, offer directions and guidelines. These are the “International guidelines of urban and territorial planning. Toward a compendium of inspiring practices” by the United Nations Human Settlements Programme (UN-Habitat) for super-national policies, and documents relevant to the local urban-resilience strategies of three South-American cities: Medellín in Colombia, Santiago de Chile in Chile, and Porto Alegre in Brazil.

The first document, a report drafted by the United Nations Human Settlements Programme⁴ (UN-Habitat) in April 2015, represents a meaningful point of reference for urban and territorial policies as well as a political, cultural, and operational anchor of notable importance on the prospect of research and design in contemporary cities.

The formulation and implementation of integrated policies, transformation strategies for renewal and planning, managing the environment, planning the city and compact, connected regions, participatory and inclusive planning. These are the five key lessons that the document assumes as the synthesis of inspirational practices. Within these, particular importance is placed on “participatory, inclusive planning”, which centres on the question of social sustainability in all phases of planning.

In 2003, Medellín adopted a holistic paradigm for urban planning that is identified with the practice of social urbanism. Urban transformations were directed at the most marginal and problematic areas of the city in order to make them safe and

⁴See: International guidelines of urban and territorial planning. Toward a compendium of inspiring practices, United Nations Human Settlements Programme (UN-Habitat); <https://unhabitat.org/books/international-guidelines-on-urban-and-territorial-planning/>. Accessed 22 May 2017.

guarantee accessible public places by connecting these zones to the city centre, using the environmental resources present as an element of connection and integration. The specific tool allowing these transformations was the Integral Urban Project (IUP), which established a series of projects for innovative development. It sets out a series of innovative development projects capable of improving public space and urban mobility of the inhabitants in these areas. Through the IUP, Medellín has managed to articulate its plan with specific actions to favour territorial dynamism, connect territories, integrate economic activities, promote social inclusion, and contribute to the creation of peaceful quarters. Inter-neighbourhood escalators, parks, libraries, and the Metrocable are now projects known throughout the world and are none other than the public face of a process to promote a new civic culture based on reinforcing participatory tools and empowerment.

The first objective of the resilience strategy, Equitable Medellín, aims to develop a more equitable and inclusive city and region with access to opportunities for all citizens. The actions implemented in the short and medium terms mostly revolve around the education/culture factor as a tool to discourage social inequality. With regard for the objective “Safe and Peaceful”, the objective of reinforcing a more peaceful and socially cohesive society is set, promoting strategies to prevent crime and violence and engender a culture of legality.

The third objective, “Sustainable and Risk-prepared Medellín”, is of particular interest. It aims to create a sustainable city prepared for risk through greater, conscious management of the territory and infrastructures via sustainable transport, environmental planning, and appropriate management of natural resources, as well as the quality of life of its citizens. Some of the pilot projects include “Strengthening of Community Risk Management”, which aims to form a group selected from 102 local committees to manage risk in the neighbourhoods of Medellín. These committees are responsible for identifying and alerting communities about possible natural risks that can arise in order to adopt preventive measures to save human lives. The main arguments are centred on preventing catastrophes and on mitigation strategies during an event. It entails managing risks to the community, early-warning social networks, the social mapping of risk, and strategies for management during disasters.

In addition to prevention, knowledge, and information, we find meaningful pilot projects such as the one to reorganize informal settlements in hillside areas, which are at risk of landslides, and related education about how to prevent illegal housing solutions. These projects include the “Risk Knowledge and Reduction Program” (*Programa de Conocimiento y Reducción del Riesgo de Desastres*, CRRP), the Resilience Laboratory, “Risk Assurance and Transfer for Resilient Cities”, the “Pilot Project for Preventative Resettlement of Land with Unmitigable Risk”, the “Our River” project, and the strengthening of the Early-Warning Environmental System (*Sistema de Alerta Temprana*, SIATA). These projects address the theme of health from the viewpoint of securing the territory with respect to its endogenous characteristics and phenomena due to climate change.

Finally, the fourth objective of the resilience strategy, “Well-informed and engaged Medellín” means promoting a well-informed city through better access to information and data management in order to facilitate the analysis and transfer of knowledge

for strategic planning and effective governance of the city. This is an important point because the pilot projects are the natural continuation of an innovative idea of community participation. In fact, the Agency for the Management and Integration of Information, the Communication Strategy “Medellin’s Story Told Through the Transformation of the Region”, the Think Tank for Creating Indicators, the Network of Social Observatories for Tracking Social Impact, and My Medellín were designed to monitor a participatory process that concludes with the Digital Strategy for Citizen Participation.

In the same way, Santiago de Chile organizes its resilience strategy, “Santiago Humano & Resiliente” [Humane and Resilient Santiago], on four principles that place humans at the centre of policies: *a human approach* that focuses the discussion on city inhabitants and prioritizes the quality of life in the city; *a participatory city* capable of integrating the different points of view and different desires of society representatives through effective tools for participation; *territorial intelligence*, which knows how to respond to the needs of the city and bases its strategies on concrete questions to answer; and *right to the city*, intended as access for all to the services and advantages that the city offers in order to promote equity, not only among the different social classes, but beyond the city borders to the numerous municipalities in the metropolitan region.

The resilience strategy is organized around these four principles and sets out six fundamental topics, 21 objectives, and 75 plans, programs, and specific projects to pursue the established goals. The six topics are: (a) urban mobility: prioritizing public transport and biking/walking over private transport by providing a reliable system of integrated, safe, sustainable, and smart mobility; (b) environment: promoting a city that grows and develops in harmony with the environment and uses natural resources responsibly and equitably, providing access for all inhabitants by creating green belts and quality urban parks; (c) safety: a city that promotes peaceful coexistence among its inhabitants and understands the multiple offenses and counters with coordinated, strategic, smart collaboration; (d) risk management: providing communities with knowledge and tools to be prepared for future disasters and therefore capable of reducing damage and the associated impacts; (e) economic development: promoting an equitable city that activates new opportunities within an ecosystem of innovation based on the circular economy, even on the regional scale; and (f) social equity: decreasing social gaps, inequality, and territorial fragmentation and guaranteeing access to services and opportunities for all.

The topics are made explicit in plans and projects, some already underway and others still at the proposal level. As already mentioned, these are projects that in many cases begin with sectoral governance and intersect the different components of managing and transforming the city and territory. The projects for mobility aimed at integrating and connecting parts of the city primarily respond to the demand for lower CO₂ emissions. They also answer the call for connections among different public transport services and biking/walking paths, intersecting parks and green areas distributed throughout the city, and making accessibility to places for relaxation, leisure, and community sports quick and safe. Within the overall vision, 75 projects have been established, including:

- Proyecto de modernización tecnológica de la gestión integrada de la movilidad urbana [Project to modernize the integrated management of urban mobility]
- Proyecto circunvalación intermedia para transporte público [Intermediate ring road for public transport]
- Proyecto Nueva Alameda Providencia: remodelación del eje estructurante de la ciudad [New Alameda Measure: reorganizing the structural axis of the city]
- Plan Santiago Pedaleable [Bikeable Santiago Plan]
- Plan Santiago Camina [Santiago Walks Plan]
- Programa Regional de Cambio Climático [Regional Climate Change Program]
- Plan de Monitoreo Ambiental de Cuencas [Watershed Environmental Monitoring Plan]
- Plan de construcción de nuevos Parques Urbanos [Plan to Build New Urban Parks]
- Centro tecnológico de gestión de residuos [Technological Centre for Waste Management]
- Plan de descontaminación atmosférica Santiago Respira [Santiago Breathes Plan for Atmospheric Decontamination]
- Zona verde para el transporte [Green Zone for Transport]
- Programa Metropolitano de Consumo Responsable [Metropolitan Plan for Responsible Use]
- Programa de Protección de la Biodiversidad y el Ecosistema Hídrico [Program to Protect Biodiversity and the Water-based Ecosystem]
- Consejos comunales de seguridad [City Safety Recommendations]
- Plan de Recuperación sitios eriazos y espacios públicos deteriorados [Plan to Recover Vacant Sites and Deteriorated Public Spaces]
- Plan Red de Teleprotección Integrada [Plan for Integrated Safety Camera Network]
- Programa de participación ciudadana y coproducción de seguridad [Program for Citizen Participation and Safety Production]
- Plataforma de monitoreo de redes sociales en emergencias [Platform for Monitoring Social Networks in Emergencies]
- Centro integrado de la gestión de emergencias y desastres [Integrated Center for Emergency and Disaster Management]
- Programa de Riesgo Sísmico [Seismic Risk Program]
- Programa de Riesgo Hidrometeorológico [Rain and Weather Risk Program]
- Plan de Fortalecimiento Comunitario ante Multiamenaza en Pie-de-monte [Plan for Community Strengthening before Foothill Threats]
- Coordinadora regional de voluntariado ante emergencias [Regional coordination of emergency volunteers]
- Programa de educación para gestión de Riesgos [Risk-Management Education Program].

As only some of the proposals initiated, these demonstrate the 360°-involvement of the administration in making Santiago resilient, healthy, and safe. In this inter-sector framework, the contact between urban planning and health occurs around the theme of social sustainability. The involvement of citizens as co-producers of the city and

their relative empowerment is fundamental and constitutes the key to reading all of the actions promoted.

Finally, beyond what is mentioned above, we mention the experience of Porto Alegre (Brazil), which, with the adoption of the strategic document *Desafio Porto Alegre Resiliente* [Resilient Porto Alegre Challenge] (2016), is predicted to reach the objective of a Resilient City in 2022. The document seems to be perfectly organized around the key lesson learnt from “participatory, inclusive planning” (UN-Habitat guidelines), and opens a new season in addressing the different economic junctions of the country and the current political crisis. This challenge is based on awareness and the mobilization and empowerment of all segments of civil society (citizens, communities, governments, businesses, social organizations, universities) in order to work together actively to resolve criticalities and render the city more resilient, harmonious, sustainable, and safe. The aim is to “help” the city best adapt to the impacts and pressures of today’s world and to transform them into opportunities for growth. The concept of *urban resilience*, intended as the capacity of individuals, communities, or cities to survive, adapt, and grow, increasingly centres on the question of humans and citizens, and in this sense, is actively involved in all phases of the planning process. In this case as well, responsibility and empowerment are innovations with respect to the past and the transverseness of objectives and actions serves as the link between health and urban planning.

The health/urban planning intersection can be traced within the six large objectives of the strategy, which proposes a city with a (a) dynamic, innovative ecosystem, (b) culture of peace, (c) risk prevention, (d) quality mobility, (e) participatory budget, and (f) resilient management. With respect to the last area, it seems evident how the previous experience with the management model becomes the starting point for the new objectives. The technical/management tool of the participatory budget is reworked and adapted so that it contributes to increasing the resilience index of the city and can promote a culture of resilience in all actions and interventions. Beyond the inter-sector projects involving the environment, mobility, and risk management, we cite two that can be defined as “a break” and “in continuity” with the past and which mark a turn in urban policies. Among the first, one can refer to the new role played by rural areas of the capital. These are no longer viewed as reserving building rights for the construction market, but, at least in the inspiring principles of the strategic document, represent opportunities, economic incubators for youths, biodiversity and nature, and investment for family agriculture, which triggers a circular process that is also able to address the question of urban poverty. Among ongoing projects, reference can be made first to the project to revitalize the Fourth District. This area is proposed as an upcoming centre between a healthy hub and creative activities developed from below. It is an experimental, innovative centre for rethinking the uses and means of activation, where the temporariness of some events has suggested including grass-roots actions and uses according to a principle of *mending*, going beyond the concept of regeneration. This is an innovative project where health and creativity are associated to transform a place and an entire urban area.

It seems clear how these South American cases also address a dual level of intervention—strategic and local—where the strategy guides local actions, which can

occur even through forms of tactical urbanism, reinforcing the role of communities in the process of change. This can be a further element of interest for European cities, which are often blocked within consolidated paths and where innovation occurs in an organized, strategic way that is less open to welcoming experimental forms such as tactical urbanism, social urbanism, performative urbanism, etc. According to the most recent experimentation of small-scale bottom-up urban planning, questions related to social sustainability are in many cases the bearers of innovation outside conventional urban planning and design paths.

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