



UCL Institute of Health Equity



Health Inequalities and Open Space

Jessica Allen, UCL Institute of Health Equity, 2013

Jessica.allen@ucl.ac.uk

www.instituteoftheequity.org

The Commission on Social Determinants of Health

- The WHO established the Commission on Social Determinants of Health to support countries and global health partners to address the social factors leading to ill health and inequities.
- In 2008, the Commission published a report on health inequalities.

Health inequality developments in England

- Following on from the Commission the British Government commissioned *The Marmot Review* which examined health inequalities in England
- Since it was published in 2010 concern around health inequalities has continued to grow
- In 2013, a similar review was published by the WHO and UCL IHE looking at health inequalities across the European region

Key themes for action

- Reducing health inequalities is a matter of fairness and social justice
- Action on health inequalities requires action across all the social determinants of health
- Reducing health inequalities is vital for the economy – cost of inaction
- Beyond economic growth to well-being

Cost of Inaction

In England, dying prematurely as a result of health inequalities costs 1.3 to 2.5 million extra years of life each year.

Cost of doing nothing

Economic benefits in reducing losses from illness associated with health inequalities each year in England account for:

- Productivity losses of £31-33b
- Reduced tax revenue and higher welfare payments of £20-32b
- Increased treatment costs well in excess of £5b



Inequalities in health

Figure 2.1 Life expectancy at birth by social class, a) males and b) females, England and Wales, 1972-2005

b) Females

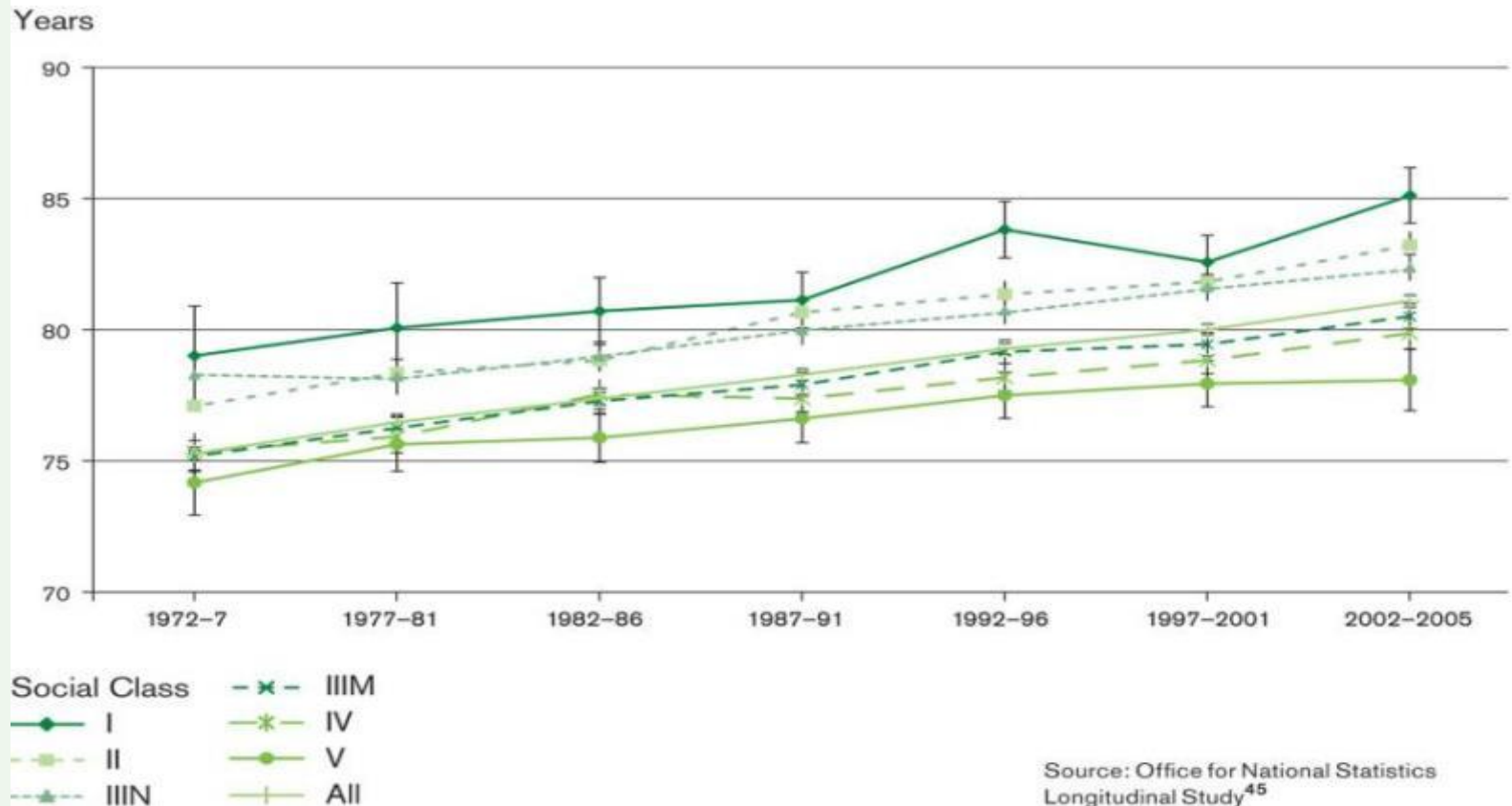
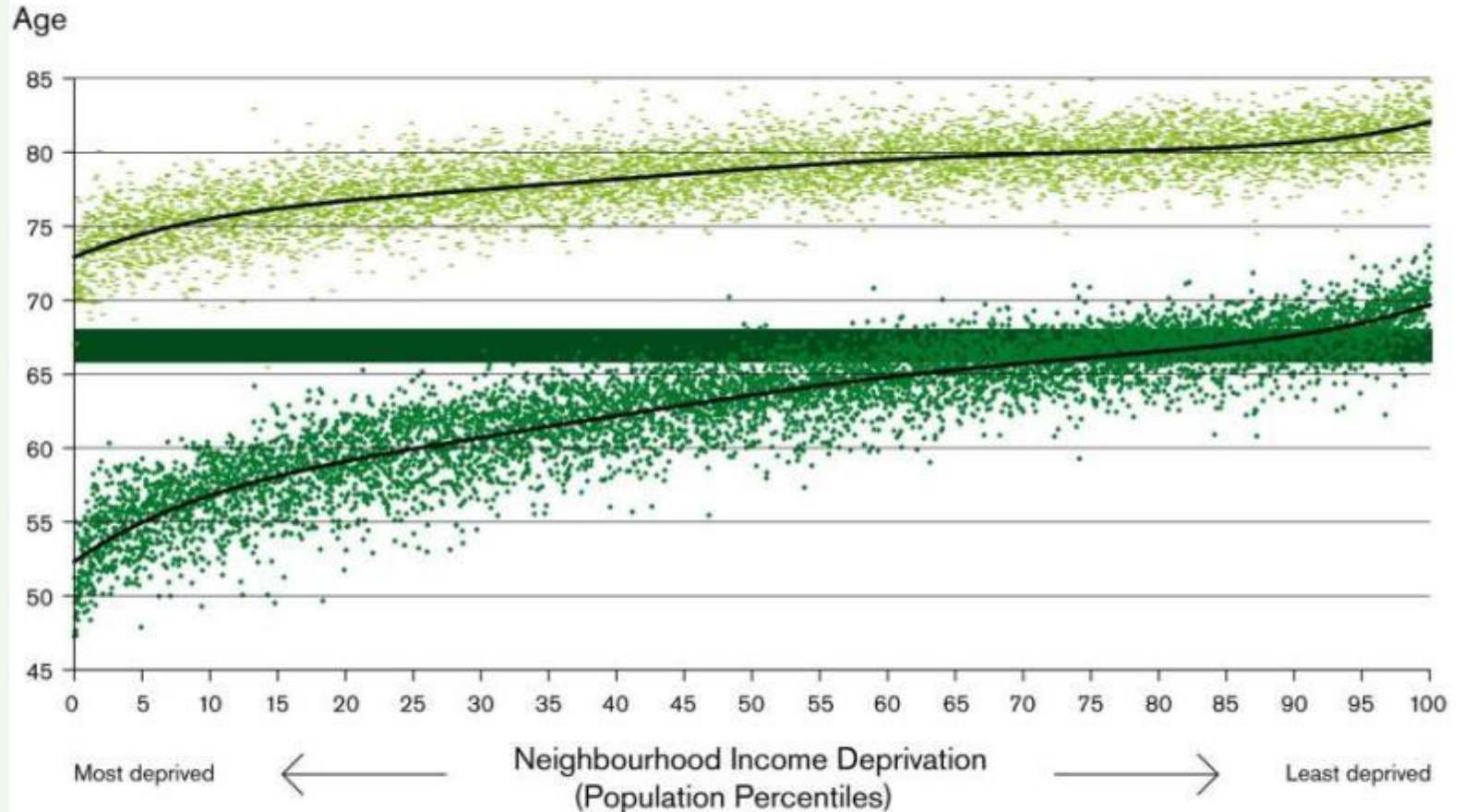




Figure 1 Life expectancy and disability-free life expectancy (DFLE) at birth, persons by neighbourhood income level, England, 1999–2003



- Life expectancy
- DFLE
- Pension age increase 2026–2046

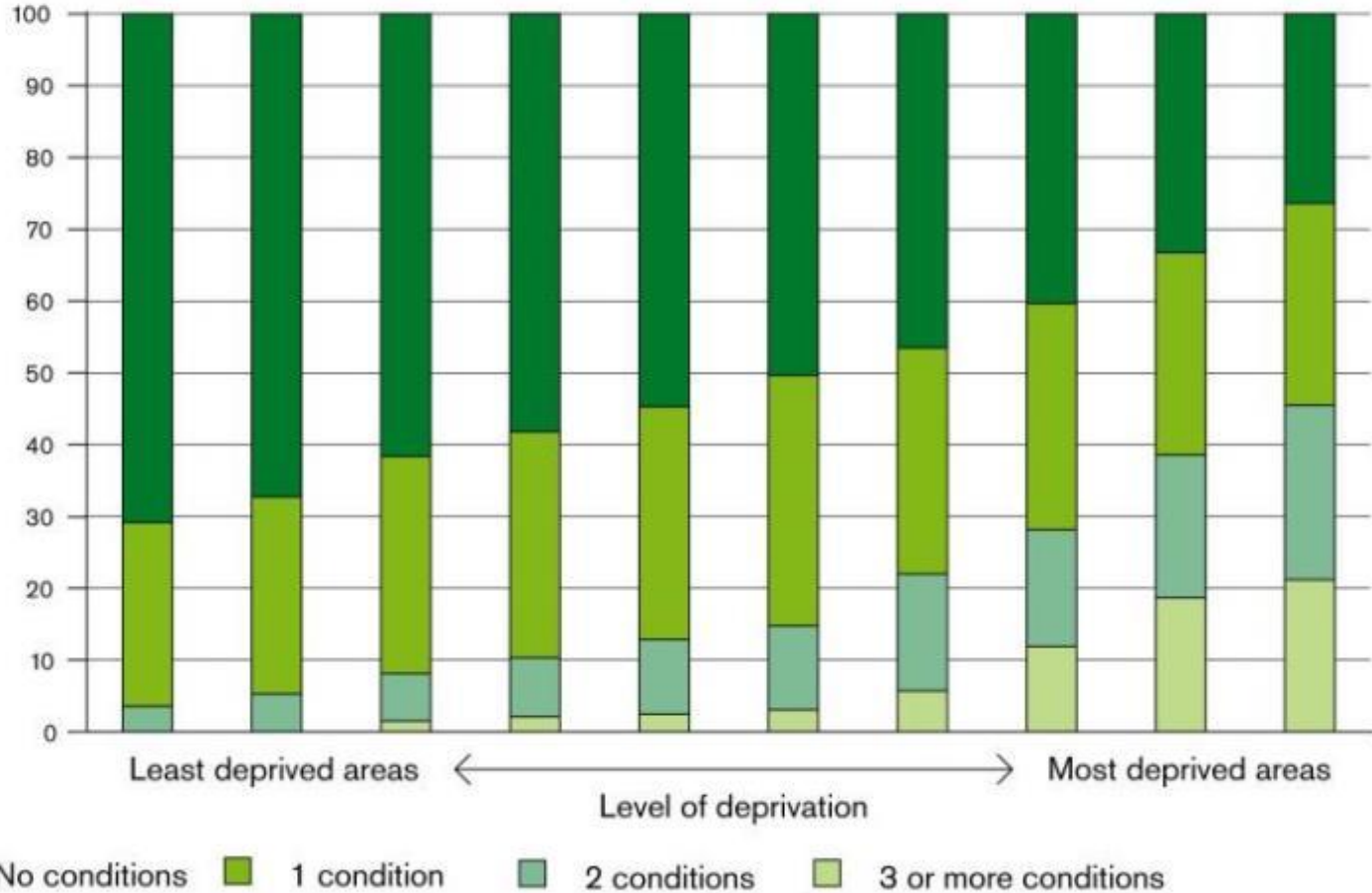
Policy Objectives: The Social Determinants of Health

- A. Give every child the best start in life
- B. Enable all children, young people and adults to maximise their capabilities and have control over their lives.
- C. Create fair employment and good work for all
- D. Ensure a healthy standard of living for all
- E. Create and develop healthy and sustainable places and communities**
- F. Strengthen the role and impact of ill-health prevention



Figure 10 Populations living in areas with, in relative terms, the least favourable environmental conditions, 2001–6

Percentage of the population



Environmental conditions: river water quality, air quality, green space, habitat favourable to biodiversity, flood risk, litter, detritus, housing conditions, road accidents, regulate sites (e.g. landfill)

Source: Department for Environment, Food and Rural Affairs²³

- Evidence of a social gradient in the quality of neighbourhoods
- Poorer people are more likely to live in more deprived neighbourhoods
- The more deprived neighbourhood, the more likely environmental characteristics presenting risks to health.
- Include poor housing, higher rates of crime, poorer air quality, a lack of natural space and places for children to play and more risks to safety from traffic.

The evidence and research on health inequalities

- Income-related inequality in health is affected by exposure to green space.
- Those living in the most deprived areas are 10 times less likely to live in the greenest areas
- Those living closer to green spaces tend to live longer than those with no green space.
- Older people live longer in areas where there is more green space close to their homes
- Children who live close to green spaces have higher levels of physical activity

Premature death and the natural environment

- People living in deprived areas often have less access to natural spaces and have to endure poorer environments, including high levels of congestion, poor air quality and noise pollution.
- There is evidence to suggest that environmental factors contribute to premature death and have been linked to **heart disease, cancer and strokes.**
- This is a particular concern for specific regions in England and areas of high urban populations.

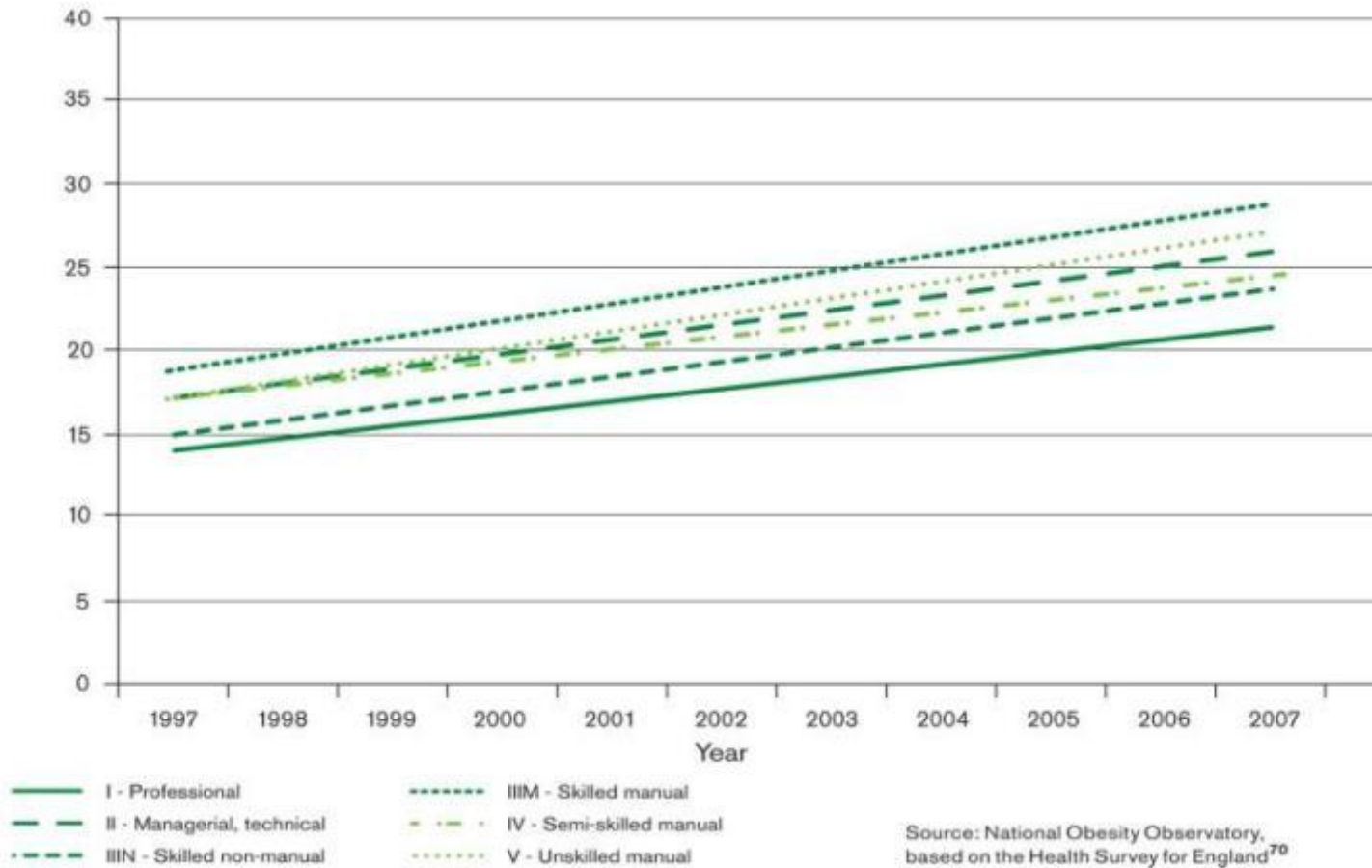
Inequality, obesity and open space



Figure 2.15 Obesity prevalence at ages 16 and over by social class, (a) males and (b) females, 1997–2007

(a) Males

Percentage obese
(BMI > 30)



Obesity and the natural environment

- Obesity in children and young people is a major concern for those who work in public health and the government.
- The evidence shows that contact with the natural environment can benefit children a great deal.
- For example, children living in close proximity to natural environments are more likely to be lighter in weight and be more physically active.

LTCs and the Natural Environment

- Around 15 million people in England suffer with long term health conditions.
- A lack of access to green spaces and poor environmental factors can have a negative impact on LTCs, such as Asthma.
- There are programmes that improve the quality of life for people living with LTCs through contact with natural settings

Mental health and the natural environment

- The natural environment has been known to provide a number of mental health benefits, such as reduced stress and anxiety, improvements in mood and concentration, as well as relaxation and escape.
- People who live in urban, built up areas, with little access to green space, are exposed to the stresses of fast paced, noisy and stressful city life.

Social isolation

- Neighbourhood design e.g. street crossing (fear of traffic) and quality of public spaces (fear of crime)
 - Psychosocial and practical effects of strong social networks
 - Positive health outcomes:
 - Socially isolated 2-5 times more likely to die prematurely than those with strong social ties
 - Protective factor against cognitive decline
 - Reduces risk of depression
 - Social networks can help you recover when you become ill

Access and use

Levels of participation

Overall levels of participation in visits to green spaces and natural environments were higher:

- amongst people aged 25-64,
- those in employment,
- those living in rural areas and
- those in the AB socio-economic groups.

Sectors of society currently disengaged

- The summary findings from the Monitor of Engagement with the Natural Environment Survey (2009-2012)⁵ identified 5 groups who are disengaged with the natural environment:
 - BAME populations
 - Those living in urban areas with high deprivation
 - DE socioeconomic groups
 - People aged 65 and over
 - People with disabilities and/or LTCs

Increase use of green space amongst more deprived groups

- The groups who use green space the least, gain the most in terms of protection from heart disease and stroke.
- Proximity to space is important. Green space within walking distance is more likely to promote physical activity outside the home and if within 1km will reduce prevalence of disease.
- Needs to be inviting/stimulating. Children's play areas/markings increase activity for children. Dense vegetation, graffiti, dog fouling etc reduces feeling of safety and the use of green spaces.

Potential to reduce inequalities

- Poorer individuals tend to have less access to green space, and the green space tends to be of a lower quality, yet their health has been shown to benefit more from proximity to green space.⁽¹⁵⁾
- *“Inequality of access to green space should be addressed as a human rights, social justice and discrimination issue”* – Mental health charity, Mind⁽¹⁶⁾

(15) CABE Urban green nation 2010; Mitchell & Popham 2008

(16) Mind. Ecotherapy: the green agenda for mental health. 2007

Summaries

Direct Benefits of Green space

Green space is associated with:

- decrease in health complaints, eg, blood pressure and cholesterol,
- improved mental health and reduced stress levels,
- perceived better general health, and
- the ability to face problems.

Green space also has indirect benefits:

- it encourages social contact and integration,
- provides space for physical activity and play,
- improve air quality and
- reduces urban heat island effects.



Institute website:
www.instituteofhealthequity.org