

Health and the Environment A Positive Approach



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Introduction: Health and the Environment: A Positive Approach

This Think Piece was born from a recent innovative policy initiative from Scotland Europa Member, Scottish Natural Heritage. The articles that follow contain policy reflections from representatives of NHS Health Scotland, the Scottish Government and the Convention of Scottish Local Authorities. The authors discuss how a positive approach to health and surroundings has brought about marked benefit to various sectors in Scotland.

Initiatives that focus on the importance of positive environment are already being implemented in Scotland. The establishment, protection and promotion of such beneficial natural environments have had, and will continue to have a vital impact on the health of the Scottish people. In the texts that follow, we look at both the evidence behind this policy and the methods for policy implementation. We learn that good environments significantly benefit well-being where the complex relationship between environment and health is understood. It is hoped that the articles within this Think Piece provide ‘food for thought’ for other Member States as well as EU policy-makers.

The issues raised in this Think Piece are timely in that the European Commission is now planning its next steps in EU environment and health policy. New initiatives that give equal weight to pollution mitigation and positive environment policy could act as a catalyst towards meeting European environment and health strategy objectives. With the next European action plan on environment and health due to be launched early next year, we face a real opportunity to take this positive approach forward in 2010.

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This Think Piece Paper has been facilitated by Helen Frew and Rickard Eksten, Scotland Europa.

Foreword

***'Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.'* World Health Organisation**

Scotland's health challenge

Like many European countries, Scotland has a number of long-standing and significant health issues, including cardiovascular disease, obesity and mental health. Increasingly sedentary and urbanised lifestyles contribute to the problem. Despite the sustained investment in health care, the health inequalities between different parts of Scotland and between different socio economic groups are significant and growing. At just 54, life expectancy for people in some parts of Glasgow, Scotland's largest city, is now 28 years shorter than elsewhere in Scotland. It is also estimated that one in four people will also suffer from poor mental health during sometime during their life.

It is widely accepted physical activity contributes to well-being and is essential for good health. Increasing population physical activity levels help in the prevention and management of over 20 conditions and diseases – including coronary heart disease, diabetes, cancer and obesity. Physical activity can help to improve mental health and can help older people to maintain independent lives. However, while physical activity reduces the risks of heart disease and other health problems, most men (over 50%) and women (over 66%) fail to achieve recommended levels of physical activity in Scotland. Similarly, a quarter of boys (26%) and over a third of girls (37%) aged 2–15 years old fail to achieve the recommended 60 or more minutes of physical activity on seven days a week.¹

The Annual Report of the Chief Medical Officer for 2009 showed that the health of Scots is improving. In order to continue this trend, it requires attention to the social fabric of our communities to ensure that people have a positive environment in which to take decisions about their health behaviours. Failure to deliver such an environment is so strongly associated with ill health that it is important to examine the possible mechanisms underlying the relationship if we are to intervene appropriately to generate better health.

These are not challenges for Scotland alone. We know that many of our neighbours across the EU are equally focused on how to improve the health and environment of their communities and we welcome opportunities to share ideas and experience.

I therefore welcome this Scotland Europa Paper for its contribution to current and future thinking on European health and environment policy, especially in that it shows the need for joined up policy making at government level to appropriately address the health challenge.



Dr Harry Burns, Chief Medical Officer for Scotland

¹ Scottish Government – Health Education Population Survey

Developing Scotland's Natural Health Service

The natural environment is one of Scotland's biggest assets, and makes an important contribution to people's health and well-being. However, in common with other European countries, Scotland is facing significant health issues associated with high rates of inactivity. Health policy and practice is increasingly recognising that increased physical activity and contact with nature in the outdoors as part of our everyday lives has an important role in tackling many of these health challenges. In Scotland, we are trying to build new partnerships between the health and environment sectors to try and achieve these goals.

Scottish Natural Heritage (SNH) is the Government body charged with looking after Scotland's nature and landscapes and for promoting enjoyment and understanding of them. One of our key priorities is to increase the contribution of the natural heritage to improving quality of life and health in Scotland. To assist in this work, SNH recently published its first [policy statement and action plan on health](#) aimed at 'Developing the contribution of the natural heritage to a healthier Scotland'.

What can the natural environment and heritage contribute to Scotland's health?

Scotland is renowned for its wildlife, and the natural beauty and amenity of its landscapes. For many, Scotland's extensive areas of mountain, loch, river and coast provide a release from the stresses of modern lives, and can provide challenge, adventure and exploration. However, opportunities to experience and enjoy the natural world can be equally found in the parks, open spaces and nearby countryside in and around our towns and cities, particularly in lowland Scotland where most of the population live.

Scotland's outdoor access legislation applies to most land and water making the outdoors readily available to everyone – activities covered include walking, cycling, horse-riding and wild camping as well as a range of pastimes, such as bird watching, family and social activities.² Scotland has a growing network of local paths and longer distance routes, a well-established family of places managed for informal recreation, and experienced ranger services to help promote public enjoyment. There are also opportuni-



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ties to experience and enjoy some of Scotland's finest nature and landscapes in our National Nature Reserves, National Parks and National Scenic Areas.

This range of settings, and the diversity of activities they can offer for individual and groups, provides important health benefits. In particular, research has indicated the health benefits from 'green exercise'³ can include:

- improved physical and mental health through informal recreation, volunteering and learning in the outdoors;
- recovery from physical and mental problems and a guard against future illness, as well as increased mental concentration through contact with nature;

² These rights and responsibilities are further detailed in the [Scottish Outdoor Access Code](#) prepared by SNH.

³ Green exercise is a term that is increasingly used to describe physical activity in outdoor settings which have strong natural environment components (e.g. green spaces, paths, parks, nature reserves and countryside).

- increased social contact associated with enjoyment of the natural heritage and involvement in its care, which contributes to wider social health and well-being by supporting stronger, more inclusive and sustainable communities; and
- potential to encourage healthier lifestyles by stimulating positive interest in the natural world and promoting outdoor activity at a young age.

Participation in green exercise is free, or relatively inexpensive. It also has a number of other advantages. For example, while some activities require specialist equipment or a minimum level of fitness, easy walking for 30 minutes is achievable for nearly everyone as part of their daily lives. The formality of places such as gyms or fitness clubs can be off-putting for people who are looking to become more active. Green exercise is often easier to keep up because of the greater social contact it can involve, or simply because of the pleasure people get from being in the fresh air, seeing wildlife or enjoying the view. For children and young people, well-designed school grounds and visits to local green spaces and outdoor education centres provide a more stimulating setting for learning across the curriculum, as well as improving health and well-being through increased physical activity and contact with nature.

SNH and the Green Exercise Partnership

As part of its statutory remit, SNH has responsibilities for facilitating enjoyment of the natural heritage and promoting understanding of the right of responsible outdoor access. SNH is also charged by the Scottish Government to champion and lead effort on increasing participation in enjoying the outdoors through recreation, volunteering and learning.

Through the [Scottish Recreation Survey](#) SNH runs each year, we know that most visits to the outdoors⁴ involve walking or other physical activity, thus contributing to meeting the recommended minimum levels of physical activity each week. However, we also know that only about 50% of adults visit the outdoors each week, with weekly participation rates ranging widely in different parts of Scotland. For example, adult participation rates in West Central Scotland, an urbanised area of Scotland, are about 30%. In Aberdeenshire, a more rural area in north east Scotland, adult participation rates rise to about 65%. Therefore, a priority in SNH's work is action to improve provision, promotion and ultimately the use of paths and greenspace, particularly in urban Scotland.

Through our long-standing relationship with non-government bodies such as the Paths for All Partnership⁵, Greenspace Scotland⁶ and Grounds for Learning⁷, SNH has supported the development of practical advice to local government in the planning, design and management of paths, greenspace and school grounds. While the national policy framework is now largely in place and good practice exists on the ground, a step-change is still required in the planning and subsequent management of settlements in Scotland to deliver:



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⁴ The 'outdoors' includes mountains, moorland, farmland, forests, woods, rivers, lochs and reservoirs, beaches and the coast, and open spaces in towns and cities. The visits covered by the survey must be for the purpose of 'informal recreation' or 'recreation'. They include all the non-motorised recreational activity granted a statutory right of access under part 1 of the Land Reform (Scotland) Act 2003 (e.g. walking, cycling, picnicking, etc)

⁵ PFAP is a Scottish charity promoting walking for health and the development of multi-use path networks in Scotland.

⁶ [Greenspace Scotland](#) is a charity promoting better planning and sustainable management of greenspaces in urban Scotland.

⁷ [Grounds for Learning](#) is a Scottish charity, part of the UK charity Learning through Landscapes, promoting outdoor spaces for play and learning in schools and early year settings.

- **high quality design:** creating places which have clear design objectives and include features which promote physical activity and encourage social interaction;
- **active travel:** planning in a range of measures that increase the 'walkability' of developments through functional travel by foot or bicycle, and reduce car use; and
- **restorative environments:** incorporating qualities in our natural and built environment that promote better health and making more use of these in promoting recovery from illness.

At the same time, we need to promote a stronger outdoor culture in Scottish society where physical activity and contact with nature is part of peoples' everyday lives – be it at school, work or close to home. This requires providing better information and more active promotion of the opportunities that exist.

Specific interventions are also required to tackle current health problems and to reduce health inequalities. Working with NHS Health Scotland, the national health agency in Scotland, SNH has helped to fund two specific green exercise programmes:

- **Paths to Health:** established by the Paths for All Partnership, this initiative seeks to increase levels of physical activity through the organisation and delivery of regular walking groups. Over 230 community-based walking schemes are currently in place, led by 2500 volunteer leaders and helping approximately 20,000 people take weekly walks in their local area. Between 2007 and 2010, the Scottish Government is investing a further £3 million to significantly expand this initiative.
- **Green Gyms:** developed by the British Trust for Conservation Volunteers⁸ (BTCV), the Green Gym approach supports practical conservation programmes aimed at those who want to combine moderate physical exercise with environmental tasks. Participants have reported mental health benefits and increased confidence and self-esteem through the learning of new skills and working out in the outdoors.

Other initiatives in Scotland

There are a range of initiatives, many of which have been supported by SNH, that are part of an exciting growth in the establishment of green exercise projects by a range of national and local bodies across Scotland. Examples range from the 'Walk About A Bit' project on the Hebridean island of Islay on Scotland's west coast, through to 'Bums Off Seats' in Fife on the east coast between Edinburgh and Dundee. The Government's forestry body, Forestry Commission Scotland, has also developed the 'Branching Out' programme for improving mental health and, with funding from SNH and other partners, has also employed health advisors to help implement its 'Woods for Health' strategy. Green gyms are also being developed in different settings, including community gardens and allotments, with partners ranging from local health trusts to environment and health charities and local authorities.

A joined-up approach

While individually important, SNH believes we can make more of these projects through developing a more co-ordinated approach, and getting them incorporated into mainstream health service delivery. In 2007, SNH therefore joined forces with Forestry Commission Scotland and NHS Health Scotland to establish the *Green Exercise Partnership*. The overarching purpose of this Partnership is to promote better health and quality of life for people in Scotland through greater use of the outdoors for physical activity and contact with nature. Specific objectives include:

⁸ BTCV is a UK charity promoting a more sustainable future by inspiring people to volunteer and help improve places.

- improving liaison and developing better understanding between the environment and health sectors;
- developing a set of common messages about health and the outdoors with a view to improve the co-ordination of marketing and promotional activities;
- exploring approaches to improve the evidence base and ways to use it to inform policy and practice on the ground; and
- developing a more co-ordinated approach to the funding and development of key initiatives such as health walks, green gym and outdoor play.

With NHS Health Scotland, SNH and other organisations are also working in partnership through the National Physical Activity Research and Evaluation group (NPARE). With funding from the Scottish Government, NPARE is bringing a more joined-up, coordinated approach to the commissioning of physical activity research/evaluation, with the relationship between physical activity and the environment being its initial area of focus.

Future priorities

SNH is planning a range of work to develop the contribution of a natural heritage to a healthier Scotland, including action with partners on green prescription, the Central Scotland Green Network and protected areas. Other priorities identified by the Green Exercise Partnership focus include co-ordinated effort on media and social marketing to encourage increased levels of physical activity and contact with nature, and better use of the hospital estate for health treatment, recovery and promotion.

Green Prescriptions

'Green prescription' is a term that is increasingly used to describe a referral scheme by primary health care practitioners and community health projects which involves physical activity in outdoor settings with a strong natural environment component, e.g. greenspaces, paths, parks nature reserves and countryside. Building on many of the green exercise projects described above, we want to see 'green prescription' becoming a more a more mainstream component of primary and community health care. An important first step in this process is reviewing current practice, and with funding from SNH, NHS Health Scotland has commissioned research to look at current experience, to identify the factors which have influenced the use and take up of green prescriptions and to make recommendations on how it could be promoted further in practice.

Central Scotland Green Network

Over the last few years SNH has been at the forefront of work to develop 'green networks' of linked open spaces as a mechanism to deliver social, environmental and economic benefits. A number of green network initiatives are already underway in Central Scotland, an area that includes Scotland's two main cities, Edinburgh and Glasgow, and the majority of the population. In January this year, Scottish Ministers identified in planning guidance the creation of a green network across Central Scotland as a national priority. Led by SNH and the Forestry Commission Scotland, this *Central Scotland Green Network* aims to bring together existing initiatives, and work with local authorities, landowners, NGOs and communities to improve environmental quality across the region. A key objective of the network is to make it easier for people to visit high quality greenspaces close to where they live, leading to improved health and reduced health inequalities.

Developing the Potential of Protected Areas

Another important area of SNH activity is work on protected areas, including responsibility for Scotland's European network of Natura 2000 Sites. In total, some 28% of Scotland's land area is nationally or internationally designated, with the vast majority of Scotland's population within 5km of a protected area. SNH believes there is therefore considerable scope to make better links between the delivery of health benefits and protected areas, particularly where these areas are close to where people live and are places for people to access easily. SNH is an active member of the Europarc Federation, a European network of over 500 protected area managers, including managers from National Parks and Natura 2000 sites. The Europarc Federation is considering the development of a health charter for protected areas. In Scotland such a health charter could promote greater health-related activity by park managers, including developing formal links with local primary health care services, specific outreach activity for health inequality groups, and the adoption of common frameworks for monitoring and evaluation of the health benefits from outdoor activity and contact with nature.

Conclusion

Scotland, in common with other European countries, faces serious health issues associated with increasing inactivity. Within Scotland, the links between health policy and the environment have traditionally focused on addressing negative environmental effects as a result of problems such as pollution. However, awareness is growing of the positive role that good environments play in supporting health improvements for the people of Scotland and a range of initiatives and good practice is emerging as detailed in this article and by the other contributions in this report.

Within the European Commission, the links between health policy and the environment have also had a traditional focus on tackling negative environmental effects. In terms of this new agenda, there is undoubtedly much good practice across Europe to learn from and to share. A strong policy lead from the European Commission – for example, through the European Health Action Plan – would undoubtedly encourage Member States to consider more ways to increase the contribution of outdoor activity and contact with nature to improving public health and well-being. This can only pay dividends in the future for the prosperity of Member States.

Pete Rawcliffe, Head of Quality of Life Unit, Scottish Natural Heritage

*Marianne Sandison, European and International Officer, Government Relations Team,
Scottish Natural Heritage*

Good Places Better Health

Recognising the important link between environment and health, and in the realisation of the 'green exercise' initiative, NHS Scotland and Scottish Natural Heritage have been working together for some time. Alongside joint initiatives, separate complimentary policies have also been pursued. In this way Scottish public bodies are working in tandem to address the complexity of physical environment and its relationship with well being.

Good Places, Better Health is a new public health policy initiative launched by the Scottish Government in December 2008. It reflects a recognition that the physical environment – places where we live, work, learn, socialise and play – is pivotal within a complex mix of influences which create and destroy health and wellbeing. The importance of addressing hazards in the environment has of course long been central to protecting public health. However, there is a more subtle relationship between people and place which demands greater attention from those wishing to promote better health and greater equality in health. *Good Places, Better Health* embraces this new and more holistic perspective but also breaks new ground in how it analyses and presents problems and in its systematic approach to assembling and evaluating intelligence to shape and deliver recommendations for policy makers. The initiative is structured to maximise stakeholder involvement and facilitate a new type of relationship between science and policy.

Today, it is widely accepted that, when it comes to what creates and destroys health and wellbeing, "everything matters". Put in another way our health is the product of a complex interaction of many factors. Yet this complex reality is often disregarded when policies are developed to address problems in public health. Thus, policies seeking to prevent the population being affected by environmental hazards or to create healthy places can be undermined if they don't take account of a social context, individual behaviour, demography, economic factors or simply how people feel about the places they live. In similar vein, the effectiveness of policies to promote healthy behaviour can be rendered ineffective if they take insufficient account of the social and physical context in which they are received are delivered.

Good Places, Better Health tries to reflect this more complex reality but seeks always to be pragmatic and policy-relevant. Using an approach termed "situational modelling", a wide range of stakeholders are brought together to develop a 'picture' or more accurately populate a model of the many interacting influences which contribute to specific health outcomes whether positive or negative. To ensure that it is truly comprehensive, it is necessary to reflect existing policies and actions within the model if these have potential to influence the health outcome under consideration. The populated models are then refined and used to structure a research and intelligence gathering process. With careful evaluation, this offers a much fuller understanding of the issue under consideration. Notably it highlights gaps in knowledge (defining a research agenda), gaps in information (perhaps a lack of data about a key variable) or instances where policies are ineffective or even absent. This allows clear health-relevant messages to be shaped for policy makers. Emphasising the cross-cutting nature of *Good Places, Better Health* the messages are not always directed towards a public health or environmental constituency but perhaps towards those concerned with planning, regeneration, transport, the rural environment, agriculture, food policy, the social environment etc.

Organising to Deliver

The Scottish Government has identified a number of priorities in health and environment around which the systems and structures of *Good Places, Better Health* will be developed and to which the approach will be applied in an initial three year prototype phase. These are (with an emphasis on children eight years and under) asthma, unintentional injury, mental health and wellbeing and obesity. Additionally, *Good Places, Better Health* will seek to better understand and optimise the health benefits which may flow from the pursuit of sustainable homes and their immediate environments.

Unsurprisingly a complex crosscutting strategy like *Good Places, Better Health* which demands input from many sectors, agencies and other stakeholders and which seeks to link science, paradigm and policy, demands good governance. A robust and transparent governance framework has been agreed and is now being implemented to deliver the new initiative. A key consideration has been how to ensure stakeholder representation in all tiers of governance.

As *Good Places, Better Health* is rolled out, policy and action on environment and health should begin to look and feel quite different in Scotland. It will move beyond a rather narrow, compartmentalised and hazard-focused agenda to achieve wider public health relevance. In the long term success ought to be judged by the difference *Good Places, Better Health* makes to health, wellbeing and greater equity in health and wellbeing across society. A more intermediate measure of success will be in how it changes the way policy makers exploit the potential of place in delivering health goals.

Good Places, Better Health is strongly dependent on the effective delivery of certain key work packages designed to investigate, assemble and evaluate intelligence. Work to produce and populate the situational models is being led by NHS Health Scotland, while Health Protection Scotland leads work packages concerned with assembling quantitative and qualitative information on key variables.

A further innovative feature of *Good Places, Better Health* lies in its commitment to facilitate a new relationship between research and the policy process. The Scottish Government has awarded, through its Rural and Environment Research and Analysis Directorate a significant grant to The [Environmental Determinants of Public Health in Scotland \(EDPHiS\)](#) project. EDPHiS is a multi-disciplinary collaborative research project led by the Edinburgh-based Institute of Occupational Medicine and involving a number of Scottish and UK research partners. It aims to support the development of public policy in Scotland, insofar as these policies may affect public health through people's interactions with their environment. In practice, this means working closely with and supporting *Good Places, Better Health* throughout its prototype phase.

EDPHiS will summarise evidence and building from the same situational modelling approach developed for *Good Places, Better Health*, create as far as practicable, a quantitative model of the relationships between the complex determinants of health. It will then link this necessarily limited model with data on demography, environment, health and other factors in Scotland, to predict the public health consequences of proposed actions that, intentionally or not, may affect health via people's interaction with their environments.

The work of EDPHiS will focus on the initial priority health outcomes of the Strategic Framework for Environment and Health described above and how possible actions may affect not only health overall, but also inequalities in health.

Professor George Morris, Consultant in Ecological Public Health, NHS Health Scotland

Promoting Active Transport

Environment and health policy need to be proactive. The work carried out by Scottish Natural Heritage concludes that accessibility to environment is vital in that it provides opportunity and inspiration for more active lifestyles. The Scottish Government transport strategy takes this fully into account. We recognise that the health effects of an inactive life are serious and associated with disease, disability and poor mental health. In contrast, people who are active can enjoy a longer life, run less risk of developing many chronic diseases, and have greater mental wellbeing and fewer symptoms of depression, lower rates of smoking and substance misuse and the ability to function better at work and at home. People cycling regularly in mid-adulthood typically have a level of fitness equivalent to being ten years younger, and a life expectancy two years above the average. The health benefits of cycling far outweigh the risks involved thanks to these extra life-years – by a factor of 20:1 according to one estimate.

Currently in Scotland, 2% of people cycle to work and 1% of children cycle to school. In order to increase these figures the Scottish Government has recently consulted on a Cycling Action Plan for Scotland which includes a vision that by 2020, 10% of all journeys taken will be by bike. Achieving this vision will help the Scottish Government reach its ambitious climate change target, will encourage more people to cycle more often and will aid the population to live longer, healthier lives. The Action Plan will be published in April 2010. Changing travel behaviour can be a big step if for those who have always relied on a car or a driver. *Smarter Choices, Smarter Places* is a £15 million Scotland-wide initiative to encourage Scots to reduce their car use in favour of more sustainable alternatives such as walking, cycling and public transport.

Scotland is rolling out active transport schemes around the country. In the north, despite changeable weather and lack of winter daylight, *Kick Start Kirkwall* in Orkney will aim to increase its walking (33%) and cycling (4%) levels which are already significantly higher than the national averages. In the east of Scotland, *Dundee Travel Active* has defined six “pathways” to reach people within central Dundee to achieve a shift in attitude and behaviour towards healthier, more sustainable travel. Towards the west, in Kirkintilloch and Lenzie, the *Healthy Habits* project is encouraging active travel to local shops, parks and services by demonstrating the health, environmental and financial benefits it can bring. And in the south, *GoSMART Dumfries* aims to go beyond the “cycle for leisure” culture to make cycling a means of travel for everyday life. This has been achieved through grants to NGOs and stakeholders to encourage and promote active and sustainable travel, by encouraging local authorities to develop cycling strategies as part of their local transport strategies and to link these with education and health improvement initiatives and in their Single Outcome Agreements. The government has also provided support to local authorities for cycling projects through dedicated allocations for cycling, walking and safer streets projects and has funded the National Cycle Network in Scotland through sustainable transport charity Sustrans.

Studies looking at the EU and US have found that there is a direct link between an increased percentage of the population using active transport and decreased obesity.⁹ The Scottish Government’s policy is acting to bring the percentage of active transport use to above that of other EU Member States. This policy is one aspect of the many approaches to environment required in order to benefit the health and welfare of the people of Scotland.

Karen Furey, Sustainable Transport Team, Scottish Government

⁹ *Journal of Physical Activity and Health*, 2008, 5, 795-814

Planning for health – Environment and health inequalities

Research shows that health inequalities can be closely related to a number of different aspects within ‘environment’ be it the physical, social, or built environment. COSLA, the Convention of Scottish Local Authorities, recognising that environment and health policy requires joined up action at governmental level, works both with partners at Scottish and EU level to tackle environment and health inequalities. For example, by submitting to ‘Tackling Health Inequalities’ COSLA contributed to the Joint Ministerial Task Force which, alongside government ministers and representatives from local government, also brought together the NHS, third sector and the research community to develop the Scottish health inequalities agenda. The Task Force’s full report on health inequalities *Equally Well* was published in June 2008.

While life expectancy and levels of health in Scotland have steadily improved over the last 50 years, disadvantaged social groups have seen a lesser improvement, meaning that health inequalities have widened. Consequently, there are now significant inequalities in relation to mortality, physical illness, mental health and wellbeing, and access to and use of health services. Scottish evidence indicates that those who report the highest levels of living in poor local environmental conditions are most likely to be anxious, depressed and in a poor state of health. They are also less likely to take part in physical activity and more likely to smoke. These are behaviours closely related to key health inequalities, such as obesity, cardiovascular disease and diabetes.

Key services that lie at the heart of reducing health inequalities – social work, economic development, community regeneration, education and housing – are areas in which local government has significant expertise. The question is how best these services can be utilised to effect change in the environment so as to reduce inequalities in the distribution of health. COSLA has addressed health inequalities in parallel with several areas of environmental policy. Access to green space and outdoor leisure pursuits which can contribute to well being and promote physical activity can be a function of both income and geography. Sustainable and active methods of transport which promote both environmental and health goals are promoted by access to services and facilities such as cycle paths. Other issues which link these policy areas include air quality and the resources available to different geographic areas to cope with adaptation to climate change.

All of these matters are being actively addressed by local government who are working to improve the accessibility of services, to prioritise disadvantaged groups and to create social opportunity for the youngest members of our communities. An example from one of the *Equally Well* test sites is in Glasgow City where the test site aims to develop good practice by incorporating health within the planning process and recognising that place and space have an impact on human health and wellbeing. This involves:

- events with planners, architects and developers, and community representatives to build cross-sectoral momentum and ownership for the test site;
- the development of a tool kit and associated training, based on the experience of the East End work;
- supporting planners in considering the health impact of their work; and
- identification of early opportunities in neighbourhood planning to bring together services and communities to work through the tool kit together and development of the planning workforce and enhanced decision-making processes.

Through this, the expected outcomes are to improve mental health in deprived neighbourhoods through engagement in decisions which affect their lives and environmental improvements and tackling obesity levels through environmental action in the city’s more deprived neighbourhoods. Equally, COSLA works with community planning partners to

reduce inequalities – health boards in particular will have an obvious role to play in complementing local government activity.

Under the built environment, quality housing is also necessary for good mental and physical health. Councils are committed to the delivery of quality, affordable, accessible and sustainable housing across all tenures. The demand for affordable housing currently outstrips supply. Through the Ministerial Housing Supply Task Force, which focuses on the barriers to house building (e.g. lack of infrastructure), COSLA aims to increase the numbers of houses being built in areas experiencing specific housing pressures. Maintaining and improving housing stock reduces health inequalities by improving individuals' physical environment and reducing fuel poverty. There is a body of evidence that links poor housing and ill health, especially mental health and wellbeing. Neighbourhood characteristics such as badly maintained shared space and crime in the local area can be a contributory factor to housing conditions having a negative impact on health.

In addressing environment and health at EU level, local authorities therefore have a wealth of expertise and experience and will be a crucial partner in effective delivery of future projects.

COSLA has been closely working together with the Scottish Government to develop the health inequalities agenda where a number of key priorities have been highlighted:

- Children's very early years, where inequalities first arise and may influence the rest of people's lives.
- The high economic, social and health burden imposed by mental illness, and the corresponding requirement to improve mental wellbeing.
- The "Big Killers" including cardio-vascular disease and cancer. Risk factors for these, such as smoking, are strongly linked to deprivation.
- Drug and alcohol problems and links to violence that affect younger men in particular and where inequalities are widening.

Environment policy is just as important as health policy when tackling these challenges. Consequently, COSLA's proposed commitment to the health inequalities agenda is based on long-term thinking aimed at achieving a sustainable, mainstreamed and strategic approach to health inequalities. At the European level, COSLA's Brussels Office is closely cooperating with its European local government counterparts on these issues, especially in sharing expertise with the associations of Finland and Denmark, where local authorities are in charge of running hospitals. Further action will be achieved through the Council of Municipalities and Region's health task force on the European Commission's communication on health inequalities.

Targeting the most disadvantaged social groups must be a priority. Improving an individual's physical environment including the aesthetics of their surroundings is known to lead to a dramatic improvement in both their mental and physical condition. Local authorities are key actors in the regeneration of urban environment to the benefit of public health. From a strategic point of view, shared learning and increased funding would undoubtedly lead to great steps forward in reducing social inequalities.

COSLA, the Convention of Scottish Local Authorities

Conclusion – EU Recommendations for ‘Green health’

Scotland shares many health challenges with the rest of Europe. These include long standing problems such as cancer, heart disease and obesity as well as the new challenges that an ageing population and social inequality bring.

The evidence shows that increased physical activity and access to ‘health promoting places’ such as the natural environment can significantly improve a population’s health and social problems. Scottish Natural Heritage is therefore developing policy solutions demonstrating how good environment can positively affect poor health. Their measures include a cross cutting approach to policymaking, linking better urban planning to promotion of active travel and restorative environments. SNH advocates a culture of outdoors that inspires people to protect nature and biodiversity because they have a *vested* interest in their surroundings.

This paper has looked at what we mean by the term ‘positive environment’ from several perspectives. From the contributing articles it is clear that there is a wealth of research and knowledge in Scotland that can benefit health and environment policy making elsewhere. Using these Scottish examples it is hoped that lessons can be learned and new measures implemented at EU level. In particular, the recommendations from the *green exercise partnership* and *Good Places, Better Health* could provide guidance for policy that can become practice in any Member State.



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The recommendations include:

- Improved liaison and better understanding between the environment and health sectors of government
- Common messaging between all directorates
- Innovation in how research translates into public awareness
- Improved coordination between funding and planning
- Maximising stakeholder involvement
- Offering incentives as well as penalties in environmental legislation

The EU dimension

This paper has shown that, in reaching the ultimate objectives of the European Commission environment and health strategy, the positive impact of environment on health can not be overlooked. Within the EU, several programmes are underway that promote better health via the environment. They include an urban mobility action plan, as well as initiatives to promote biodiversity and to improve our approach to nutrition in the fight against obesity. While highly important in their own right, these measures are scattered across directorates and have no clear cross-over; a framework in which they all operate under the same banner of promoting positive environment for good health.

The current and future environment and health action plans restrict their focus to preventative environmental protection, in other words, priority areas already identified which relate to environmental pollution. Other broader instruments at EU level addressing environment and health include the 6th Environmental Action Programme and the

Sustainable Development Strategy. While they do both recognise that there is a need for better management of natural resources, it is clear that at EU level, here too, priority in public policy making is given to mitigation of 'bad environment'. The maintenance, incentivising and ultimately improvement of 'good environment' for the purpose of public well-being have not been given parity at EU level.

Recognising that the EU has a duty to help Member States pool their expertise in this area so that they can better co-ordinate their response to health threats, this Think Piece concludes with the following **EU Recommendations**:

- Development of a comprehensive 'good environment' communications strategy and information system at EU level.
- Within the upcoming Action Plan, identify clear measures and allocated resources to share good practice in increased co-operation and co-ordination on environment and health issues.
- A clear commitment from DG Environment and DG Health and Consumers to *equally* commit to working together to achieve the aims of the Action Plan
- Expansion of the existing European Commission environment and health website pages to incorporate the benefits of 'good environment'.

With the launch of the post 2010 Environment and Health Action Plan expected in early 2010, a golden opportunity presents itself for a new direction in Commission policy that would achieve positive environment and health promotion.

Scotland Europa

About the contributors

Scottish Natural Heritage

Scottish Natural Heritage (SNH) is a government body responsible to Scottish Government Ministers and, through them, to the Scottish Parliament. SNH's statutory purposes are to: secure the conservation and enhancement of Scotland's natural heritage; to foster understanding and facilitate enjoyment of it; and encourage its sustainable use.

If you would like to know more about SNH's work in this area, please contact [Pete Rawcliffe](#), Head of Quality of Life, Policy and Advice Directorate, Scottish Natural Heritage.

NHS Health Scotland

NHS Health Scotland is the national agency for improving the health of Scotland's population. A Special Health Board in NHS Scotland, NHS Health Scotland work on every aspect of health improvement, from gathering evidence, to planning, delivery and evaluation, and spans the range of health topics, settings and life stages. By increasing knowledge, from evidence of effectiveness and need to public awareness of important health messages, Health Scotland is helping to build a healthier future for everyone living in Scotland.

Scottish Government

The Scottish Government aims to promote economic growth, social inclusion and sustainable development through a safe, integrated and efficient transport network. The Sustainable Transport Team was formed in 2006 and has policy lead on climate change in transport. They are working to reduce the environmental, social and economic impact of travel in Scotland. Sustainable transport is part of the Scottish Government's strategic objectives for the economy, health, the environment and communities and complements the Government's commitment to tackling climate change. For further information about *Smarter Choices, Smarter Places*, including links to individual project web pages, visit www.scotland.gov.uk/Topics/Transport/sustainable-transport.

Convention of Scottish Local Authorities

The Convention of Scottish Local Authorities (COSLA), is the representative voice of Scottish local government and also acts as the employers' association on behalf of all Scottish councils. COSLA Brussels office provides for general representation of COSLA and member authority interests in Brussels and pursues the interests of Scottish local government by focusing on intelligence gathering, policy watch, advocacy, liaison and networking and raising the profile of Scottish local government and COSLA. For more information contact [Elfreda Whitty](#).

Scotland Europa

Scotland Europa is a membership-based organisation that promotes Scotland's interests across the institutions of the European Union and to the representatives of Europe's regions and Member States. We help Scottish organisations foster successful European relationships, providing guidance on European policies and funding. Scotland Europa membership brings together a wide range of Scottish organisations from the public, private and education sectors. We are also part of Scottish Enterprise working closely to support our colleagues, both in Scotland and in Scotland Development International offices across the world, to enhance Scotland's economic development and influence in Europe.

For further information on this Scotland Europa Paper please contact [Rickard Eksten](#), EU Policy Executive.