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Sustainability versus Resilience:
What is the global urban future and can we plan for change?

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When communities begin their planning processes, groups from the community often get together and begin talking about change in terms of what needs to change, and how they are going to make those changes...Once community members are excited about what they have to work with, they can begin to think about an even brighter future...¹

As a scholar of comparative urban development and governance in cities in the global north and south, and a community development practitioner and educator working with New York's urban populations (with origins in both the global south and the north), I have been struck at both an abstract and concrete level by the challenges and the opportunities that globalization poses for people living in urban areas. I view globalization in the abstract, as a process of increased interdependency, connectivity and mobility – of people, resources, ideas, and capital. At a concrete level I see globalization as producing rapid, often unpredictable, uncontrollable economic, political, social and environmental pressures affecting communities (geographic, interest-based, virtual and transnational).

Place-based communities, for example, experience the effects of the influx of new populations and mobile capital in relationship to the availability and affordability of housing, jobs, education and services. The interdependency of markets and mobility of capital can have

immediate impacts on the agendas of interest-based communities. The transmission of ideas and information virtually can generate movements and political action on an international as well as a local scale overnight. A natural disaster in one place creates ripples in the lives of people in distant locations. Transnational migrants can live lives in multiple communities simultaneously, creating situations in which changes in the north can leave families in cities in the south with no food on the table. How can communities manage growth, development and governance in what can only be described as increasingly turbulent and changeable times?

While globalization processes offer the possibility of a wondrous vibrancy in the urban arena, as new populations mix with the old, as ideas commingle and produce innovation, as new forms of governance are tried, and new models of development are pursued, these processes can also generate conflicts and unrest that threaten the urban environment – particularly during periods of resource scarcity, or at moments of crisis. Given these shared urban realities, I would suggest that the promises can only be realized so long as there are salient mechanisms in place to hear these new voices, so long as the political will exists to enable equitable change, so long as we develop institutions with the capacity to transcend scalar boundaries, and so long as stakeholders are able to accept that our urban future can no longer be based on monolithic – one size fits all models, but rather on crafting systems that are adaptable.

I would suggest that the lessons (policy and practice) learned from community development efforts globally, reveal that urban resilience may be most achievable through communities operating as both as agenda setters and implementation partners. However, given the scope and scale of changes, and the inevitable resource needs that are likely to be required,

models of resilience also require the support of governments, intergovernmental organizations and non-governmental organizations.

It is with this in mind that I approached the questions posed by the Woodrow Wilson Center and the Fetzer Institute on “community resilience” – and it is with this in mind that I ask you to consider not the one best way, but rather to join in a discussion of lessons learned from community based development efforts that might enhance our ability to adapt in light of globalization, and to consider the critical need today for institutions and policies that enable flexibility and adaptability, perhaps, even more so, than sustainability.

In my own research on cities, globalization and governance, I am increasingly pulled away from monolithic top-down models of development based on externally defined standards to understanding communities needs, and drawn instead to approaches which start at the bottom, with an emphasis on building upon the assets and capacities of communities. In my understanding of community, I find myself pulling away from traditional views of the community as purely place bound, to ones that recognize the importance of networks, and interconnections that transcend space. In my work on governing cities I find myself promoting policies that can be sensitive to difference, through the creation of multiscalar institutions that can offer the capacity for variable policy responses to the diverse needs of diverse communities. And across all of these realms I find myself looking for answers beyond the boundaries of my own academic discipline – political science – into a much wider pool of ideas in ecology, geography, sociology, planning, public health, education and the environment.

Fetzer asked us to consider the concept of “community resilience” through the lens of a variety of community development approaches including healthy cities/communities and social inclusion/exclusion.

Healthy Cities/Communities projects are community-based approaches to managing health issues. The broad goals of these projects are to bring community stakeholders to the table to address the social, economic and environmental determinants of health. The expectation is that the community itself would be responsible for running the projects, with the support of government.ⁱⁱ A healthy community, according to this development models, underpins the creation of economically, politically and socially sustainable community.

Social exclusion/inclusion programs are quite diverse, broadly they seek to shift the focus of social policy away from poverty as material deprivation and towards the view that poor people are poor not due solely to economic deprivation, but rather due to an inability to fully exercise social, economic and political rights. From a community development perspective, programs here are likely to vary widely depending on context, but all are likely to focus upon strategies with seek to empower and give voice to ‘excluded population.’ As with healthy cities, these programs also require linkages to the larger political system.

In what follows I will first discuss theories of sustainability as distinct from resilience. I will then explore what happens when we try to actualize those theories by consideration of: how these theories look in practice through a brief discussion of healthy cities – healthy communities projects, and social inclusion projects operating in the global North and South. Following this broad and inevitably simplified look at global practices--I will ask you to consider a surprising and

for me, unanticipated question—can sustainability stand up to the pressures exerted by globalization or is it time to jettison that notion and replace it with models premised on a pursuit of “resilience”?

1. Sustainability Versus Resilience

The concept of ‘sustainability’ has been on the agendas of environmentalists for well over three decades, emerging initially at a UN conference held in Sweden in 1972, over discussions of the relationship between the natural and social environment, and a growing concern about the importance of cultivating a globally accepted vision and set of principles for global stewardship. But it was not until the 1987 Brundtland Commission Report, “Our Common Future”, that the principle was defined: *Development that meets the needs of the present without compromising the ability of future generations to meet their own needs.* The report identified sustainable development (SD) as encompassing three interrelated elements -- environmental protection, economic growth and social equity. The report asserted that development efforts that addressed single prongs of sustainability inevitably produced ‘unsustainable’ development, evident in particular in communities in the global south.

Since that time, the concept has spread widely to communities in the global north and south. It has also been applied to efforts to conserve a much wider range of interrelated assets – economic, environmental, physical and social. The problem with the expanding definition of SD is that application in one area often had costs in another. Thus, finding a clear and appropriate balance between goals has proven to be highly problematic. A sustainable environment may in the

minds of some be unsustainable from an economic perspective; likewise, social sustainability might preclude the development of projects perceived by municipalities to be important for the development of sustainable physical infrastructure. From this perspective SD inevitably takes on a “competitive” posture so long as the goals are pursued as a zero-sum-game, and when the goal is not zero-sum, then all goals must be dampened

While environmentalists, and subsequently planners, policy makers, sociologists, political scientists, public health professionals, activists, administrators and others were busy expanding the parameters of sustainable development to their own disciplinary needs and realities, and seeking to balance these sustainability value sets, ecologists were pointing to another critical problem with the concept itself as it related to ends – or rather the ability to control ends.

C. S. Holling’s article “Resilience and Stability of Ecological Systems” published in 1973, was amongst the first to raise this red flag. He asserted that when we look at ecological systems -- organisms (plants and animals) and their environments (biological and physical) – “we are dealing with a system profoundly affected by changes external to it, and continually confronted by the unexpected, the constancy of its behavior becomes less important than the persistence of the relationships.”ⁱⁱⁱ To some degree, he saw in the language of sustainability a hidden bias towards system “equilibrium” – ‘the maintenance of a predictable world...with as little fluctuation as possible.’ In the process he points out, that this could result in a systematic loss of flexibility. Static systems he suggested may under conditions of sudden or dramatic change, lose their structural integrity – they might collapse!

In response, Hollings suggests that a more laudable goal should be resilience rather than sustainability.

The resilience framework can accommodate this shift of perspective, for it does not require a precise capacity to predict the future, but only a qualitative capacity to devise systems that can absorb and accommodate future events in whatever unexpected form they may take.^{iv}

The missing element found in the concept of “resilience” was the capacity to change.

Given our increasingly interconnected world, one in which a ripple on one side of the globe can produce profound changes on the other – I would suggest that the lessons of Hollings should be taken seriously as we begin to explore better methods through which communities in the urban arena are able to adapt. That we must begin to refocus our attention on methods to help communities develop capabilities to respond to unanticipated changes – in values, the economy, in society and in the environment. Globalization makes us more interdependent, and interdependency means that we cannot ever fully control our environment unless we choose total isolation. “While developed for communities in crisis, the idea of resilience in the community system is highly relevant to the concept of sustainable development.”^v

‘Resilience’ theory is growing in use amongst policy makers and analysts, dealing with crisis management and disaster mitigation (natural and human). I would suggest that it must now be deployed in a more overarching way to the question of how we build “resilience” in the urban world, how we plan for the un-plannable, and how we develop assets that enable populations to ride the waves rather than be pulled beneath them.

By shifting focus away from an ultimate end goal of sustainability, to an ongoing process of enhancing resilience managers, planners, council members, and residents can examine the community in its entirety, the interrelations among the various elements within a community, and how these elements collectively enhance community resilience.^{vi}

A resilience model might include the following elements:

1. Capacity to absorb (create openings for the inclusion of new -- populations, ideas, values)
2. Capacity to change (create mechanisms to allow institutional change to occur more easily)
3. Capacity to accommodate the unexpected (planning and policy frameworks that allow room for the unexpected, and that enable regular review in light of these unexpected factors)

The question, however, is can these elements be actualized in practice, can they be realized through the lens of sustainability? A quick look at two ‘sustainable’ community development programs reveals that the problems of sustainable development identified above -- conflicting goals, stasis and breakdown are very real in practice. Which leaves us with the question: can sustainable development be ‘resilient’?

2. Sustainable Community Development in Practice
 - a. Health Cities/Communities

The WHO has been at the center of many of the initiatives that can be grouped under the contemporary rubric of “healthy cities and healthy communities.” But the roots of the urban health movement can of course be dated back to the late 1600s in the United Kingdom when rodents carrying the plague infected 100,000 Londoners. Polluted water in urban centers later led to the deaths of an estimated 15,000 due to Cholera in 1849. In fact, it was health concerns that led to the creation of the Metropolitan Board of Works, London’s first municipal government.

More modern notions of “healthy cities and healthy communities” can be dated to the mid 1980s. The concept received global attention in 1985 at a conference titled “Beyond Healthcare” held in Toronto, Canada, and was the organizing theme of a conference held in Ottawa in 1986. While it is not my intent to offer a detailed history of the movement, the dates are important in building an awareness of the difference in approach taken in the 1980s, from earlier efforts. The 1980s efforts moved away from issue specific approaches to narrow aspects of urban health, and began to look at health comprehensively. Lack of resources meant a shift away from funding streams exclusively controlled by governments to partnerships between government, NGOs and communities. By the 1980s, community participation was often legally mandated. Thus the healthy cities movement that emerged in the 1980s was a significantly different from its predecessors.

The contemporary application of the idea to policy and programming came in 1986, in European cities in the global north. The first United States initiative can be dated to 1994 with Healthy Boston, and has subsequently been promoted in localities across the US, with California being the first state to apply the program at a state level. Then, in 1995 projects were initiated in cities in the global south (Bangladesh, Egypt, Tanzania, Nicaragua and Pakistan were the early

adopters). Today there are well over 4,000 initiatives emerging directly from the WHO and many more that have been adopted based upon the principles developed therein.

Healthy Cities (HC) was premised on the idea that ‘good health’ in the urban world was not simply an individual challenge, and that solutions often required thinking outside traditional of medical or clinical frameworks. The concept of city health reflected an effort to build awareness of the relationship between the built environment and health.

While medical care can prolong survival and improve prognosis after some serious diseases, more important for the health of the population as a whole are the social and economic conditions that make people ill and in need of medical care in the first place.^{vii}

What was central to the concept was the recognition of the importance of place, rather than behavior as the starting ground for understanding the forces shaping healthy communities. At the center of the Healthy Cities movement was an effort to put health on the policy and planning agendas of cities. Projects promoted by the World Health Organization for example, required a partnership between local governments, community based organizations, and NGOs, who in concert were expected to identify priority health issues, promote awareness and build ongoing collaboration among stakeholders.

The major tasks associated with a healthy city initiative include establishing an intersectoral committee or coalition; conducting visioning, assessment, and planning activities; engaging in good models of practice that promote public participation and creative collaboration;

assessing progress with the goal of continuous quality improvement; and creating linkages with other participating cities.^{viii}

The underlying sustainability agenda in Healthy Cities revolved around efforts to create ongoing collaboration among stakeholders, to meet both the current and future health needs of the community. The explicit sustainability agenda is the goal of creating “an ecosystem which is stable now and sustainable in the long term.”^{ix}

The method of using community stakeholders however, seems to have encountered some roadblocks — particularly under conditions of rapid, ongoing and at time unanticipated change. HC is premised on anticipating change, with partner collaboration revolving around a set of shared objectives. The efforts to put these issues on government agendas is of course critical, in that the long term goal is in essence to institutionalize health cities policies, to encourage that they are sustainable over time. The problem that researchers are finding in some of the European cases is that this process may instead become mired in preservation, when professionals rather than community interests dominate stakeholder groups, and the agendas they promote revolve around of a set of pre-defined professional objectives that reinforce the status quo rather than facilitating adaptability.

Cross-disciplinary collaborations around healthy cities [in Europe] have been a challenge due to divergence in professional practices, organizational cultures and politics. In essence, in the search for a more sustainable community health initiative becomes more rhetoric than reality, while the reality is status quo.^x

Another challenge that the HC programs faced relates to their ability to absorb new voices and ideas, and incorporate those voices into new understandings and policies regarding a healthy city, both at a community level and within government. There are currently some 1200 HC programs, operating in 30 countries. The European healthy cities initiative “defines a healthy city not as a city that is now healthy, with standard medical statistics to prove it. But as one that is health aware...the program [in Europe] is about changing the ways in which cities think about, understand and make decisions about health.”^{xii} Hancock points out, for example, that what characterized these projects was that they were utilized primarily in large cities with populations in excess of 100,000. As a result, these projects had difficulty in mobilizing high levels of citizen participation. Cooperation across geographic scales was difficult. Success was also conditioned by the local economic context, wealthier communities could apply more resources in support of the projects than poorer communities, and similarly communities that lacked long term planning traditions, were less successful. In the successful projects, it was found that there was:

Strong political support, effective leadership, broad community control, high visibility, strategic orientation, adequate and appropriate resources, sound project administration, effective committees, strong community participation, cooperation between sectors, and political and managerial accountability^{xii}

Healthy Cities Programs in the Global South encountered other challenges. Here researchers found that often project success was contingent on the existence of political stability of the system, which allowed political leaders to support the locally defined health agendas. In the absence of stability, high levels of community participation and mobilization offered a counterweight, such that the community could carry the HC project even in the absence of the support of local leaders. Thus, interestingly, the global south experience, perhaps due to both its smaller scale and its less stable environmental context, led to the emergence of more resilient

communities. The longer history of strong community initiative, particularly in the South American cases, led to more success in HC than was true in the African context.

As one can begin to see, a more nuanced look at context can help us understand program the challenges inherent in sustainability. In the global North entrenched institutions and a lack of community involvement create problems that can lead to program breakdown due to stasis. In the south, lack of institutional support in some cases prevents such projects from succeeding, and in other cases strong communities can act as a counterweight. In both instances, the question remains: Can programs, governments and communities adapt so that they are resilient, and if so, how?

b. Social Exclusion Programs

The modern use of the concept of social exclusion (SE) has been credited to the Former French Secretary of State for Social Action, Rene Lenoir, who in 1974 “used it to refer to individuals and groups of people who were administratively excluded from state social protection systems.”^{xiii} The concept took center stage in European policy discourses during the 1980s and 1990s, in response to economic downswings, which resulted in growing pressures on many European welfare systems. In its most simplistic form, the concept reflects an alternative understanding of poverty. SE is multidimensional – in that it can be experienced due to a lack of housing, education, work, health, political rights, or access to social networks. It is dynamic process in which disadvantages are linked, relative and at times reinforcing. SE is understood to be experienced in communities that are resource poor. However, the causes stressed are based on ones ability to participate, ones access to rights, and the nature of redistribution. Thus, those who

are excluded are “cut off from the benefits enjoyed by full citizens.”^{xiv} Thus, programs seeking to respond to these challenges, as one might imagine, are very diverse – given the variable nature of exclusion by locality.

My focus here is specifically on those programs operating at the community level and thus can be most easily understood as falling within the realm of “community development.” However, because the causes of SE are beyond the control of communities, these programs, like Healthy Cities, often involve partnerships between actors at different geographic scales (neighborhood, local, regional and national).

Research suggests that, as was true of Healthy Cities programs, social inclusion programs also suffer from a lack of attention to ‘resilience’ issues. An evaluation of 78 community-based social inclusion initiatives in Canada for example, found that projects faced “an enormous challenge in the permeable, complex adaptive systems of communities ... made even more difficult when organizations are faced with the instability and transition created by short-term project funding, multiple evaluation criteria, and an overall lack of organizational capacity due to under-funding.”^{xv}

Across Europe, Social Inclusion has been promoted at a regional, national and community level, however recent events in Europe -- most notably the riots in immigrant enclaves in France, would suggest that social inclusion programs in many European cities are less successful. Here, as was true in the Healthy Cities cases, a lack of institutional support and the view that support that was provided was not meaningful or salient to the communities concerned meant less success at

achieving outcomes. In Scandinavian countries, slightly more success occurred when local immigrant councils were given policy making powers – generating salience.

A critical aspect of social inclusion projects is the effort to think comprehensively about community based development challenges, thus inclusion programs demand multi-pronged approaches to community development in which activities are carried out simultaneously. A successful SI experience can be found as we shift attention to a project in place in the global south. The Sonagachi Project is a community development program launched in 1992 in India to minimize vulnerability to HIV/AIDS among female sex workers. Initially, the program took a more traditional single sector focus on addressing the issue through efforts to promote condom use and HIV testing in ‘red light’ districts across West Bengal.

Just a year and a half after the project began, the percentage of prostitutes who said they used condoms had risen from almost nothing to 70 percent. Something less tangible had also begun to happen. The prostitutes hired by the project were turning into a force to be reckoned with in the power structure of the red-light district....The literate prostitutes in the project began teaching the others to read in makeshift daily classes held on plastic sheeting spread on the bare ground in the clinic's courtyard -- classes that continue even now. By 1994 they began demanding things that went way beyond the project's mandate. They wanted police protection from hoodlums....They have since formed their own financial cooperative to escape the clutches of money lenders who charge interest rates of at least 1,000 percent a year.^{xvi}

While the project initially focused upon altering individual behavior, over time it morphed into a social inclusion project in which sex workers themselves work within their

communities to educate and empower peers and their children in partnerships with CBOs, NGOs and government. Today the project addresses identity and self-esteem issues, autonomy and mobility needs, violence and discrimination, access to and control over material resources, and social and democratic participation.”^{xvii} This project might be considered to be a successful example of community led development that is achieving social inclusion. Its success relates to the ability of all stakeholders to adapt to changing agendas. Responsive governmental support here was critical.

While the concept has received wide play across Europe and Canada, others point out that it does “not translate easily...in late developing countries [where] the vast majority of people are already excluded from formal labor markets and are never in their lives likely to benefit from state welfare or formal social security.”^{xviii} Thus again, these programs may encounter challenges when systems lack permeability, and when they are unable to sustain community support. For example, in The Fight Against Social and Economic Exclusion Project implemented in Gambia (UNDP and ILO supported). The initial focus was to strengthen community responses to poverty, promote the participation of the poor in their own development, and to develop national(?). After its initial implementation, however, the project focus shifted away from empowerment broadly conceptualized towards the development of capabilities to promote sustainable income generation. The agenda, in this case was changed by government, not community participants – thus not surprisingly – stakeholder support diminished and the program no longer sought to address inclusion comprehensively. This is an illustration of the challenge of goal balance faced in many sustainability efforts.

3. Some Concluding Thoughts, and Points to Discuss:

Community development programs encounter significantly different challenges in the global North and South. In the North, institutional stasis characterized by an inability to absorb new ideas presents challenges to sustainability. In the south a lack of institutional stability can prevent the successful implementation of these programs and by extension make such program unsustainable. In all cases, finding a balance between conflicting goals remains a challenge. Though with concerted ongoing efforts these may be overcome. In both cases, the existence of a stronger community base may enable programs to sustain in the absence of other governmental supports. In all cases, experience would suggest that programs premised on sustainability, might not be able to easily survive in the face of rapid and unanticipated changes.

Given these realities, the questions that I pose to discussants are the following:

1. Is sustainability compatible with resilience?
2. Can sustainable development incorporate 'resilience' strategies? And if so in what ways?
3. Or, do we need to jettison sustainable development, and begin the process of constructing new models of development premised on resilience?

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