



University
of Glasgow | Public Health
& Health Policy



Outdoors & Health
Network

What are the relationships between
public health and wellbeing, and
woodlands or green spaces?

Prof Rich Mitchell

What am I going to say?

- The conference has 3 aims:
 - (i) to discuss societal and economic trends shaping the management of British trees and forests in both urban and rural contexts
 - (ii) to share experiences of responses to these trends and how society can successfully engage with its woodland resource
 - (iii) to identify future research and policy directions needed to meet emerging challenges
- So, that's what I'm going to do in this talk

A photograph of a misty forest with tall, thin trees. Sunlight filters through the canopy, creating a hazy atmosphere. The ground is covered in fallen leaves. The text "The context and trends" is overlaid in the center.

"The context and trends"

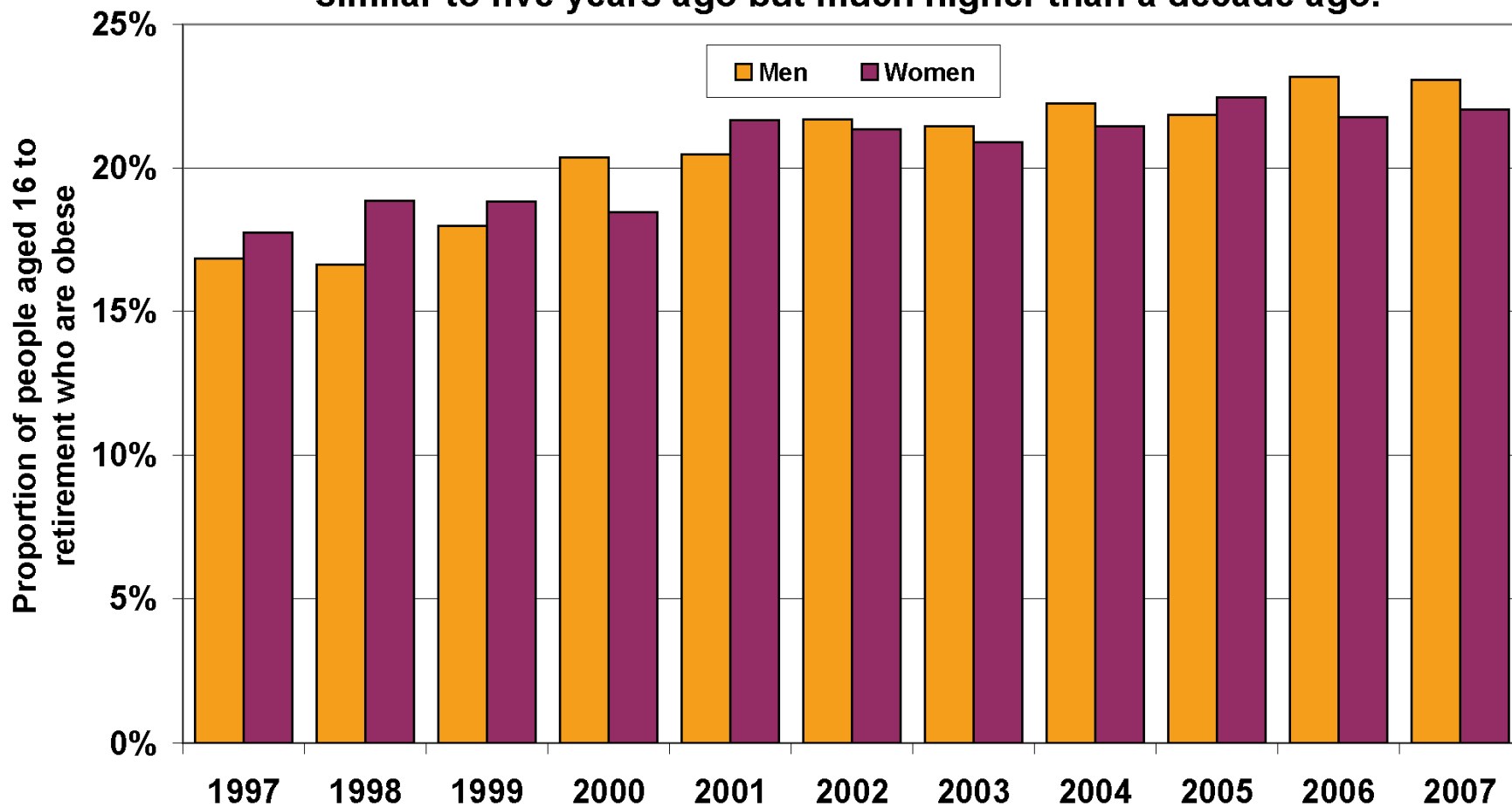
Our public health as a context

- For a wealthy, western, developed nation, our public health is not great
- As a nation, we are
 - Too fat
 - More miserable than you might expect
 - Still getting, and dying from, heart disease, diabetes, lung disease and various cancers at higher rates than we should be



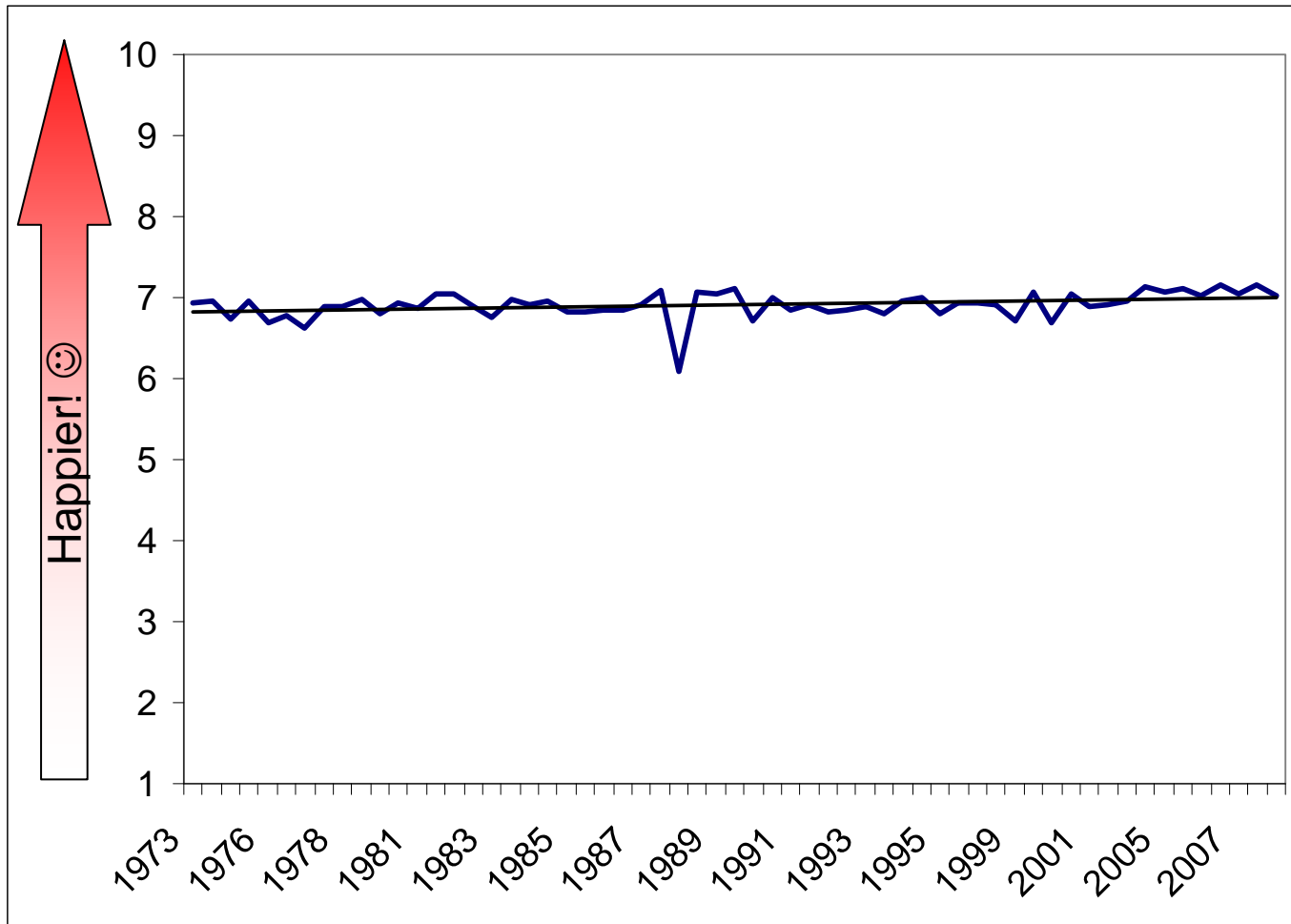
Getting fatter...

Almost a quarter of working-age people are now obese. This is similar to five years ago but much higher than a decade ago.



Source: Health Survey for England, DH; England; updated Mar 2009

Happiness



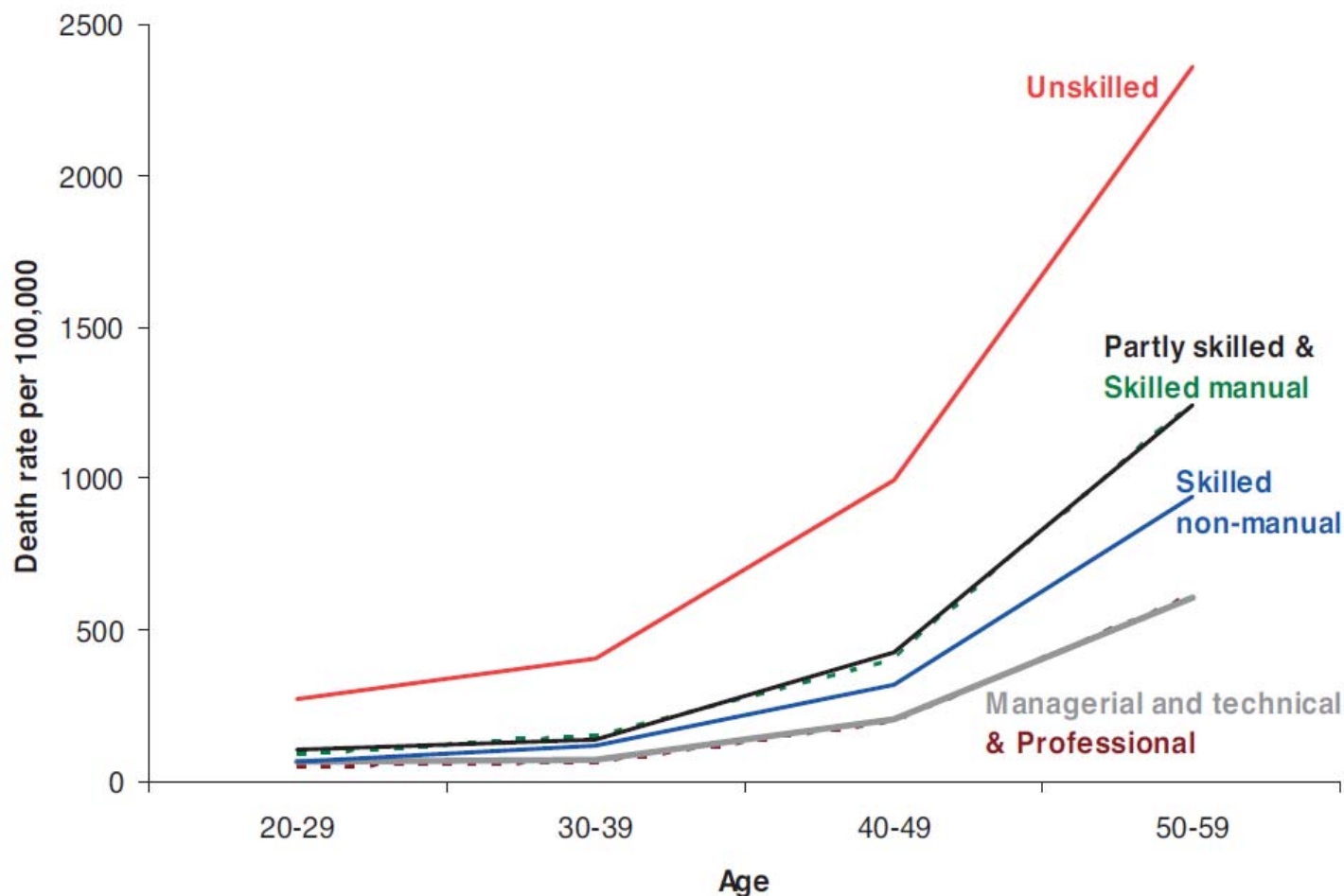
26th of 148 countries

Our public health

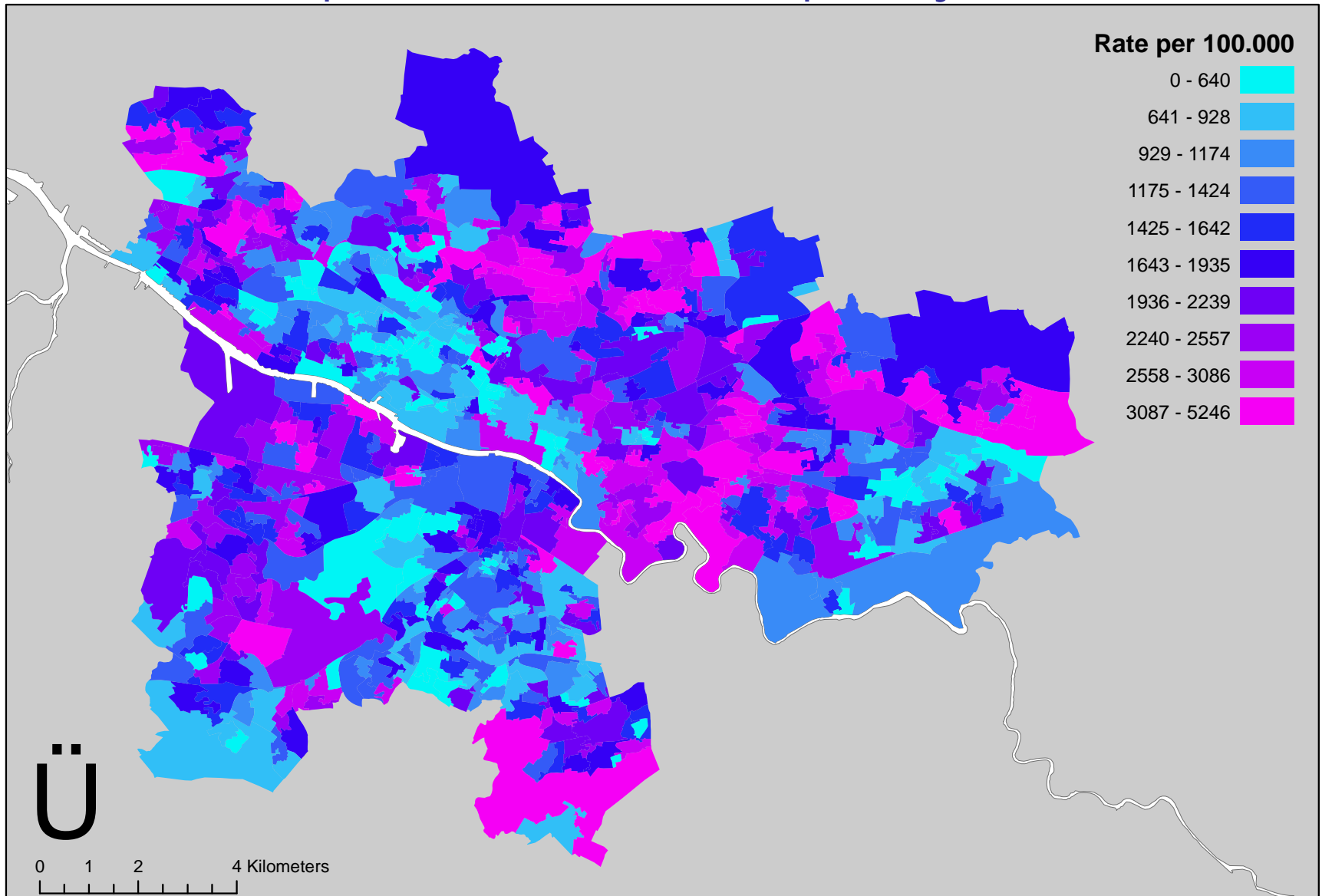
- Perhaps more importantly, poor health and adverse health behaviours are incredibly unequally distributed
 - within our society
 - from place to place
- For many of these health problems, things are substantially worse in the poorer regions, poorer neighbourhoods and among poorer people of the UK
- Improving public health, and narrowing these health inequalities are top priorities for governments
 - Morally
 - Fiscally (they are incredibly expensive)
- We are manifestly failing to narrow the inequalities...

Socio-economic position and health

Male age specific mortality rates by occupational social class. Scotland 1990-92



Hospital admissions for respiratory disease



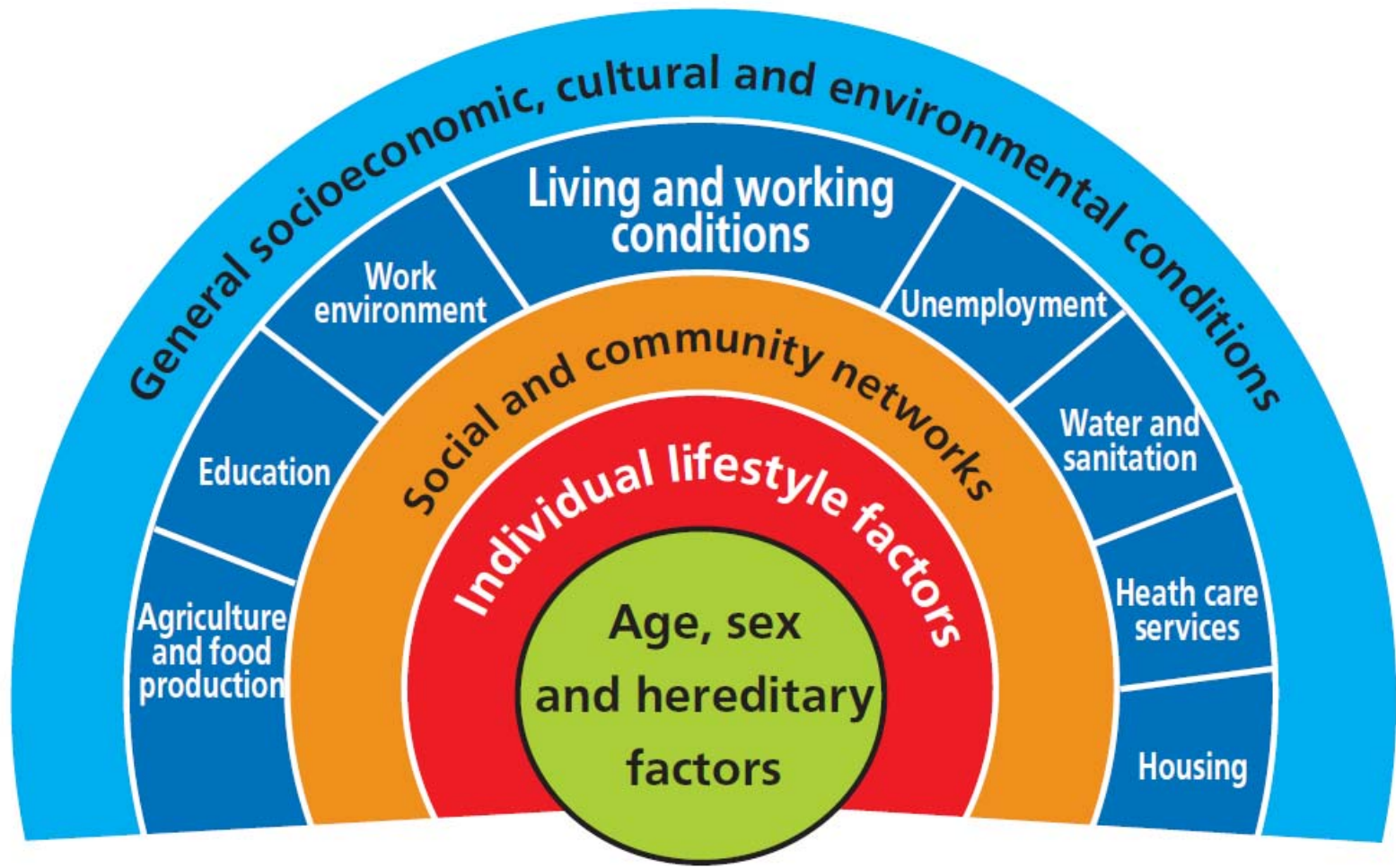
Source: Scottish Neighbourhood Statistics. Analysis work in progress with Duncan Lee

"This work is based on data provided through EDINA UKBORDERS with the support of the ESRC and JISC and uses boundary material which is copyright of the Crown and the Post Office."

Why is it so hard to fix
these problems?



Things which influence health





Policy context



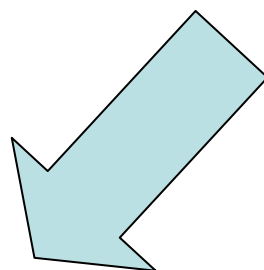
Evidence suggests



- There is scientific evidence that accessing woodland and other green spaces (visually or physically) can be *salutogenic* (health creating)
 - Restorative in psychological and physical terms
 - Promote physical activity
 - Promote social contact (maybe)
- The field is in relative infancy, so be careful what you believe!

The Task Force's key recommendations are:

- Government action on the physical environment should include improvements to promote healthy weight and to the quality of local neighbourhoods through increased community cohesion and preventing risks to community safety.
- The Government, NHS Boards and other public sector organisations should take specific steps to encourage the use and enjoyment of green space by all.
- Delivering the Government's National Transport Strategy should include specific action likely to improve health and reduce health inequalities. For example, rolling out effective local projects that improve active travel within deprived communities.
- New Government whole-community initiatives should be measured on their impact on health and health inequalities.



Policy recommendations

- 1 Prioritise policies and interventions that reduce both health inequalities and mitigate climate change, by:
 - Improving active travel across the social gradient
 - Improving the availability of good quality open and green spaces across the social gradient
 - Improving the food environment in local areas across the social gradient
 - Improving energy efficiency of housing across the social gradient.
- 2 Fully integrate the planning, transport, housing, environmental and health systems to address the social determinants of health in each locality.
- 3 Support locally developed and evidence-based community regeneration programmes that:
 - Remove barriers to community participation and action
 - Reduce social isolation.

HUSTONIAN MUSEUM

What role for folks like me?



Our programme of work



- Examines if and how **natural environments** can make a contribution to keeping people healthy
- Focused on the 3 key questions
 - Are these environments *really* healthy in population terms?
 - How are they healthy?
 - What works in getting people in contact with them?

What sorts of things have we found?

- The risks of dying from cardiovascular disease or respiratory disease are lower in areas which have more green space
 - The effect seems to be stronger for poorer people (though they are less likely to live in greener neighbourhoods in the first place)
 - The effects seem to vary from society to society
- Generally, populations with greater access to green space report less illness
 - This does seem to depend on the types of green space / settings
- The 'health gap' between richer and poorer folk is narrower in areas that have more green space (it's about half the size in the most green areas, compared to the least green)

What sorts of things have we found?

- Outdoor education experiences increase children's aspirations for contact with nature in the future
 - Their effects may be most profound on the poorest children
- Forest school is great at giving children physical activity
- Outdoor spaces may be a lot less 'gendered' for physical activity than conventional sport / playgrounds

What role for you folks?



So – what do you need to do?

- Recognise that you are potentially very important
 - Many visitors to green spaces are visitors to *your* land
 - You have the power to change the physical environment and perhaps people's experiences and perceptions of it
 - The things you are doing and testing can be tremendous sources of evidence



So – what do you need to do?

- Recognise that you might not be very important...
 - How much of a contribution to improving population health and narrowing health inequalities can trees, woodlands and other green spaces really make?
 - There are A LOT of other influences on people's health and wellbeing
 - If you expect too much, you'll be disappointed...



What do you need to do?

- Know and share what things you are trying in terms of land management and visit promotion
- Learn from your schemes, projects and management decisions
 - This doesn't mean you need to do complex evaluations on everything you do
 - Know and share 'what works' AND WHAT DOESN'T in terms of improving access to / use of woodlands and forests by people
- Learn to spot (or get advice about) opportunities for more rigorous evaluations
- Take the potential implications for health into account when you plan your management / promotion

Summary talking points

- We have public health problems
- There is evidence that being in woodland environments is healthy
- You hold the key to learning what works in getting people into these environments, and learning what impacts it can have on their health and well being

<http://www.outdoorshealthnetwork.co.uk/>