Health impacts of environmental and social interventions designed to increase deprived communities’ access to urban woodlands: a mixed-methods study

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researcher (2006–11) on commissioned research funded by FCS to undertake an evaluation of some of its Woods In and Around Towns programme. Richard Mitchell is a non-remunerated director of a charity (Paths For All), which delivers, and advocates for, walking for health.
Poor mental health is a major public health problem. Evidence suggests that natural environments, such as woodlands, can support or improve mental health.

The health impacts of physical improvements to the environment and community events designed to increase people’s use and enjoyment of woods in and around towns in Scotland were examined. Three woodlands that had received interventions as part of Forestry Commission Scotland’s Woods In and Around Towns (WIAT) programme and three similar woodlands that had not were studied. Methods included doorstep surveys of community members, walks with local people to assess their woodland quality and other discussions with planners and locals.

It was found that the WIAT projects did not help to reduce people’s levels of stress in those communities; in fact, their stress levels went up. This is difficult to explain; factors outside those studied may have influenced stress levels. There was no change in people’s general health and quality of life. However, the WIAT projects made a small difference to how often people visited natural environments and people in these communities who visited natural environments were also likely to be less stressed than those who did not visit natural environments. The WIAT project communities also reported that their moderate physical activity levels had increased somewhat. When members of the local community were asked about the WIAT changes, they reported that they appreciated physical improvements to the environment and ranger-led activities but they had concerns about longer-term maintenance and antisocial behaviour.

This study showed that WIAT projects are low cost. However, without any benefits to overall health found immediately after the interventions, they cannot be counted as cost-effective.
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