



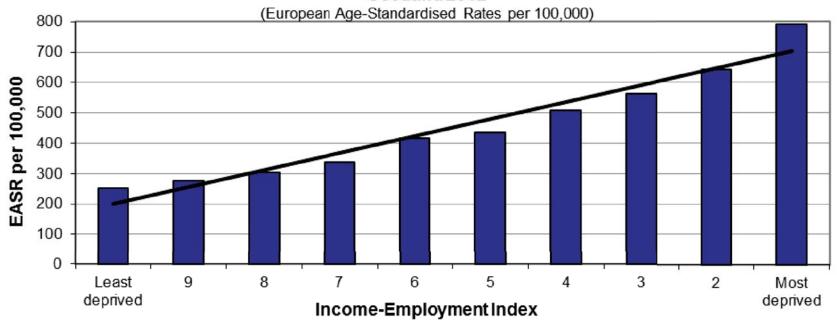
Reducing health inequalities: can green space do what politics can't?



Socio-economic inequalities in health persist in many countries and settings around the world, including Scotland

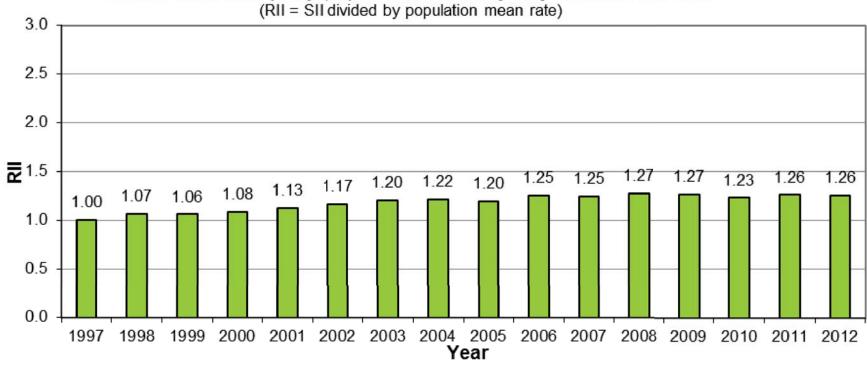


All cause mortality amongst those aged <75y by Income-Employment Index: Scotland 2012





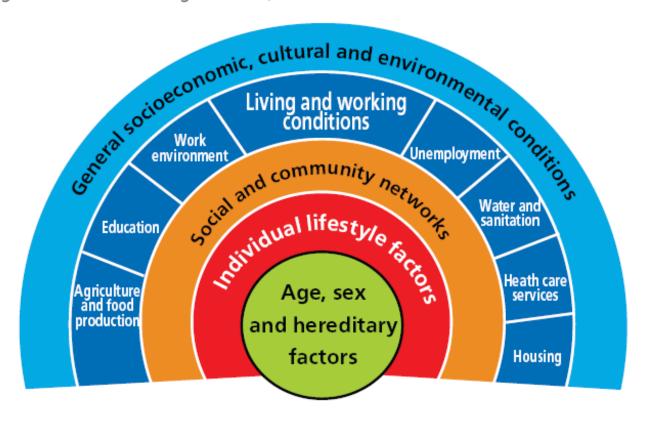
Relative Index of Inequality (RII): All cause mortality <75y - Scotland 1997-2012





Determinants of health (inequalities)

Dahlgren G, Whitehead M. Policies and strategies to promote social equity in health. Copenhagen: World Health Organization, 1992.

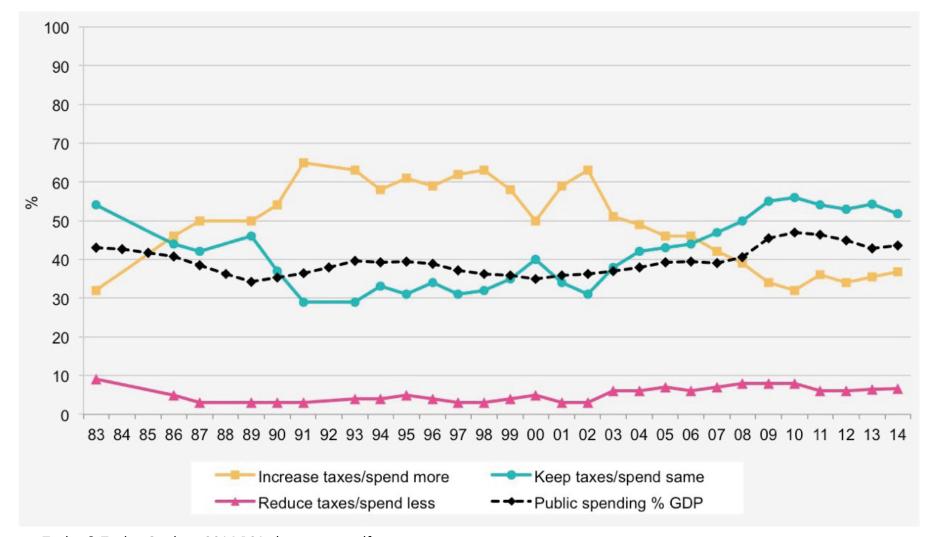


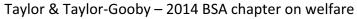


"Elimination and prevention of inequalities in all-cause mortality will only be achieved if the underlying differences in income, wealth and power across society are reduced." Scott S et al What would it take to eradicate health inequalities? Testing the fundamental causes theory of health inequalities in Scotland. NHS Health Scotland, Glasgow, 2013



Figure 1. Attitudes to taxation and spending on health, education and social benefits, 1983–2014, and public spending as a percentage of GDP







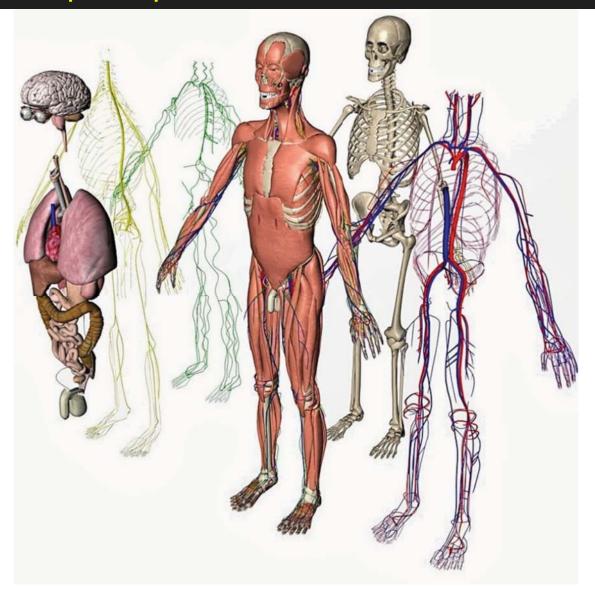
We hypothesise that some places are equigenic; features of their social, physical or service environments act to break or weaken the usual conversion of economic inequality to health inequality. We are interested in finding, defining and using the notion of equigenesis





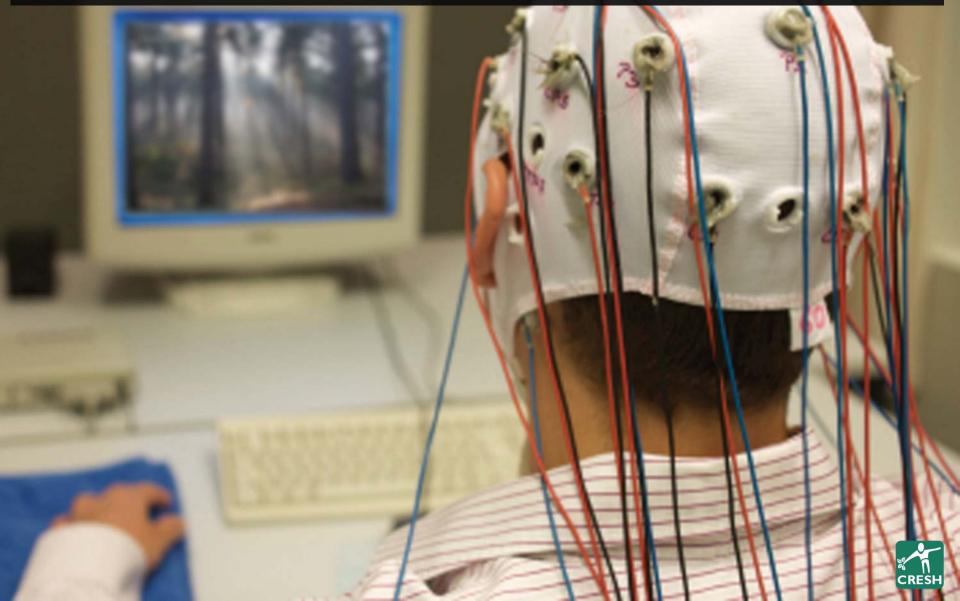


Restoration is a physiological & psychological effect, driven by the brain's perception of nature





The evidence for a restorative effect comes primarily from lab and field experiments.



Experimental evidence: field





Park B, Tsunetsugu Y, Kasetani T, Kagawa T, Miyazaki Y. The physiological effects of Shinrin-yoku (taking in the forest atmosphere or forest bathing): evidence from field experiments in 24 forests across Japan. Environmental Health and Preventive Medicine 2010; 15(1):18-26.



Experimental evidence: field



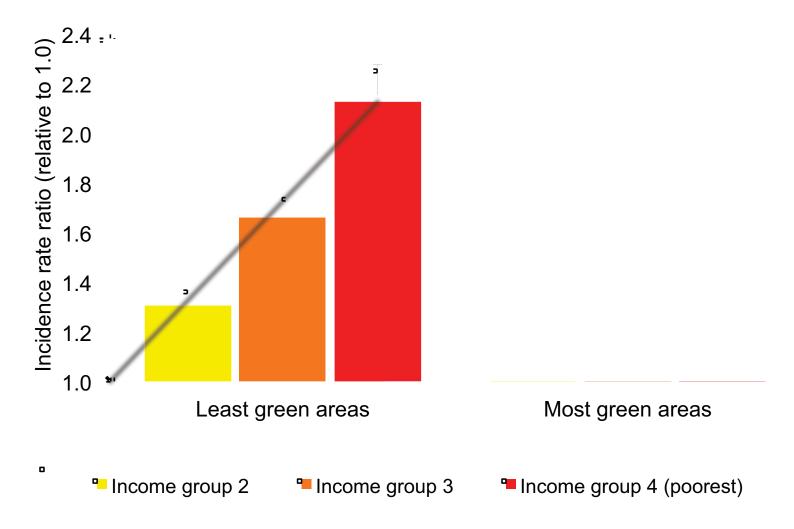
(c) Walking in the City Area



(d) Watching the Landscape in the City Area

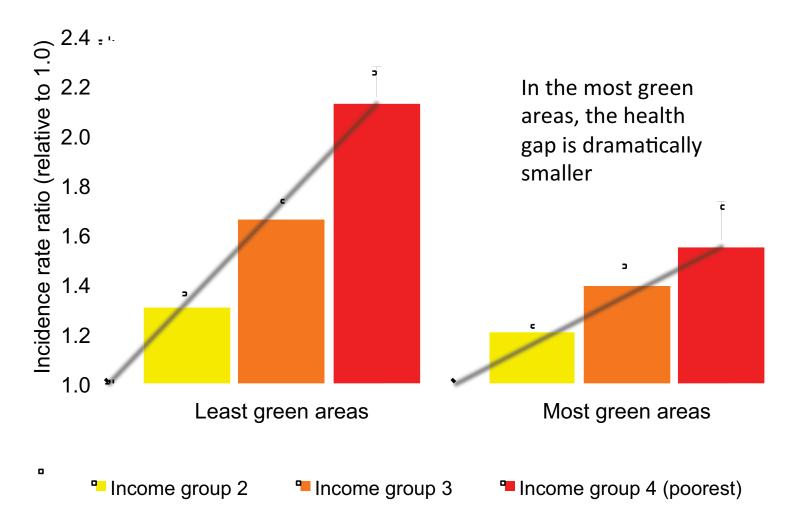


Income-related health inequality may be smaller in greener neighbourhoods.

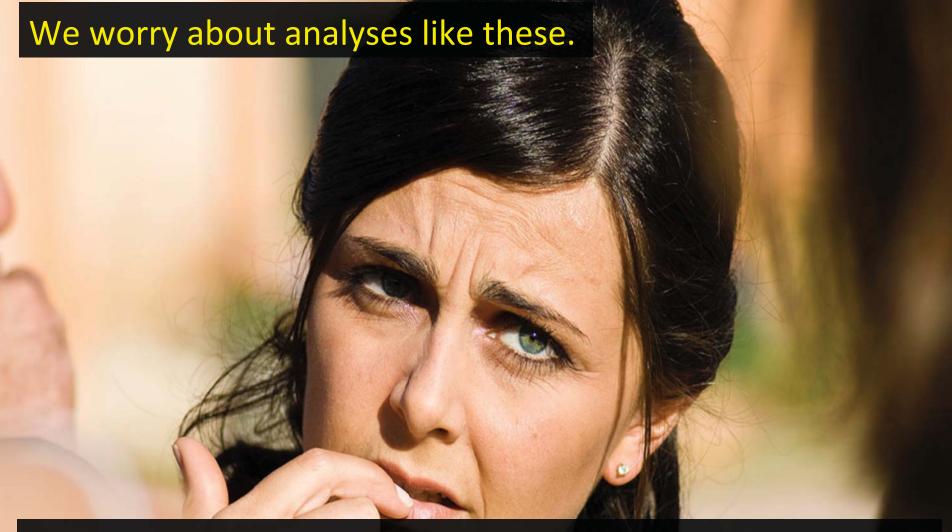




Income-related health inequality may be smaller in greener neighbourhoods.







What kind of people tend to have better access to green space, and what **other features** of neighbourhoods with good / poor access to green spaces might influence results?





We know about the following

An individual's age, sex, education, employment status and any impediment to their daily living

Problems in the neighbourhood with noise, air quality, crime/vandalism, litter, traffic congestion

Ease of access to postal services, banking services, public transport, cinema/theatre/culture, green/recreational areas

56 55 50



Various measures of financial situation, including reported financial strain.



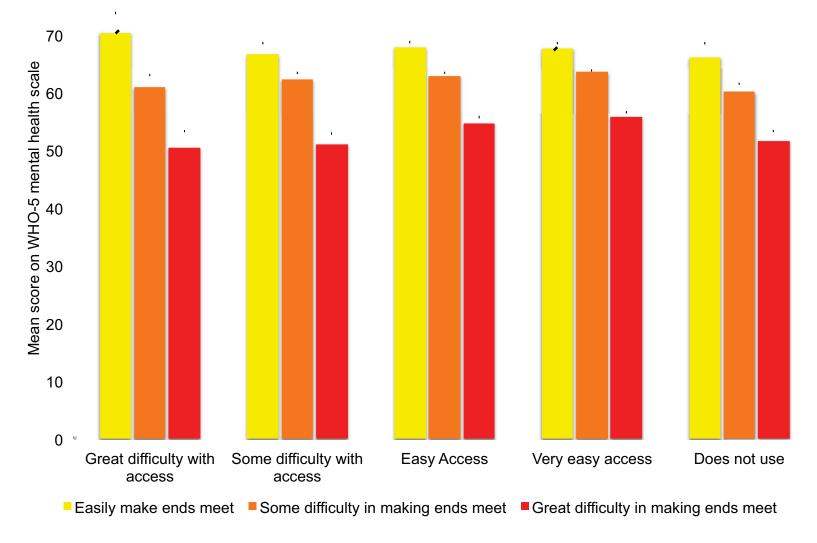
Is your household able to make ends meet? Easily? With some difficulty? With great difficulty?



All of Most of the More than Less than Some of At no time the time time half of the half of the the time Over the last two weeks time time I have felt cheerful and in good spirits I have felt calm and relaxed 3 I have felt active and vigorous 4 I woke up feeling fresh and rested 5 My daily life has been filled with things that interest me

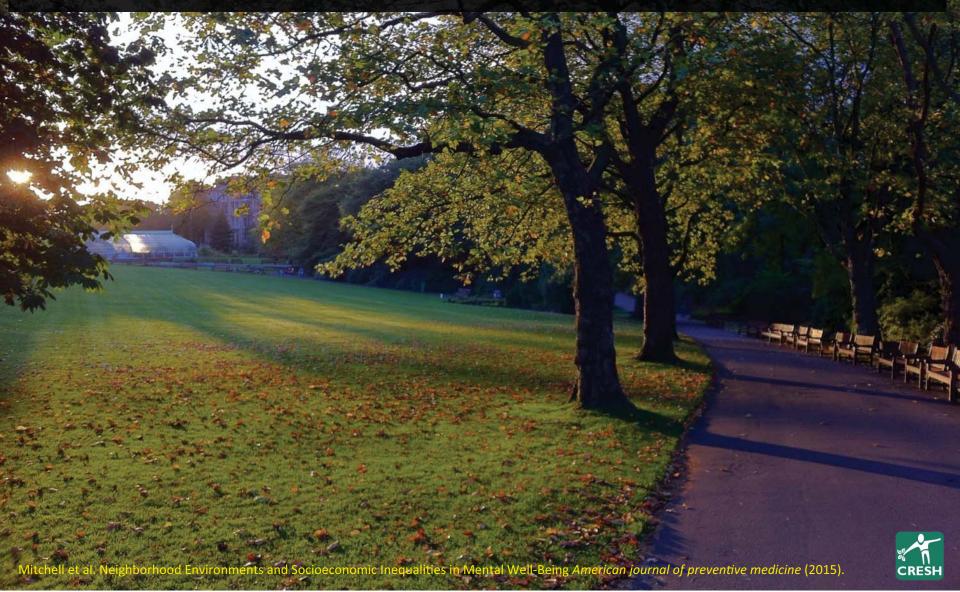


Income-related mental health inequality was smaller among those with better access to green / recreational areas



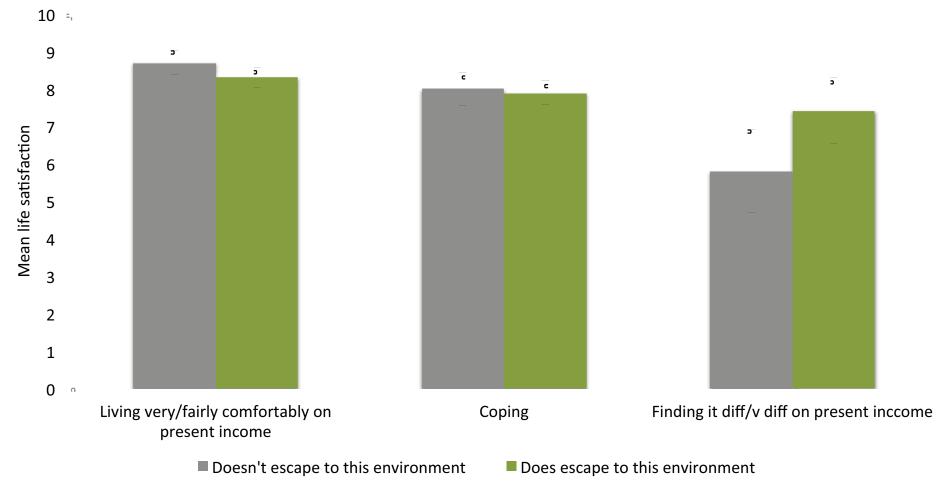


Access to green space / recreational areas was the ONLY feature of the neighbourhood which significantly 'affected' inequalities in mental health.



Does 'escape' to nature hold more benefit for those under more stress / more deprived? (NB equalised access)

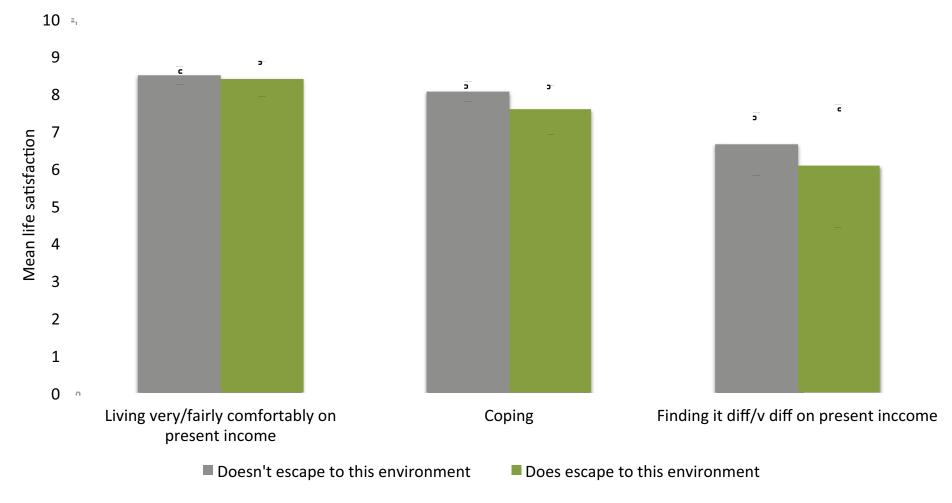






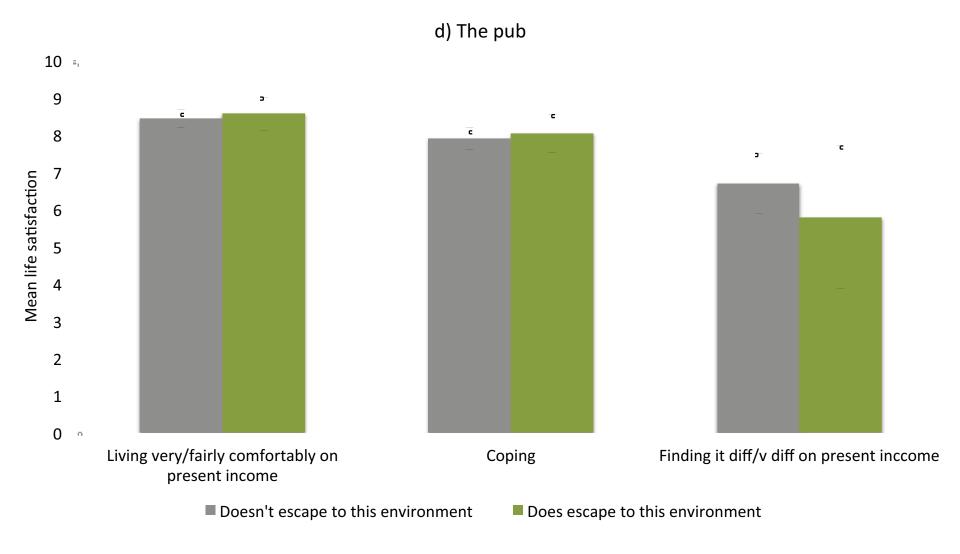
Do other environments have this equalising 'effect'? No.

c) A gym, swimming pool or sports club





Not even the pub





How do we use this information? Evidence that childhood experience is important in determining who uses these environments in adulthood.



We (and others) are finding that health inequalities are narrower among those with good access to green spaces. It seems to be because they benefit poorer people more. We must develop and use this knowledge.

