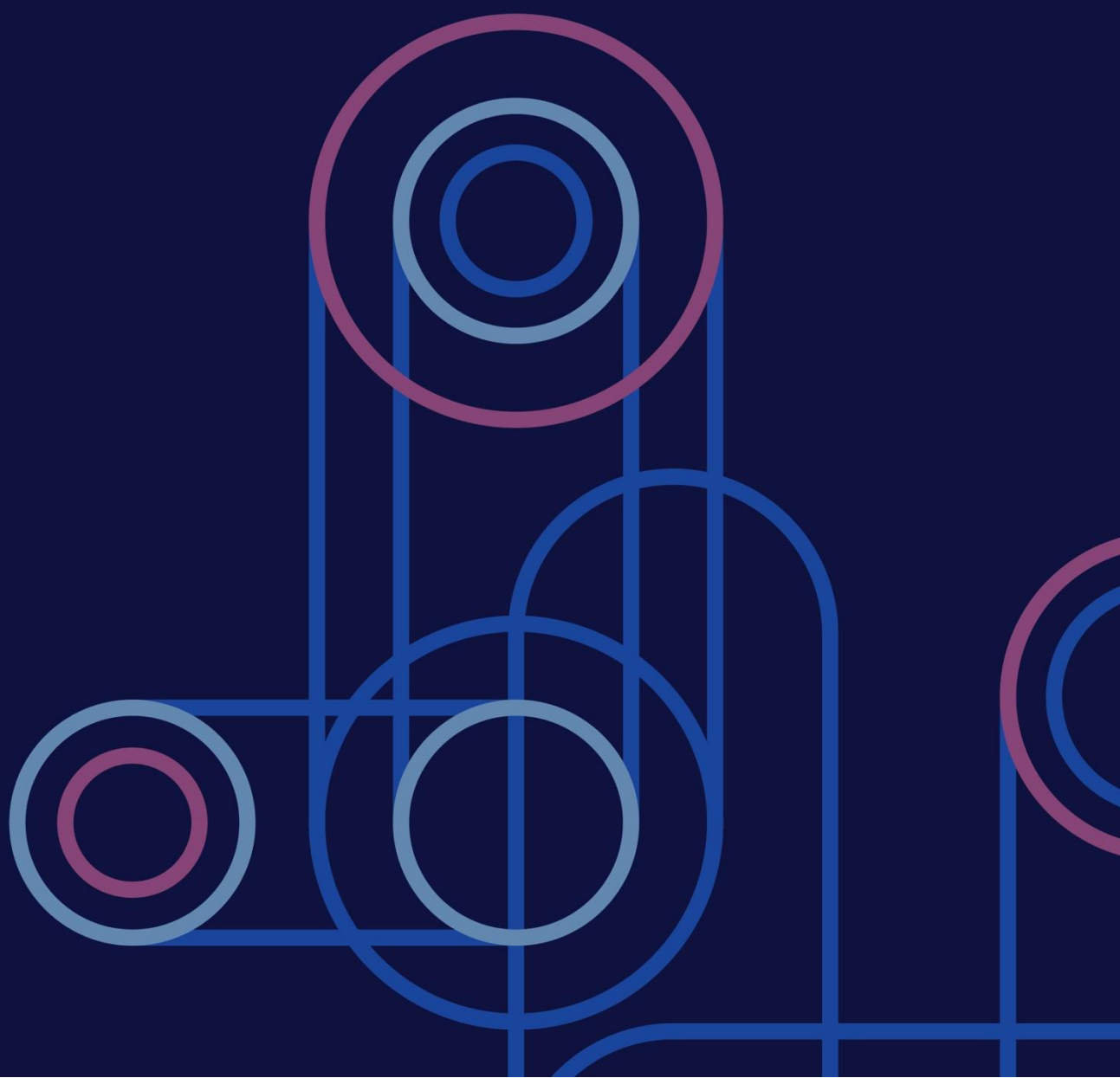


CASE STUDY

*City of Cape Town: a localised approach to urban
health*

2025



Basic information	
WHO Region	AFRO
City or Country	Cape Town, South Africa
Timeline	2022-2027 (ongoing)
Type of intervention	Policy
Primary level of implementation	City
Primary sectors involved	Water; sanitation; housing; transport; energy; environmental management; disaster management; health
Primary health outcomes or challenges	Health equity; noncommunicable diseases; infectious diseases; injuries; mental health

Case description

The COVID-19 pandemic exposed the depth of health inequities in Cape Town, highlighting how poverty, environmental conditions and service disparities shape vulnerability to disease. In response, the City recognized the need for a coordinated and strategic approach to improving urban health and wellbeing within its local mandates. The effort built upon existing municipal capacities and international experience, aiming to embed health as a cross-cutting outcome of urban policy rather than an isolated sectoral goal.

In 2022, Cape Town formally established an Integrated Urban Health Programme (UHP) within its Integrated Development Plan (IDP) for 2022–2027, providing an explicit political mandate for urban health. By including the programme in the city’s primary strategic document, urban health became an institutional priority backed by governance structures and accountability mechanisms. The programme is co-led by two directorates—Community Services and Health and Future Planning and Resilience—and engages multiple departments and external partners across housing, water, sanitation, energy, transport, environmental management, and disaster risk reduction.

A central achievement has been development of a conceptual framework for urban health monitoring, which links city functions to health outcomes and incorporates a locally relevant set of indicators for tracking social, economic and environmental determinants of health. The framework was built through an extensive internal consultative process supported by a literature review and adaptation of existing city



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performance indicators. Its design accounts for the complexity of Cape Town's mandates and capacities. By mapping how municipal actions influence health, the framework clarifies institutional responsibilities and provides an evidence base for policy and programme development.

Implementation is structured in five phases across the IDP cycle. The first two years (2021–2023) focused on development, assessment and analysis; subsequent years will translate findings into action, launch systematic monitoring, and culminate in evaluation and institutionalization. To guide this process, a steering committee has been established, charged with advancing programme governance and shaping a dedicated Urban Health Unit responsible for data generation, research, advocacy and policy review.

Political and managerial support have been important enablers. Leadership commitment from executive directors of both lead departments, together with momentum generated by pandemic-era collaboration and partnerships – such as with the Partnership for Healthy Cities – created favourable conditions for progress. Financial resources were allocated to develop the monitoring framework and indicator set, while project leads from diverse departments contributed additional effort to sustain the process.

At the same time, the transversal nature of the initiative presented challenges. While environmental health is a core mandate of the City, there is still limited understanding among departments of their roles in influencing health required active education and advocacy. Ambiguities in governance and reporting lines initially slowed coordination, and some officials questioned the programme's motives or relevance amid high political emphasis on economic growth. Nonetheless, by situating health within the city's strategic architecture, the initiative has begun to reframe health as integral to Cape Town's development agenda.

As implementation advances through 2027, the Urban Health Programme aims to operationalize the monitoring framework, refine indicators through iterative assessment, and build capacity for integrated decision-making. The initiative's ultimate goal is to institutionalize a coherent, city-wide approach that connects evidence, governance, and participation to improve health and equity for all residents of Cape Town.

Strategic Highlight

Cape Town's experience demonstrates how a political mandate can anchor an integrated strategy for urban health within existing governance systems. By embedding the Urban Health Programme in the city's IDP – the highest-level municipal planning instrument – the City ensured that health became a shared governmental responsibility linked to long-term development priorities. This step transformed health from a sectoral concern into a transversal policy commitment, giving it visibility in political processes, resource allocation and interdepartmental coordination.

The approach taken by Cape Town is integrative – drawing together mandates across planning, infrastructure and social services – and rooted in local realities and functions, and recognizes that determinants of health cut across institutional boundaries. The creation of a monitoring framework translates these principles into practical governance tools, enabling the city to track progress, adapt interventions and make informed decisions.

The programme also illustrates how formal political recognition can help overcome structural barriers. Historically, municipal health functions in South Africa have been fragmented and under-resourced. By articulating health outcomes as dependent on all service areas – from housing and water to energy and transport – the Cape Town IDP provides both legitimacy and a coordination platform for action. Leadership endorsement and interdepartmental collaboration have been vital in maintaining continuity through political cycles.

For decision-makers elsewhere, Cape Town's model underscores the value of integrating urban health into mainstream policy instruments such as development plans or climate and resilience strategies. Establishing a clear political mandate can align diverse actors around shared objectives, mobilize resources, and ensure that monitoring systems capture the complexity of urban determinants. As the city progresses toward full institutionalization of its Urban Health Unit, its experience offers a transferable pathway for embedding urban health within local governance frameworks to advance equity, sustainability and wellbeing.

Further Information

- [City aims for health equity through Urban Health Programme](#)
- [Cape Town's Integrated Development Plan \(IDP\) 2022 - 2027](#)
- [City of Cape Town Five-Year Integrated Development Plan](#)