



## **Submission**

# *Inquiry into Environmental Design and Public Health*

**June 2011**

*beyondblue: the national depression initiative*  
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*beyondblue: opening our eyes to depression throughout Australia*



## Environmental Design and Public Health

### *beyondblue: the national depression initiative*

*beyondblue* is pleased to present this submission on *Environmental Design and Public Health* to the Legislative Council Environment and Planning Reference Committee. In making this submission, *beyondblue* has focussed on the **high prevalence mental health disorders of depression and anxiety**, the impact on consumers and carers, and areas that are most relevant to our work and research findings. **In 2010 *beyondblue* commissioned a review of Australian and international literature on the links between mental health (in particular depression and anxiety), wellbeing and green spaces.**<sup>1</sup> **The findings and outcomes of this review are presented in this submission.**

*beyondblue* is a national, independent, not-for-profit organisation working to address issues associated with depression, anxiety and related disorders in Australia. Established in 2000, initially by the Commonwealth and Victorian Governments, *beyondblue* is a bipartisan initiative of the Australian, State and Territory Governments, with the key goals of raising community awareness about depression and anxiety and reducing stigma associated with the illnesses. *beyondblue* works in partnership with health services, schools, workplaces, universities, media and community organisations, as well as people living with depression and anxiety, to bring together their expertise. Our **five priorities** are:

1. Increasing community awareness of depression and anxiety and addressing associated stigma.
2. Providing people living with depression and anxiety and their carers with information on these illnesses and effective treatment options and promoting their needs and experiences with policy makers and healthcare service providers.
3. Developing depression and anxiety prevention and early intervention programs.
4. Improving training and support for GPs and other healthcare professionals on depression and anxiety.
5. Initiating and supporting depression and anxiety-related research.

Specific population groups that *beyondblue* targets include young people, Indigenous peoples, people from culturally and linguistically diverse backgrounds, people living in rural areas, and older people.

### Prevalence and impact of depression and anxiety disorders

Depression, anxiety and substance use conditions are the most prevalent mental health disorders in Australia.<sup>2</sup> One in three Australians will experience depression and/or anxiety at some point in their lifetime and approximately 20 per cent of all Australians will have experienced depression, anxiety or a substance use disorder in the last year.<sup>3</sup> People experiencing depression and/or anxiety disorders are also more likely to have a comorbid chronic physical illness.<sup>4</sup>

Mental illness is the leading cause of non-fatal disability in Australia, and it is important to note that depression and anxiety accounts for over half of this burden.<sup>5</sup> Globally, the World Health

Organisation predicts depression to become the **leading cause of burden of disease by the year 2030**, surpassing ischaemic heart disease.<sup>6</sup>

Mental illness costs the community in many different ways. There are social and service costs in terms of time and productivity lost to disability or death, and the stresses that mental illnesses place upon the people experiencing mental illness, their carers and the community generally. There are financial costs to the economy which results from the loss of productivity brought on by the illness, as well as expenditure by governments, health funds, and individuals associated with mental health care. These costs are not just to the health sector, but include direct and indirect costs on other portfolio areas, for example welfare and disability support costs. **It is estimated that depression in the workforce costs the Australian society \$12.6 billion over one year, with the majority of these costs related to lost productivity and job turnover.**<sup>7</sup> The individual financial costs are of course not exclusively borne by those with mental illness. It is often their carers who experience financial hardship due to lost earnings, as well as increased living and medical expenses.<sup>8</sup>

## **beyondblue's response to the Environmental Design and Public Health Inquiry**

### ***Terms of Reference 1: Evidence of the contribution of the natural and built environments to the promotion of health and wellbeing***

Research suggests that there is a strong relationship between natural and built environments and health and wellbeing. In 2010 *beyondblue* supported the Parks Victoria **International Healthy Parks Healthy People** congress, which explored the links between nature, the environment and health. The *Healthy Parks Healthy People* philosophy is founded on the following principles:

- Parks are integral to healthy people and a healthy environment
- Human health depends on healthy ecosystems
- Parks conserve healthy ecosystems
- Contact with nature can improve human health
- Parks contribute to economic growth and wellbeing
- Parks contribute to cohesive, vibrant and healthy societies.

These principles are based on international research and evidence, demonstrating the value of accessing nature, to promote health and wellbeing. This includes the **beyondblue-commissioned Beyond Blue to Green research review**<sup>9</sup>, which specifically assessed the links between mental health and wellbeing, and green spaces. As suggested in this review, living in a 'green' environment supports physical and mental health, and this relationship is strongest for anxiety disorders and depression. People who perceive their neighbourhoods as *very green* have been shown to be up to 1.6 times more likely to have better physical and mental health, than those who perceive their neighbourhoods as *lower in greenness*.

The range of psychological benefits for people who visit green, open spaces is considerable. They include:

- a place to escape to away from school/university or workplace
- changes of scenery
- improvements in mood
- lower levels of anxiety
- lower stress levels
- lower levels of depression
- increased physical activity.

The beneficial effects of green spaces apply to all population groups, regardless of age, gender, race, ethnicity and health status. However this relationship is strongest for children and people on low incomes.

Accessing natural environments supports key components of child development. This includes developing a sense of identity, autonomy, psychological resilience and learning healthy behaviours. Children who experience high levels of contact with nature are also reported to have higher levels of self-worth and higher cognitive function. A Melbourne-based primary school study assessed the social and mental health benefits of nature-based activities.<sup>10</sup> The benefits related to:

- caring for living things which assists the development of empathy
- seeing the changes taking place in the cycle of life, such as growth and change which builds resilience
- improvements in neuro-behavioural disorders in children (e.g. Attention Deficit Hyperactivity Disorder)
- improved attitudes towards school and relationships with peers and adults
- greater calmness and reductions in disruptive behaviour
- giving children a sense of freedom to be creative and make discoveries which enhance their self-esteem and self-confidence
- increased perceptions of wellness and sense of achievement.

Restricting children's access to nature has the potential for serious negative effects on physical, emotional and cognitive development. Enabling regular and easy access to green spaces is therefore important in supporting children's development and wellbeing.

The relationship between access to green spaces and health and wellbeing is also of key importance for people on low incomes. Low socio-economic neighbourhoods may have a poorer variety of facilities for outdoor activity, more unsafe play areas, greater environmental deterioration, and fewer natural elements, than wealthier neighbourhoods. This limited access to green spaces has serious implications on health and wellbeing. Research has also demonstrated that deaths from all causes in low-income communities are lower for those living in greener areas, compared to those living in less green areas. This demonstrates that increasing access to safe, welcoming green spaces may contribute to addressing income-related inequality.

Research has clearly documented that well-designed, planned and managed urban green spaces provide significant aesthetic, social, psychological and environmental benefits for all people. It is important that health and wellbeing is enhanced and supported, through providing accessible green spaces in all neighbourhoods.

### ***Terms of Reference 5 (e): Recommendations for future planning and investment on the role of public open spaces in promoting health***

There are significant opportunities to improve health and wellbeing, through environmental planning and investment strategies. The health and wellbeing benefits that can be achieved through accessing green spaces are largely determined by the quality, quantity, and accessibility of these green spaces. It is essential that green spaces are close to one's home, as research demonstrates that the most significant barriers to accessing green spaces are time and distance. It has been recommended that people living in towns and cities should have an accessible natural green space of at least two hectares in size, located no more than 300 metres (or five minutes walking distance) from home.

Environmental planning and investment strategies should therefore focus on developing local and accessible green spaces for *all* neighbourhoods. There should be a particular focus on low-income neighbourhoods, as these communities are more likely to have poorer existing facilities. To ensure high use of the public green spaces, research suggests a range of factors need to be considered. These include:

- the range and quantity of vegetation
- interesting and meandering pathways
- quiet areas for sitting and reading
- recreational amenities
- adequate information and signage
- perceived levels of safety
- opportunities for social interaction and physical activity.

Planning strategies should also consider the benefits of accessing green open spaces through different settings. Research on the relationship between children's health and development and access with nature, demonstrates that providing access to green spaces through school and childcare settings is an ideal opportunity to achieve health and wellbeing benefits. There is also evidence to suggest that incorporating green spaces into workplaces, aged care services and detention centres, may result in improvements to health and wellbeing. To promote and improve health and wellbeing, it is therefore important that green spaces are available across a range of settings.

#### **Recommendations**

1. Develop local and accessible green spaces in all neighbourhoods.
2. Plan and design green spaces to encourage high use, with a particular focus on opportunities for social interaction and physical activity.
3. Increase access to green spaces through a range of settings, including schools, workplaces, aged care services and detention centres.

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- <sup>1</sup> Townsend M & Weerasuriya R. (2010). *Beyond Blue to Green: The benefits of contact with nature for mental health and well-being*. Melbourne: Beyond Blue Limited.
- <sup>2</sup> Australian Bureau of Statistics (2008). *2007 National Survey of Mental Health and Wellbeing: Summary of Results (4326.0)*. Canberra: ABS.
- <sup>3</sup> Australian Bureau of Statistics (2008). *2007 National Survey of Mental Health and Wellbeing: Summary of Results (4326.0)*. Canberra: ABS.
- <sup>4</sup> Clarke, D.M. & Currie, K.C. (2009). 'Depression, anxiety and their relationship with chronic diseases: a review of the epidemiology, risk and treatment evidence'. *MJA Supplement*, 190, S54 - S60.
- <sup>5</sup> Begg, S., et al. (2007). *The burden of disease and injury in Australia 2003*. Canberra: AIHW.
- <sup>6</sup> World Health Organization (2008). *Global Burden of Disease 2004*. Switzerland: World Health Organization
- <sup>7</sup> LaMontagne, AD., Sanderson, K. & Cocker, F. (2010). *Estimating the economic benefits of eliminating job strain as a risk factor for depression: summary report*. Melbourne: Victorian Health Promotion Foundation (VicHealth).
- <sup>8</sup> Cummins, R.A., et al. (2007). *Australian Unity Wellbeing Index, Survey 16.1, Special Report*, in *The Wellbeing of Australians - Carer Health and Wellbeing*. Victoria: Deakin University.
- <sup>9</sup> Townsend M & Weerasuriya R. (2010). *Beyond Blue to Green: The benefits of contact with nature for mental health and well-being*. Melbourne: Beyond Blue Limited.
- <sup>10</sup> Maller, C. (2005). 'Hands on contact with nature in primary schools as a catalyst for developing a sense of community and cultivating mental health and wellbeing', *Journal of the Victorian Association of Environmental Education*, 28 (3), 16 – 21; as cited by Townsend M & Weerasuriya R. (2010). *Beyond Blue to Green: The benefits of contact with nature for mental health and well-being*. Melbourne: Beyond Blue Limited.