

Muscat: Concrete Jungle or Oasis by the Sea?

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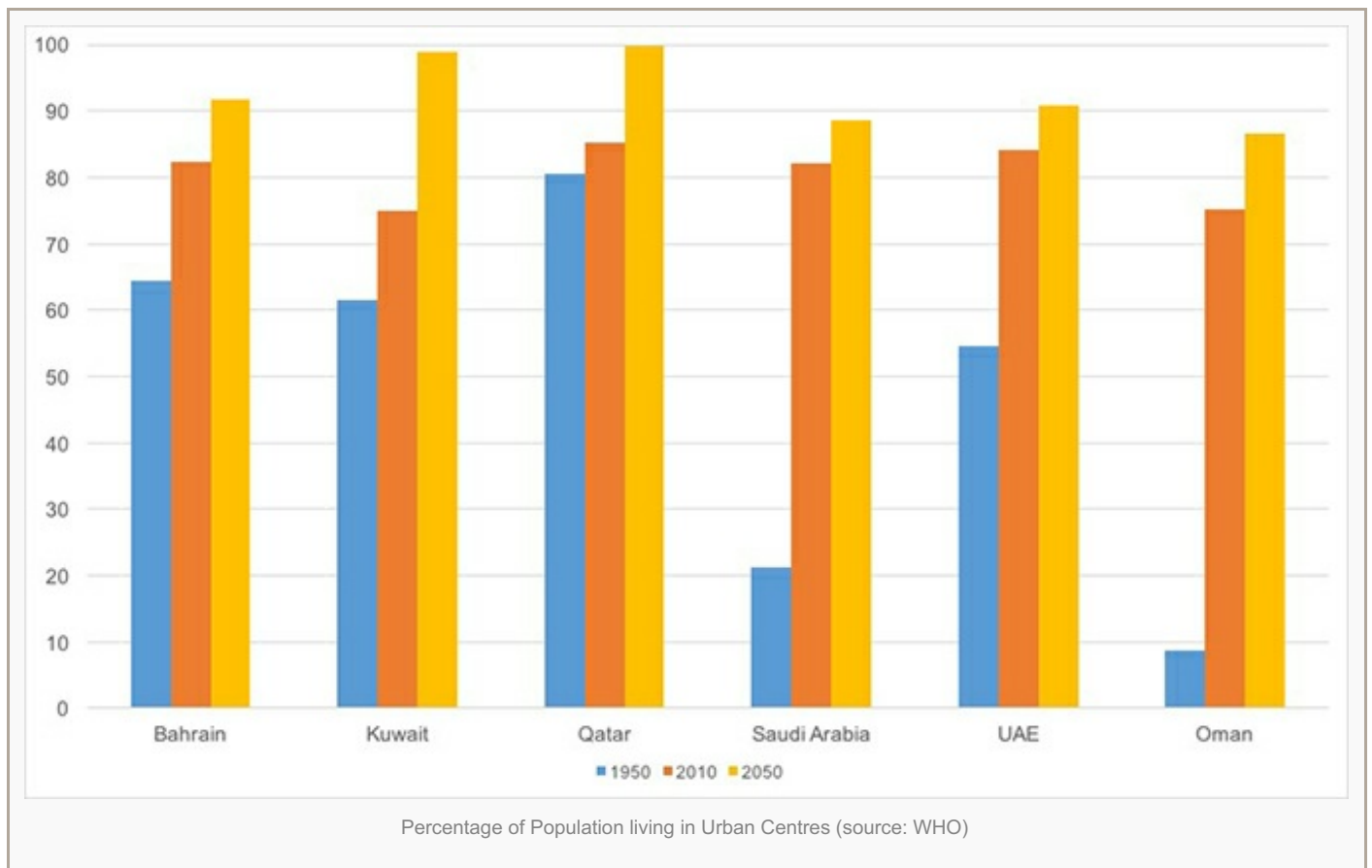
This is the first article of a [3-part series](#) on urbanisation, public open spaces and physical activity in Oman.



Bandar Khayran Reserve (flickr.com)

'Beauty has an address', the tag line for [Oman's Ministry of Tourism](#), aims to attract tourists and international investments and hopes to diversify an economy dependent on fossil fuels. The undeniable natural beauty of the country, situated on the southeast corner of the Arabian peninsula, stands in sharp contrast to the daily reality of residents in Muscat, the country's capital. What this image ignores is Oman's rapid transformation, like other countries in the region, due to its oil-producing economy. This is most plainly evident in the rate of urbanisation: three quarters (75.2%) of the population currently live in urban centres, compared to only one in five (16.4%) fifty years ago.

This pattern is reflected by other countries of the [Gulf Cooperation Council \(GCC\)](#). While only half (52.7%) of the population lived in urban areas in 1970, by 2050 82.2% will be living in cities. In the geographically smaller states of Bahrain, Kuwait and Qatar, a large majority in recent times have lived in urban centres.



Not only has this rapid urbanisation changed where people live, it has also transformed the urban landscape dramatically. Their cities are examples of urban modernity known for their architecture, extensive road networks, shopping malls and artificial islands. Urban design, often done as a piecemeal effort and delayed installation of key infrastructure (i.e. water, sewage system and electricity), follows a Western planning model with functional spatial segregation, high dependence on cars, single-family villas and sub-urban living.



Aerial View of Muscat. (Prasad Pillai / flickr.com, 2013).

In Oman over the past forty years, enormous resources have been placed in constructing a huge road network throughout the country. It has vastly improved communication between settlements, and accessibility to schools and health institutions, positively impacting population indicators such as life expectancy, mortality and illiteracy rates. However, this infrastructure development comes with its costs: decay of Oman's urban heritage, disregard to the natural environment in siting new roads and a car-dependent culture requiring high land consumption for streets and parking spaces. Nebel and von Richthofen eloquently note that:

At present, a huge amount of expenses goes into the car-based transportation sector, including high costs for road

construction. But the society also has to bear high follow-up costs when taking into consideration the time and stress wasted in traffic congestion, the high amounts of accidents and the loss of environmental quality.

The impact of urbanisation on public health is also concerning since the population has become more sedentary (and obese). According to [the public health literature](#), urbanisation is often accompanied by an increasing prevalence of noncommunicable disease, such as heart disease, stroke, diabetes, chronic respiratory diseases, which may explain why noncommunicable disease contributes to two-thirds of morbidity and mortality in countries of the GCC. Heart disease, diabetes, obesity are major public health concerns in the region with prevalences among the highest in the world: more than half of adults in the GCC are currently overweight or obese and more than 16% of the adult population has high blood glucose. The high prevalence of these health conditions is driven by dietary exposures and insufficient physical activity, two of the five main contributors to health risk in each one of these country.

The World Health Organization (WHO) has responded to this public health crisis by [urging countries to aim for a 10% reduction](#) of insufficient physical activity by 2025. In Oman, the [prevalence of physical activity is low](#); especially among women and girls (adults: 54% in men and 42% in women) ; college students: 57% in men and 42% in women; [adolescents who are recommended](#) to do at least 60 minutes of moderate-intensity physical activity per day: 30% in boys and 15% in girls). Urgent action is required to reverse this trend before it gets worse.



Traffic on a street in Ruwi, Oman (trabantos / Shutterstock.com, October 2016).

Ecological models of physical activity identify the physical environment as a major factor influencing physical activity; this applies to the built environment (such as buildings, layout of communities and transportation infrastructure) as well as the natural environment influence physical activity levels of a population. Thus, urban design regulations and infrastructure are identified as key points of intervention by the [Global Advocacy for Physical Activity](#), particularly as they relate to equitable and safe access to recreational physical activity, and recreational and transport-related walking and cycling across the life course.

[Research has also shown](#) that the design of neighbourhoods, communities and cities is consistently linked with walking and cycling: people living in areas with higher walkability indices report more walking and cycling and engage in more physical activity. Higher residential density, street connectivity and mixed land use produce an environment that provides residents with a range of different destinations (work, school, parks, and essential

services) with short direct routes. Access to public open spaces improves physical and mental health.

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The views expressed are those of the author and do not necessarily reflect those of the WHO.

More Posts in the Series

- [Part 2 – What are Public Open Spaces?](#)
- [Part 3 – Are walkable neighbourhoods possible in urban Oman?](#)
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