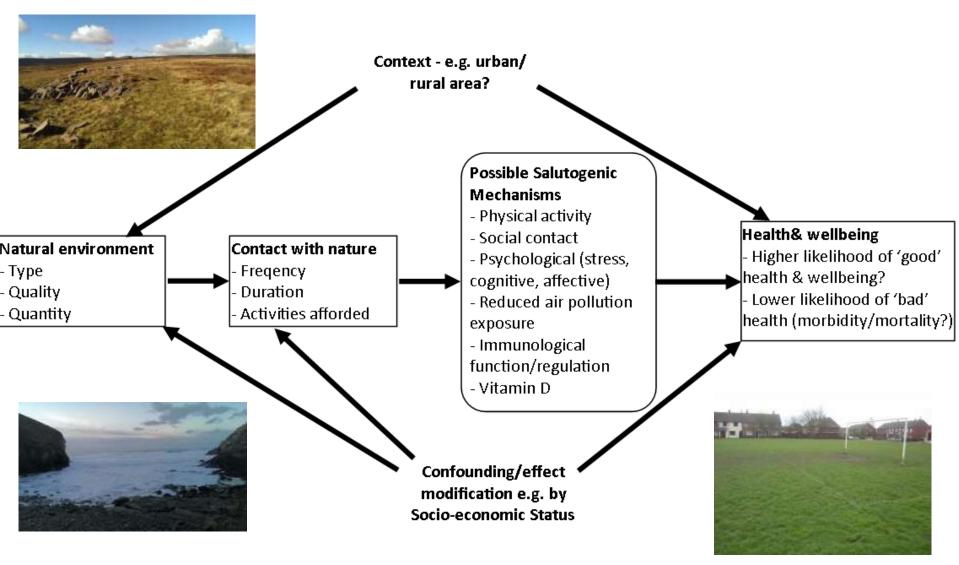


Ben Wheeler, Senior Research Fellow





Nature – Health & Wellbeing Pathways

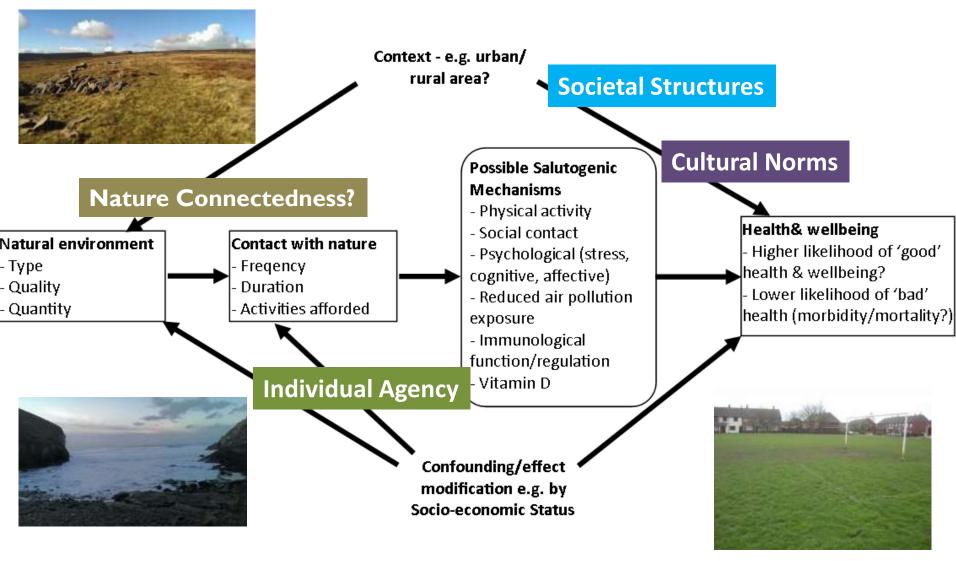






Adapted from Hartig et al 2014 Nature & Health. Ann Rev PH

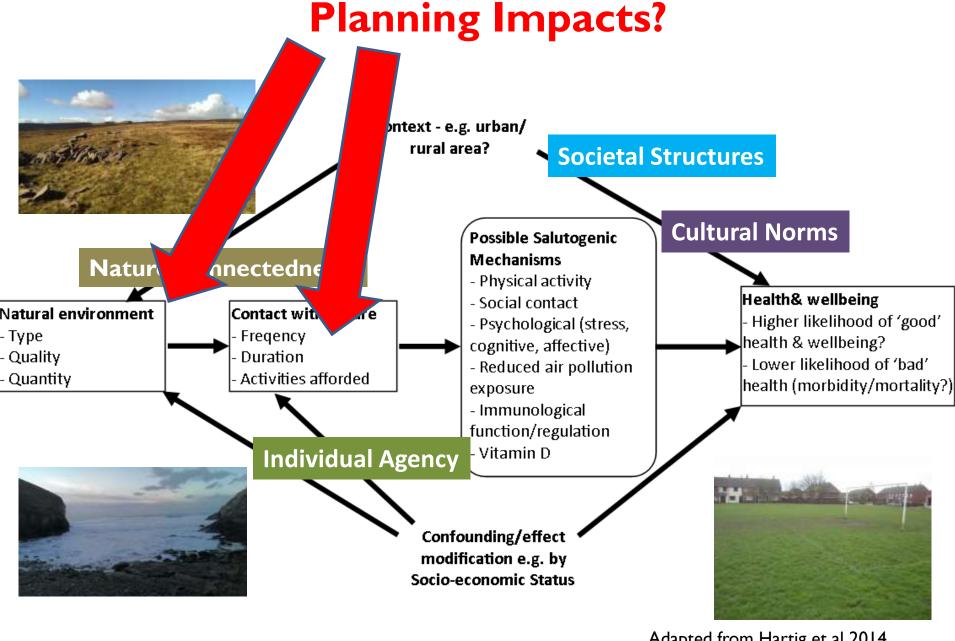
Nature – Health & Wellbeing Pathways







Adapted from Hartig et al 2014
Nature & Health. Ann Rev PH







Adapted from Hartig et al 2014 Nature & Health. Ann Rev PH

What do we know?





Green space, mental health & wellbeing







British Household Panel Survey (1991-2008)



Each year 5,000 households (n > 10,000) surveyed

Focused on 84% of households in "urban" areas

Mental III-health: General Health Questionnaire (GHQ-12) "Compared to usual how have you been feeling in the last few weeks" e.g. "able to cope", "stressed". The higher the score, the higher the mental distress.

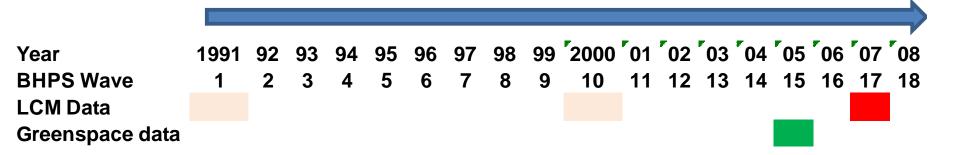
Subjective well-being: Life Satisfaction (LS): "How dissatisfied or satisfied are you with your life overall?" with responses ranging from I (Not satisfied at all) to 7 (Completely satisfied).

$$r_{(GHQ/LS)} = -.50$$





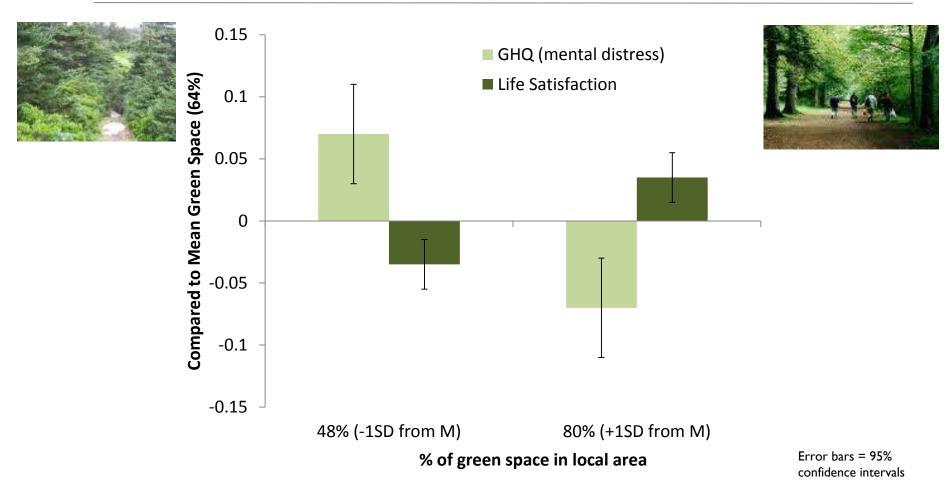
British Household Panel Survey (1991-2008)



 Do people report better mental health in years when they live in greener urban areas?



BHPS & Mental Health



People reported lower mental distress and higher life satisfaction in years when they lived in greener urban areas

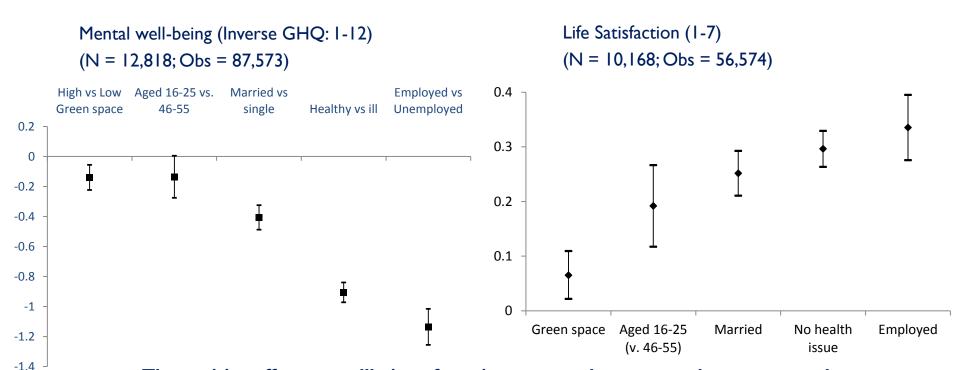
Controlling for: individual age, income, education, health, employment status, marital status, children, commute, house type, house size and area level Income, Employment, Education, Crime,





British Household Panel Survey (1991-2008; 27,284 Urban LSOA)

Modelling the impact of moving from an LSOA ISD < M Green cover (48%) to one ISD >M green cover (81%)



The positive effect on wellbeing of moving to a much greener urban area was about:

1/3 the positive impact of being married vs single

I/6 the positive effect of not having a limiting long standing illness

1/10 the positive effect of having a job vs being unemployed





What about 'blue space'? Evidence on coastal environments









CONVALESCENCE ON THE COAST*

BY R. FORTESCUE FOX, M.D., F.R.C.P.

AND

WYNDHAM E. B. LLOYD, M.R.C.S., D.P.H.

The value of medical treatment on the coast was first seriously brought to the notice of the profession by Dr. Richard Russell of London in 1750. Mainly as a result of his advocacy and that of Drs. Lettsom and Fothergill, the practice of sea-bathing was established in England before the end of the century at many seaside resorts. The Royal Seabathing Infirmary at Margate, foun and the control of the century at many seaside resorts.





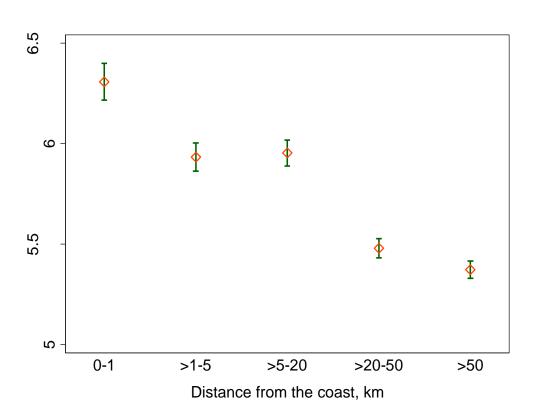
STIMULANT AND SEDATIVE MARINE CLIMATES



A broad distinction must be drawn between the medical values of the east and west coasts. On the eastern aspect of the British Islands the climate as a whole is stimulant or tonic; in the south-west and west it is sedative. The physiological reactions of these two forms of climate have been roughly and generally described as accelerating in the east, that is to say stimulating and increasing metabolism, circulation, and nervous energy, and retarding in the west, that is to say slowing the various vital processes and so economising the energy of the body.



Health of coastal populations



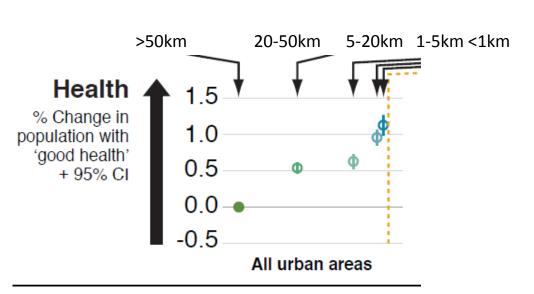
- Looking at raw data on population health (from the Census 2011 for England)
- Coastal populations are more likely to report bad health
- But we know that coastal populations are:
 - Older
 - More likely to experience socio-economic deprivation





Depledge, M., Lovell, R., Wheeler, B., Morrissey, K., White, M., Fleming, L., 2017. Future of the Sea: Health and Wellbeing of Coastal Communities. London: Gov Office for Science

Health at the coast – after accounting for age & socio-economic status



- After we account for age and socio-economic status, coastal populations are healthier than we would expect
- Maybe through pathways such as physical activity and opportunity for rest and relaxation

Adjusted for population age, sex, Indices of Deprivation, greenspace







BlueHealth is a pan-European research initiative investigating the links between environment, climate and health.

The programme is specifically focused on understanding how water-based environments in towns and cities can affect health and wellbeing.

https://bluehealth2020.eu/



What about actual visits to nature?

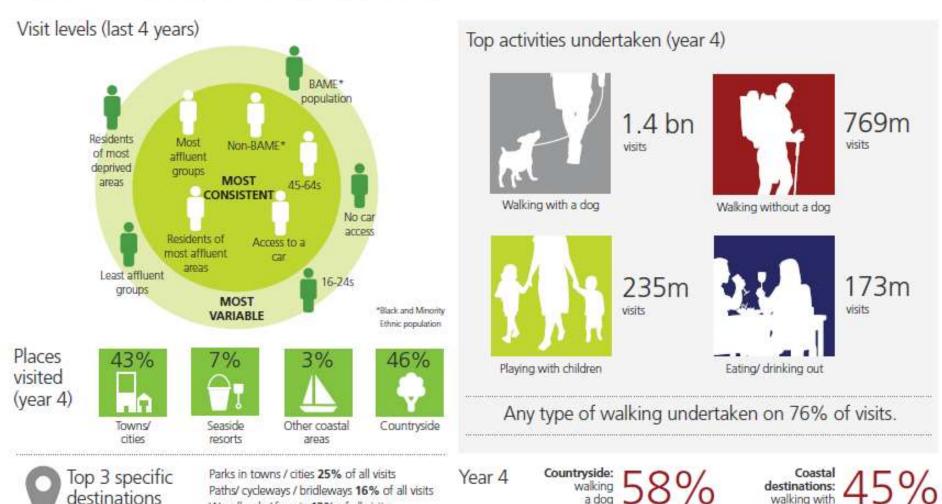




Monitor of Engagement with the Natural Environment

VISITS: WHO, WHAT, WHERE?

Woodlands / forests 13% of all visits





visited



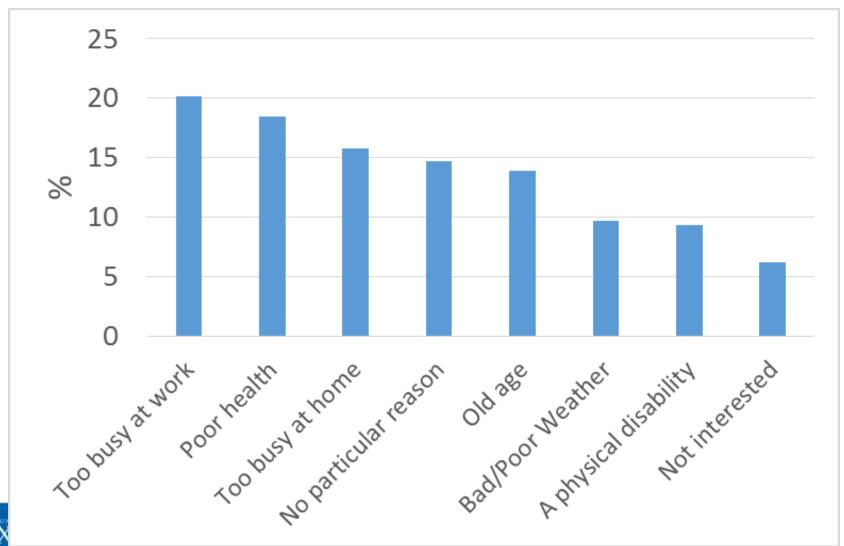
Who doesn't visit nature (including urban)?

- Survey data (n~60,000)
- a quarter of the population reported visiting natural environments < once a month ('infrequent' visitors)
- Infrequent visitors more likely to be:
 - Female
 - Older
 - In poor health
 - Lower socioeconomic status
 - Ethnic minority
 - Live in relatively deprived areas
 - Reside in areas with less neighbourhood greenspace



And Why?

Main reason for not visiting nature



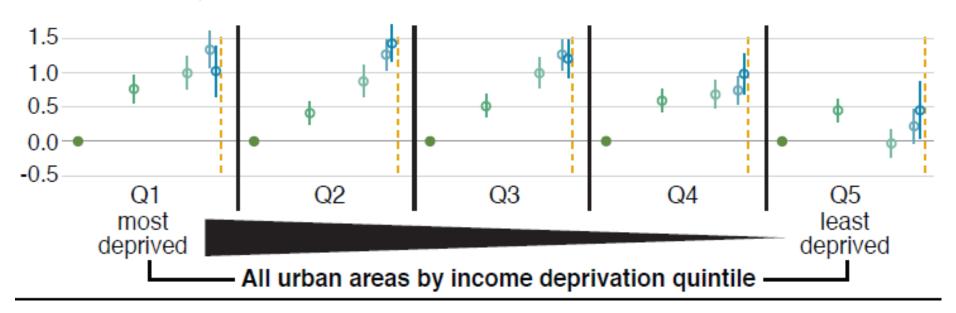
Green/blue space and health inequality?

 Do good quality environments have the potential to mitigate adverse health impacts of poverty and socioeconomic deprivation?



Health at the coast: is it just the healthy wealthy?

Urban areas only



OLS regression coefficients; all models adjust for age, sex, 5 deprivation domains, and greenspace

Probably not: We find the strongest link in the poorest urban areas; in wealthier areas there's almost no evidence of a connection.





Potential Environmental Risks

- Nature won't be beneficial for everyone and could be harmful, e.g.
 - Pollen allergies
 - Ticks and other disease vectors
 - Accidents injuries, drowning
- Context: wider climate change impacts
- But we need to keep risks in perspective







What about all the other evidence?



Research | Children's Health



Surrounding Greenness and Pregnancy Outcomes in Four Spanish Birth Cohorts

Payam Dadvand, 123 Jordi Sunyer, 1334 Xevier Besagens, 123 Ferren Ballester, 256 Aitane Lertxundi, 27 Ana Fernandez-Somoano, 1.8 Marina Estarlich, 1.9 Raquel Garcia-Estaban, 1 Michaele A. Mendez, 2 and Mark J. Nieuwenhuÿsen^{1,2,3}

Open Access

Wheeler et al. International Journal of Health Geographics (20 DOI 10.1186/s12942-015-0009-5

Kerryn Husk³, Clive E Sabel⁴ and Michael H Depledge³

Contre for Research in Environmental Epidemiology (CREAL), Barjotona, Spain; "IMM (Rospital del Mar Research Institute), Borotona, Spain; "DERR Epidemiologia y Salusi Publica (DERRESP), Spain; "Department of Experimental and Health Seismons, Pompase Falms University, Barrelona, Spain; "University of Valencia, Spain; "Spain; "Conter for Public Health Research-CSSP, Valencia, Spain; "Department of Proyective Modeline and Public Health, (EMU UPV), University of the Bassus Country, Gipudous, Spain; "University of

Ovisido, Asturias, Spain; "Gillings School of Global Public Health, University of North Cerolina at Chapal Hill, Chapal Hill, North Carolina, USA.

The Relationship between Natural Park Usage and Happiness Does Not Hold in a **Tropical City-State**



Contents lists available at SciVerse ScienceDirect

Social Science & Medicine

journal homepage: www.elsevier.com/locate/socscimed



Cochrane population general health and indicators o Streetscape greenery and health: Stress, social cohesion and physical Library activity as mediators natural environment type and quality

Cochrane Database of Systematic Reviews

Sjerp de Vries a.*, Sonja M.E. van Dillenb, Peter P. Groenewegenc, Peter Spreeuwenbergc

*Alterra/Cultural Geography, Wageningen UR, Wageningen, the Netherlands

Communication Science, Wageningen University, Wageningen, the Netherlands *NIVEL (Netherlands Institute for Health Services Research), Utrecht, the Netherlands

Abstract

RESEARCH

Background: Many studies suggest that exposure to natural environments l'oreenspacel enhance

Benedict W Wheeler1*, Rebecca Lovell1, Sahran L Higgins1, Mathew P White1, Ian Alcock1, Nichola:

Beyond greenspace: an ecological study of

ARTICLE INFO

ABSTRACT

Participation in environmental enhancement and conservation activities for health and well-being in adults (Protocol)

Effect of exposure to natural environment on health inequalities: an observational population study

Husk K, Lovell R, Cooper C, Garside R



Curtaints lists available at Science/Drest

Environment International

journal homes age; www.elsevier.com/locate/envio

stchard seachd). Frank Profess

Sackground Studies have shown that exp. effect on health and builth-related belo pronounced in populations with great mough which low ascissements; post



Contents lists available at SciVerse ScienceDirect

Health & Place

journal homepage: www.elsevier.com/locate/healthplace

Residential green spaces and mortality: A systematic review



SGMs Stronger In Inc Holds Ro. (1958), Hughel Obs. - December in Sensing, Nondow, Sant





Is access to neighborhood green space associated with BMI among Egyptians? A multilevel study of Cairo neighborhoods

Generally positive

Strong

links

evidence

Strength

of links

green

human

health

between

spaces and

consistency

and

Landscape, ecosystem and city scale linkages

groups)

Mortality

analyses

Quality of evidence

Evidence largely from peerreviewed systematic or non-

systematic reviews or meta-

- Mental health and wellbeing Physical activity (in selected
- grey literature
 - Variation between social and
 - demographic groups Development and maintenance of a healthy immune system and reduction of inflammatory-based diseases Perceived health status Maternal health, pregnancy outcomes and children's

Evidence largely from mixed

evidence sources, individual

journal articles and reports, or

- cognitive development Other physiological outcomes Social contact and community cohesion **Environmental quality**
- Global ecosystem services, biodiversity and health The type of natural environment Dose and responses Physical activity (at population Maxwell, S., Lovell, R., 2017. DEFRA & European Centre for Environment and Human Health: Evidence Statement on the links between natural environments

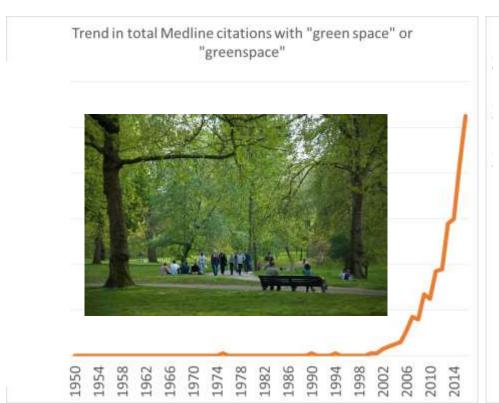
Evidence is mixed or unclear

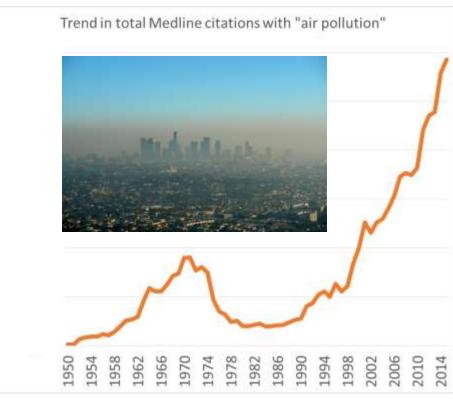
level) Obesity



and human health. DEFRA, London.

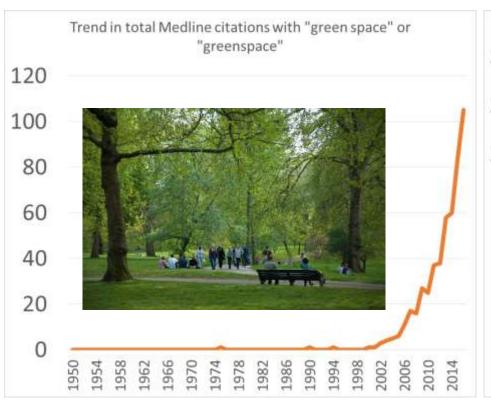
How much evidence do we need?

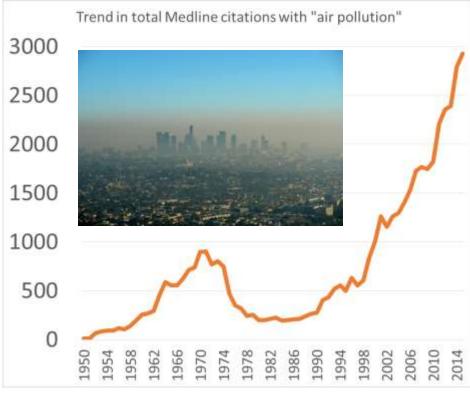






How much evidence do we need?







Policy & Action – National & International

DEFRA 25 Year Plan for the Environment

Chapter 3: Connecting people with the environment to improve health and wellbeing.

At a glance

We will:

- Help people improve their health and wellbeing by using green spaces including through mental health services.
- Encourage children to be close to nature, in and out of school, with particular focus on disadvantaged areas.
- 'Green' our towns and cities by creating green infrastructure and planting one million urban trees.
- Make 2019 a year of action for the environment, working with Step Up To Serve and other partners to help children and young people from all backgrounds to engage with nature and improve the environment.

International Action: Parma Declaration

Commitment "...to provide each child by 2020 with access to healthy and safe environments and settings of daily life in which they can walk and cycle to kindergartens and schools, and to green spaces in which to play and undertake physical activity"

WHO 2010: Parma declaration on Environment and Health.

Fifth Ministerial Conference on Environment and Health "Protecting children's health in a changing environment". Copenhagen: WHO Regional Office for Europe.





International Action: Sustainable Development Goals

SDG 11.7

By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities



WHO

"The evidence shows that urban green space has health benefits, particularly for economically deprived communities, children, pregnant women and senior citizens. It is therefore essential that all populations have adequate access to green space, with particular priority placed on provision for disadvantaged communities"

WHO, 2016: Urban green spaces and health - a review of evidence



Urban green spaces and health

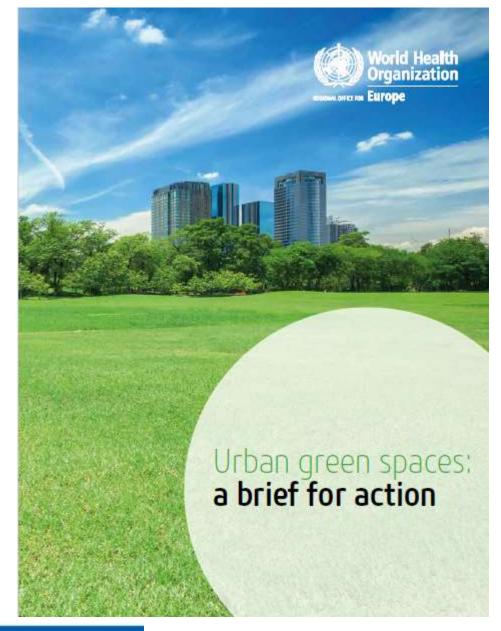
A review of evidence







WHO Action Brief





6. How to design urban green spaces

- O Put the green space close to people.
- As a rule of thumb, urban residents should be able to access public green spaces of at least 0.5—1 hectare within 300 metres' linear distance (around 5 minutes' walk) of their homes.

[Amongst a large number of other suggestions]

- Why 300m?
 - it seems 'reasonable' based on the evidence (WHO advisory group)
 - Maybe: Grahn & Stigsdotter 2003. Landscape planning and stress.
 Urban Forestry & Urban Greening

http://www.euro.who.int/en/health-topics/environment-and-health/urban-health/publications/2017/urban-green-spaces-a-brief-for-action-2017





So, is nature really good for you?

- 1. There's growing evidence but still mixed
- 2. We could be better at considering the complexity of the environment, our interactions with it, mechanisms and health impacts
- 3. Increasing accessibility and engagement may carry some degree of risk
- 4. If robust, reliable evidence supports it, can policies and programmes promote and protect both the natural environment and human health?

Hopefully...











Thanks to colleagues

Mike Depledge

Lora Fleming

Mat White

Becca Lovell

Ian Alcock

& the rest of the team



Beyond Greenspace blog

http://beyondgreenspace.net



BEYOND GREENSPACE

ABOUT BEYOND GREENSPACE

LINKS AND RESOURCES

PROJECT TEAM





Links & Further Reading

WHO Action Brief

http://www.euro.who.int/en/health-topics/environment-and-health/urban-health/publications/2017/urban-green-spaces-a-brief-for-action-2017

Beyond Greenspace Site

https://beyondgreenspace.net/reports-summaries/

- Evidence summaries produced for Natural England
- Evidence Report Cards produced with Cornwall Council on Biodiversity, Health and Wellbeing in Cornwall's Public Open Space
- DEFRA & European Centre for Environment and Human Health: Evidence Statement



