In Clifford D. Simak’s 1952 science fiction classic, *City*, the metropolis is dead by the end of the 20th century. Cheap atomic power and ubiquitous private helicopters have made concentrated human existence a quaint memory. Simak could not have been more wrong, of course. About half of the world’s population now lives in urban areas, and the relentless squeezing of teeming masses of human beings into megacities shows no sign of abating. In light of the ascendance of the megalopolis as the 21st century’s dominant mode of human existence, “public health” has often come to mean “urban health.” Sure, there are still a few holdouts living in Montana, but rurality has increasingly become something of a kind of international Bantustan, an abandoned wasteland of deprivation, in stark contrast to the earlier ideal of the rural space as fresh, clean, and wholesome. Increasingly now, nonurban places exist in relation to cities: In the 21st century, urbanicity articulates with all of humanity. So, perhaps, the first chapter of the *Handbook of Urban Health: Populations, Methods, and Practice* should not begin with the question, “What is a city and what is urban health?”, but should, rather, consider whether there is anything left that is *not* urban health.

The authors of this handbook describe the myriad ways that virtually everyone is affected by urbanization, regardless of place of residence, and the authors are compelling in their treatment of how the health of cities determines population health more broadly. Three distinct themes organize the text, with almost equal weighting between the first two but considerably less provided for the third. The first section of the book is devoted to population groups that have come to characterize, or are distinctly affected by, urban life. This includes chapters addressing homeless people, racial and ethnic minorities, drug users, children, and the elderly, among others. The second section considers the various research methods used in the study of urban health, drawing from diverse fields such as anthropology, epidemiology, sociology, and urban planning. The last section focuses on the practice of urban health, with chapters devoted to building healthy cities, teaching urban health, and providing health services to marginalized groups.

Galea and Vlahov have, in large part, defined the field of urban health; in this edited volume, readers benefit from their perspective through the integrative chapters included at the end of each section. Their collective synthesis of the common elements contained across the chapters is an important strength of this text, as are the noteworthy differences between the chapters and the implications of these similarities and differences for the study of urban health. Another strength is the inclusion of the developing world perspective in a book devoted largely to the developed world’s conditions, although the preponderance of attention to wealthy nations may be seen by some as a limitation. In light of the book’s stated goal, which is to make “. . . one step toward the systematic study of urban health . . .” (p. 11), it would, of course, be impossible to address in greater detail any single perspective. The numerous works devoted to the health of urban populations in the developing world are amply referenced, and interested readers are directed to additional relevant material.

The task of addressing the universe of urban health is not insubstantial, and the authors have provided a varied and accessible overview of this subject. Despite the breadth of material covered, some gaps inevitably remain. Cities experience many types of growth, from high-density design to urban sprawl. Although the critical topic of urban planning is nicely introduced in the methods section, an exploration of the health consequences of the myriad of planning approaches would have been an enormous contribution to the field. On a related note, one experience common to many urban areas in the United States is that of housing stock destruction or service revocation, followed by area gentrification and renovation. This process is rooted in political and economic structures and carries with it significant short- and long-term health consequences, which might have been considered. Finally, social networks play a unique role in the urban environment, as sources of support, strain, and contagion. Network analysis methods can provide a useful tool for assessing how these connections operate across different population densities and how they differ from those situated in rural or suburban areas. Although the authors have covered considerable territory on the urban health landscape, one may still look forward to further work that will develop these and other topics.

As the world continues its seemingly relentless march toward greater levels of urbanization, it is imperative that we make concurrent advancement in methods and practice for addressing the health needs of urban, and the inextricably connected nonurban, populations. The *Handbook of Urban Health*, which will prove useful to public health scholars and practitioners in fields such as urban sociology, city and regional planning, and epidemiology, lays the
groundwork from which the nascent field of urban health will grow and thrive.

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