

## Giving People More Green Space

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The Latin word *urbs* gives us both “urban” and “urbane” presumably because, for some curious reason, city life used to be associated with refinement. That was not true of ancient Rome and hardly seems appropriate for any city today so when a team from the Netherlands Institute for Health Services Research writes about “urbanity” we should not be surprised to find that they are referring to the number of households per square km rather than polished manners.<sup>1</sup> “Urbanicity” is preferred by others.<sup>2</sup> Maas et al., working in the very overcrowded Netherlands, have been looking at the notion of “environmental injustice” whereby socioeconomic factors and urban planning combine to deprive many city dwellers of access to green space.<sup>1</sup> This study is the first bit of a 4-year three-part program, due to finish at the end of 2008, called Vitamin G (G for green).<sup>3</sup> The next two will look at mechanisms other than stress reduction as possible explanations for the health benefits of local or accessible green space, such as physical activity and social cohesion, and at the effects on wellbeing of allotments, parcels of land commonly made available for rental in several parts of Europe for those who have no gardens of their own or only very small ones.

As Maas et al. point out, previous studies in this area have tended to look at extremes of green-space access and deprivation. They wanted to know if there was a continuum, a dose–response relationship in other words. Over 250,000 people of all ages who had been registered with the same family physician for at least 12 months completed a questionnaire which sought basic demographic information and the answer to a simple question on their self-perceived health—namely, “In general, would you say your health is very good, good, etc.” Green space within 1 or 3 km was assessed from the Dutch National Land Cover Classification database.

The key finding was a steady decline in the percentage of people perceiving their health to be less than good as the percentage of green space within 3 km of where they lived rose, and that was after controlling statistically for demographic and socioeconomic factors and population density itself (urbanity). The finding is significant but hardly dramatic because the frequency of perceived poor health was not that high, ranging from about 16% when there was no green space nearby to 10% when there was greenery galore. Nonetheless Maas et al. conclude that their research shows that “green space is more than just a luxury.” Planners should bear in mind the health benefits of green space, they argue. This sort of thinking is not unique to the Netherlands. For example, last year in the UK the organization GreenSpace (formerly the Urban Parks Forum but now with a wider remit; see <http://www.green-space.org.uk>) held a conference with the “Natural Health Service” as its theme. Earlier this year the Commission for Architecture and the Built Environment (<http://www.cabe.org.uk>) organized a Health Week which

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included the interesting speculation that if Hyde Park in central London contributes 10% to the physical activity of 100,000 people living nearby that might spare the British economy £3 million (about \$4.2 million) in a year and the National Health Service £600,000.

Those keen on there being a health dimension to urban design must be wondering what sort of evidence planners and politicians will find persuasive. Will it be estimates of the economic benefit, for example, or data indicating that the life expectancy of senior citizens increases if they have access to walkable green space<sup>4</sup> or the gentle gradient of benefit to self-assessed health recorded by Maas et al.?

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