



The Royal Danish Academy of Fine Arts  
Schools of Architecture, Design and Conservation  
School of Architecture

Philip de Langes Allé 10 Tel. +45 4170 1500  
DK-1435 Copenhagen K Fax +45 3268 6111  
Denmark info@kadk.dk

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# THE CITY OF WELLBEING

## ARCHITECTURE AND URBAN ENVIRONMENTS THAT PROMOTE THE GOOD LIFE

SYMPOSIUM AUGUST 29<sup>TH</sup> 2018

### Background

According to the World Health Organization (WHO), the Regional Office for Europe, and the European Commission, several European cities are currently experiencing, among other things, an increase in the population as well as a densification of the urban environment.<sup>1</sup> The dense city goes against the modernists' views on urban planning, where they spread the city to the suburbs as a model to avoid disease and health-related conditions. In this strategy, health was closely linked to architecture and the distribution of public spaces. The paradox is that by spreading the city, at the same time they increased private cars and thus air pollution.<sup>2</sup> Moreover, the larger distances hampered the possibilities of using the bike, running or walking.

Urban design - architecture, landscape and infrastructure - is important for this development, both in terms of physical activity and transport, but also in reducing social and spatial inequality, as the WHO points to.<sup>3</sup> At the same time there is a growing recognition that new, interdisciplinary approaches to the arrangement and design of urban spaces for physical activity have a much more realistic chance to reach the least active groups than e.g. information-based efforts.<sup>4</sup>

The question is whether we today in order to reduce diseases or cure them through the built environment, rather should work towards new strategies aimed at *promoting the good life*? That modern urban planning, architecture and landscape art not only focus on a narrow classical concept of health, but more aim at promoting the overall well-being of the whole human being - *The City of Wellbeing*?

### Setting the Scene

The European city is facing many challenges, of which only a few can be displayed at the symposium: Densification, segregation of specific population groups by age, social and economic ability, a growing number of seniors, health inequality and physical inactivity.

New research has shown that densification of cities leads to both shorter distances between work, home and hobbies and in that way may increase daily exercise.<sup>5</sup> But that it can also cause economic inequality as price increases on housing at the center may mean segregation of population groups, as only the more prosperous people have the opportunity to settle here.<sup>6</sup>

This inequality is also reflected on other levels, for example, in the EU population's health in special low income areas.<sup>7</sup> In Copenhagen Sydhavn's neighborhood residents die on average seven years earlier than they do in Gentofte north of the capital. This inequality, which has been called "The Scandinavian Welfare Paradox of Health", typically has its origins in short education and thus lower pay.<sup>8</sup> Recent research from Denmark shows that the shorter the education you have, the less active you are.<sup>9</sup> Low income neighborhoods are at the same time also those parts of the cities, where there are typically fewer attractive urban spaces and less security, among other things due to the fact that they are former working class areas.



The future will also offer an increasing number of seniors 65+ in the cities. According to Arup et al. (2015), 70% of the world's population is expected to live in cities by 2050, and the number of people over 65 is expected to triple to 2 billion, which corresponds to 22% of the total population.<sup>10</sup> By 2050, and for the first time in human history, the number of elderly will be greater than the number of children under the age of 15. China, India and the United States will each have more than 100 million people over 65 years old. With the senior citizens as a strongly increasing proportion of the population over the coming years, it must be borne in mind that at the city level there should be greater focus on accessibility as well as increased awareness of the development of special housing for the elderly. *The City of Wellbeing* is thus a place that encourages everyday mobility for both elderly and families with children.

### **Purpose**

*The City of Wellbeing* will initially point out some trends that promote or hinder physical as social activity and their effect on space in the modern city. Then it is the symposium's intention to inspire with examples, which promotes the good life and opportunities therein across ongoing research, development projects and practices in order to challenge the prevailing thinking.

### **Target groups and about the lecturers**

The symposium will contribute to the education and inspiration of among other professionals in municipalities, drawing offices, higher education, planners, investors and decision makers as a whole. The lecturers are leading researchers and practitioners from Canada, Europe and Denmark.

### **Context**

The symposium is part of the international research network *Active Cities Network* (ACN) and the Danish network *Activity- and health-promoting Physical Environments Network* (APEN), a cross-disciplinary research collaboration between the Royal Danish Academy of Fine Arts, Architecture, Design and Conservation, University of Copenhagen, Landscape Architecture and Planning, as well as the University of Southern Denmark, Active Living

### **Time and place**

Wednesday, August 29, 2018, Auditorium 6 at the Royal Danish Academy of Fine Arts, Schools of Architecture, Design and Conservation, Philip de Langes Allé 10, 1435 Copenhagen K, Denmark.

### **Registration and price**

Symposium, lunch and coffee are free. In case of no-show, an invoice of DKK 375,- will be sent. The symposium can only accommodate up to 90 participants.

### **Acknowledgments**

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Det Kongelige Danske Kunstakademis Skoler  
for Arkitektur, Design og Konservering

## Programme

### WELCOME

09:00 **Associate Professor René Kural, KADK.** Welcome and introduction to the symposium's topics.

### CONSUMERATION AND INEQUALITY

09:05 **Giovanna Borasi, Chief Curator of the Canadian Centre for Architecture (CCA) in Montreal, Quebec, Canada.** *Imperfect Health: the urgent "demedicalization" of architecture.*

09:40 **PhD Elena Dorato, University of Ferrara.** *The Elderly Perspective. Towards an Active, Inclusive City.*

10:15 **Professor Deane Simpson, KADK.** *Young-Old and the intergenerational city.*

10:50 **City Architect Tina Saaby, City of Copenhagen.** *Public versus private interests.*

11:25 Break out sessions: Talk to the lecturer you want

### 12:00 LUNCH

### HEALING ENVIRONMENTS – FROM CURE TO CARE

13:00 **Associate professor Astrid Pernille Jespersen, Copenhagen Centre for Health Research in the Humanities and Center for Healthy Aging.** *Biking in the City – results and insights from the GO-ACTIWE project.*

13:30 **Post Doctoral Fellow Kamilla Nørtoft/PhD student Sidse Carroll, KADK.** *Move the neighborhood – with seniors.*

14:00 **Associate Professor Bettina Lamm, Post Doctoral Fellow Anne Wagner, PhD student Laura Winge, KU.** *Move the neighborhood - with children.*

### 14:30 COFFEE BREAK

15:00 **Professor Jens Troelsen, SDU.** *Physical activity in relation to urban environments in 14 cities worldwide: a cross sectional study.*

15:30 **Louise Vogel Kielgast, Gehl Architects.** *Cities for active people.*

16:00 **Professor Bent Egberg Mikkelsen, AAU.** *Growing capacities - the Green Campus Community program revisited.*

16:30-17:00 Break out sessions: Talk to the lecturer you want.



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- <sup>1</sup> World Health Organization, Regional Office for Europe & European Commission. *Towards More Physical Activity in Cities. Transforming public spaces to promote physical activity*. World Health Organization, Regional Office for Europe & European Commission, 2017.
- <sup>2</sup> Ratti, C., Claudel, M. *The City of Tomorrow: Sensors, Networks, Hackers, and the Future of Urban Life*. Yale University Press, 2016.
- <sup>3</sup> WHO Regional Office for Europe (2013) *Physical Activity Promotion in Socially Disadvantaged Groups: Principles for Action*. Copenhagen, WHO Regional Office for Europe.
- <sup>4</sup> Faskunger, J. (2008). *Samhällsplanering för ett aktivt liv – fysisk aktivitet, byggd miljö och folkhälsa*. Statens Folkhälsoinstitut.
- Faskunger, J. (2007). *Den byggda miljöns påverkan på fysisk aktivitet*. Statens Folkhälsoinstitut.
- <sup>5</sup> Sallis J.F, Cerin E., et al. Physical activity in relation to urban environments in 14 cities worldwide: a cross-sectional study. *The Lancet*, 2016. [http://dx.doi.org/10.1016/S0140-6736\(15\)01284-2](http://dx.doi.org/10.1016/S0140-6736(15)01284-2).
- <sup>6</sup> World Health Organization, Regional Office for Europe & European Commission. *Towards More Physical Activity in Cities. Transforming public spaces to promote physical activity*. World Health Organization, Regional Office for Europe & European Commission, 2017.
- <sup>7</sup> European Union. *Health inequalities in the EU – Final report of a consortium*. Consortium lead: Sir Michael Marmot. European Union 2013.
- <sup>8</sup> Diderichsen, F, Andersen I, Manuel C. Sundhedsstyrelsen. *Ulighed i sundhed – årsager og indsatser*. København: Sundhedsstyrelsen 2011, p. 16.
- <sup>9</sup> Pilgaard, M., Rask, S. *Danskernes motions- og sportsvaner 2016*. Idrættens Analyseinstitut, 2016.
- <sup>10</sup> Arup, Help Age International, Intel, Systematica. *Shaping Ageing Cities. 10 European case studies*. Arup, 2015.