

Greenspaces for Mental Health

This short guide has been developed by Wendy Masterton, Dom Hall, and Dr Viola Marx.

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Dr Viola Marx is Dundee's Green Health Partnership Coordinator working together with Dundee City Council, NHS Tayside and local third sector organisations to help communities access greenspaces for physical, mental and social wellbeing benefits; as well as encourage healthcare professionals to make use of greenspaces for prevention, treatment, and recovery of ill-health through accessing Our Natural Health Service. She developed Dundee's first formal green health referral pathway, Green Health Prescriptions, to enable centralised and easy referrals to local nature-based interventions.



Dom Hall is Assistant Operations Director at The Conservation Volunteers – a UK wide charity working to deliver healthier happier communities through connecting people and green spaces. He is based in Glasgow and over the last few years has had a particular focus on working with the NHS and delivering Our Natural Health Service. Dom has brought a practical perspective from across TCV's projects including specific input from Paul Barclay on the Wild Ways Well programme in Cumbernauld, Alice Kenny who works on a physical activity programme in West Lothian schools and Rebecca Strofton who delivered the Community Rewilding programme in Glasgow.



Greenspace and mental health:

Mental health problems are one of the main causes of the overall disease burden worldwide, and it is estimated that one in four people in the UK will experience a mental health problem at some point in their life. Furthermore, the population prevalence of mental health problems in the UK has increased significantly since pre-COVID-19 levels and is likely to remain elevated for some time¹. Currently, the prescription rate of anti-depressants and the demand for CBT is at record levels suggesting a need to establish ways to support the rising demand while limiting rising costs.

The integration of greenspace into mental health policy and strategy could be a way to address this, as there is a wealth of evidence that greenspace can provide positive physical and mental health outcomes². A recent study based on data from approximately 20,000 people in England showed that those who spent two hours in nature per week had consistently better health and wellbeing than those who spent less time in greenspaces³. Across the UK, many types of health interventions now use greenspace as an integral part and can be referred to as greenspace, or nature-based, programmes. Some programmes fall into specific types, and others incorporate various activities including gardening or horticultural programmes; organised walks for wellbeing; forest walks and forest bathing; wilderness programmes; outdoor woodland learning; adventure programmes; nature-based mindfulness; conservation activities, and care farming among others⁴.

¹ The Kings Fund. (2020) Covid-19 recovery and resilience: what can health and care learn from other disasters? Available at <https://features.kingsfund.org.uk/2021/02/covid-19-recovery-resilience-health-care/?s=09>

² Markevych, I., Schoierer, J., Hartig, T., Chudnovsky, A., Hystad, P., Dzhambov, A. M., ... and Fuertes, E. (2017) Exploring pathways linking greenspace to health: Theoretical and methodological guidance. *Environmental Research*, 158, 301–317.

³ White, M.P., Alcock, I., Grellier, J., Wheeler, B.W., Hartig, T., Warber, S.L., Bone, A., Depledge, M.H. and Fleming, L.E. (2019) Spending at least 120 minutes a week in nature is associated with good health and wellbeing. *Scientific reports*, 9(1), 1-11.

⁴ Bragg, R. and Atkins, G. (2016) A review of nature-based interventions for mental health care (NECR204). Available at <http://publications.naturalengland.org.uk/publication/4513819616346112>

What works, for whom, in what circumstances?

While there is general agreement that greenspace programmes are linked with positive outcomes, there is still limited understanding of the key components that make these types of projects successful. To address this gap, researchers at Stirling University carried out an [international review of greenspace programmes for mental health](#)⁵ and proposed a framework showing the underlying contexts, mechanisms, and outcomes that make up successful programmes. This e-document now uses the proposed [framework](#) alongside practical experience to provide a simple and usable guide to key elements in delivering effective greenspace programmes for mental health.

Green Health Partnerships (GHPs), funded by NatureScot⁶

Green Health Partnerships (GHPs) in Scotland have developed various green health referral pathways that enable greenspace programmes, also referred to as nature-based interventions, within the community to contribute to primary prevention and the maintenance of both physical and mental health.

In Dundee, a formal pathway has been developed alongside the medical prescribing pathway to connect NHS primary and secondary care with nature-based interventions through developing the 'Green Health Prescription' pathway. A physical prescription is given to suitable patients to connect them with local nature-based intervention programmes. The pathway is also open to self-referrals and open for anyone who wishes to join. Patients receive a person-centred consultation with a dedicated Green Health worker to find an activity most suitable for the service user's need. Initial support can be given to access the interventions, and service-users can bring a friend or carer to join them.

Examples of existing greenspace programmes in Scotland

During the COVID-19 pandemic, many services adapted to continue to deliver sessions and support their clients. Sessions moved online, offered live sessions via online platforms, and created activity home packs. The activities gave participants, particularly those shielding, something to look forward to, kept them connected to each other and to nature, but also enabled new people to join in without the barrier of travel. Going forward, many groups are developing models with live and online sessions which makes them inclusive of those unable to leave their home.

Wild Ways Well

The National Lottery Heritage Funded Wild Ways Well programme is delivered by TCV as part of the Cumbernauld Living Landscape partnership. The project aims to get people suffering from, or at risk of, poor mental health out into the greenspaces of Cumbernauld. Whilst out amongst the trees, parks and reserves participants get a chance to slow down, relax, enjoy being in the company of other like-minded people, and participate in a variety of environmental and conservation related activities designed to fit in with the Five Ways to Wellbeing.

West Lothian School Green Gym programme

The West Lothian School Green Gym (WLGGM) programme is funded by NHS Lothian Health Improvement fund. It provides opportunities for children and young people to increase their level of physical activity and mental resilience by taking part in a programme of outdoor activities. TCV Green Gym sessions are designed to provide opportunities for young people to be active, to learn about nature and the environment, and take part in practical gardening and environmental activity.

Community Rewilding

The project was funded by Natural Lottery Heritage Fund and used the idea of rewilding to connect more people in these areas to their local greenspaces. It worked to help local people connect more closely to their local greenspaces by taking part in public events and engagement sessions for groups across the three areas. A key part of the project was a Green Gym programme in partnership with SAMH which supported members of the community and referees to take part in practical activity and nature engagement on the Coves Nature Reserve in Greenock.

⁵ Masterton, W., Carver, H., Parkes, T. and Park, K. (2020) Greenspace interventions for mental health in clinical and non-clinical populations: What works, for whom, and in what circumstances? *Health and Place*, 64

⁶ Green Health Partnerships. (2020) Available at <https://www.nature.scot/professional-advice/contributing-healthier-scotland/our-natural-health-service/green-health-partnerships>

How to deliver effective greenspace programmes for mental health

In this next part of the document, seven key research findings are described, as identified in Masterton et al.'s review. Ideas about how these findings might translate into practice are then proposed, alongside perspectives from practitioners from the programmes described on page 2.

research
finding

1. Create that “feeling of escape” and removal from day to day life and stressors

Greenspace can provide a calming effect and can allow participants to feel like they are escaping from their day to day lives and daily stressors. The greenspace gives them a space to breathe and ‘just be’. This is particularly effective for participants with experience of trauma, mental health challenges, and relationship conflicts, and for people who have felt “confined within the four walls” of traditional treatment settings.

Practitioner Perspective

Choose spaces that are accessible so that participants can get to the programme easily and revisit sites independently – but choose sites which still give that feeling of escape.

Consider people’s history and perceptions of local sites. You might take people away from, or ease people back into, areas which have negative connotations for them to create new memories. Encouraging people out for that first visit is a major hurdle. Making sessions begin right on their ‘doorsteps’ can be key to getting them out in familiar places, without expecting them to travel to get there.

Some clients may have existing conditions meaning they struggle taking public transport or find it difficult to go far from their home or familiar environment. Additional support such as a buddy system may be needed in some circumstances.

Practitioner Perspective

Sites should be chosen with the participants in mind so that they are appropriate to their needs.

People may be worried about crime, and anti-social behaviour, so this should be taken into account when choosing a site.

Simple things are important for feeling safe, like making sure the site is open and visible, that it does not have dark corners, and benches are not in dark areas.

Practicalities are important. Overnight programmes or early starts may not be suitable for those on daily pick-up prescriptions. Programmes have been successful in supporting people who have been involved in offending – but these individuals might be limited to where they can go. Programmes must be individualised.

Practitioner Perspective

Sites which offer varied sensory experiences are often preferred.

People tend to find more stimulation and enjoyment in areas which are biodiverse. For example, a garden is better than being indoors, a park is better than a garden, a woodland is better than a park. With a biodiverse greenspace, people can still feel they are ‘getting away’ even if it is within their own community.



2. Create space to reflect

The programme activities should allow participants space and time to reflect on their lives and allow them to recharge and then tackle issues with new strength and more mental resilience.

Practitioner Perspective

An important consideration is that space to reflect/ time alone is only suitable for some participants.

If reflective activities are planned, or any activities where people are expected to speak/participate, there should be a 'safe space' nearby.

People should not feel pressured to share or verbally reflect and reflection can be time to yourself and not with others. If participants need time away from the group, they should be supported to do so. For example, hand signals could be used. If participants have removed themselves from the group, they give a thumbs up if they are ok but need space, and a thumbs down if they would like to speak with someone.

Opportunities should be provided for people to express themselves in their own time, for example through journals, sketches, photography, or any other way the participant feels comfortable.

Practitioner Perspective

Sessions do not need to be "non-stop activity", but they should offer people time and space to reflect.

Participants should be allowed to 'leave' the group for a short while with a task to do independently, but while in proximity to others, and then come together again.

One of the most important part of the sessions are the tea breaks which allow reflection.

Allowing participants to guide future sessions can be a great way to reflect but facilitators must be mindful not to put people on the spot, but instead encourage participants to come forward when they say that they are ready.



3. Ensure availability of physical activity

Increases in physical activity leads to improvements in both physical and mental health.

Practitioner Perspective

There should be a variety of activities offered as people are more likely to maintain the activity if they enjoy it.

A participant-centred conversation should be conducted to find out which activity the participants want to engage with and where.

Ensuring differing levels of physical exertion means there will be something to suit all levels of physical ability. Participants feel comfortable knowing there will always be an 'easy' option but there are also options if they want to challenge themselves.

Part of a leader's role should be to signpost people on. Programmes should provide ideas and opportunities for people to follow up on things that they find interesting, for example via online resources, ideas for training or learning, or volunteering opportunities elsewhere.



Practitioner Perspective

Realistic expectations of challenges like weather are important and participants should be informed and prepared before programmes commence, for example having the right equipment/clothing/shoes etc.

Getting "caught out" with the rain can be a successful way of getting the groups used to the rain. It allows the participants to see how the leader reacts and it takes away some of the unknown fear. It is very important that kit is accessible. Funding to provide wet weather gear should be included in the funding.

In most circumstances a lightweight showerproof jacket, a couple of layers of t-shirt/fleece/jumper, jeans, light trousers and a pair of vaguely waterproof shoes is all you need.

During events such as COVID-19, this ability is more limited, but participants can still be provided with individual tools, items that they can keep for a longer duration, and PPE.

4. Support participant empowerment

Programme success relies on skilled facilitators and leaders. These leaders ensure the safety of participants, but also help clients learn both practical and psychological skills.

Practitioner Perspective

It is important to remember the existing skill level of staff and the need for different staff to be involved.

Most staff are primarily outdoor leaders and not medical professionals, so support staff from referring agencies or support workers are key.

It is important that the project officer knows the signposting routes before a project starts since the project officer is usually not responsible for the individual's wellbeing and can direct the participant to someone appropriate.

For best practice, a multidisciplinary team approach should be adopted with collaborative working and all terms must be justified and evidenced by professional training and qualifications.



Practitioner Perspective

Learning the skills in how to cope with challenges on the programmes can translate to participant's lives outside of the programme and potentially help them to navigate/cope with challenges there.

Sessions should not be sterile and overly planned. Things need to go wrong or be able to change. Some of the best activities are not the ones you plan but instead a comment or conversation is had and the activity changes to fit the day. This should be accepted. If everything is over planned it does not reflect day-to-day life.

New skills can be practical tasks or skills like self-regulation of emotion and coping strategies in response to challenges.

Passing on skills and sharing with others in the group is very empowering. For example, pairing up long-term participants with new people for certain activities works well.

5. Deliver activities with a purpose

Participants should be supported to see that their work on the programme has value. Feeling valued is key, particularly for people who have low self-esteem or have been excluded from society and face stigma.

Practitioner Perspective

Being responsible for something can lead to participants feeling more valued and purposeful.

It is important to make participants can feel they have helped leave a lasting outcome through simple activities. Make a point to reflect on the importance of the work that has been done, even if it is the smallest of activities like planting a couple of bulbs, looking after a plant, or recording an insect.

A walk is valuable, a wildlife encounter is valuable, a positive experience is valuable. There are more ways to be valued than simple physical labour

Simply saying thank you should not be under-estimated. We must ensure participants feel appreciated for the work.

Letting people know that just them turning up is valued.



Practitioner Perspective

Structure and routine can also help with feelings of purpose. The programmes that are the most successful are the ones that have a regular base.

Even if the group sessions happen across different locations depending on activity, it is vital to have a regular meeting point. This creates a routine and also helps with possible transport issues.

Even if programmes are not structured themselves, the structure of it being at the same time/same place/same group, can be helpful and appreciated by participants.



6. Build and maintain positive relationships between facilitator and participant

The relationship between facilitator and participant is essential. Through these relationships, participants can build rapport, trust, and confidence. The stronger the relationship, the more likely the programme is to be successful and the more likely the client is to engage with support after the programme.

Practitioner Perspective

Participants should be given information about the programme beforehand and met at the start by staff who are trained, confident and engaging.

Pre-project briefing where everyone is given the ground rules and is gently inducted into what is coming is essential. Ensure people understand that there are ground rules, but that this is their experience and that they can shape it.

Building the relationship can be challenging particularly if the participant has experience with stigma and previous failures with safeguarding and has had a potential lifetime of feeling unsafe, unheard, invisible, labelled, and pathologised. Facilitators need to be aware of this and that reducing the power imbalance is essential, but this takes time and consistency.

Staff must understand, empathise, and support people with the life struggles that they may be going through outside the programme.

Relationships can be built faster if the facilitator is relatable. For example, a person with lived experience of an issue can often build rapport faster with a participant compared to a person who has no experience of a health issue.



Practitioner Perspective

Programmes tend to work on a 'doing with' rather than 'doing for' basis. This can reduce perceived power inequality and can increase trust and empowerment.

The successful sessions are the ones where the key workers take part and really get involved too. Make sure staff agree to stay for the full session and programme.

Understanding, support, empathy, and empowerment. That is what is needed.

A meeting can seem formal and participants may feel unsure, but if you stick around after the meeting and join everyone for a cup of tea then they might start to feel a little more comfortable.

Consider asking the group what they would like to do during the next session. This involves the group and gives them more ownership over the sessions, encourages active participation and gives participants something to look forward to.

Knowing that the project officer is not directly related to their health can help participants become more involved with the project as they are not constantly reminded why they are there and are not seen as 'patients' - language is very important.

7. Provide shared experiences

Shared experiences allow participants to feel safe among the group and helps build social skills. This leads to reduced loneliness and isolation, and aids feeling part of the community or group.

Practitioner Perspective

There must be enough time for social skills to be built.

Make sure everyone joins in the tea break and feels comfortable to do so. It is also important that everyone agrees on the topics that can/ can not be discussed in the group setting to ensure a safe space for all.

Take lots of photographs (no need to include faces) and make lots of memories. At the end of the groups, participants could be written about some of the things done together which includes photos to remind them of the group bonds.

Practitioner Perspective

Participants are more likely to engage with a programme if they see others engaging with it and staff need to be skilled in engaging others.

Care must be taken that all the participants get along well enough and engage together.

Attendance may need to be planned so that clashing personalities do not attend on the same day.

Where people do not get along and are not engaging, it can create an unenjoyable atmosphere, and can result in people not coming back for future sessions.

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