

# Looking back to the future: the re-emergence of green care

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Back in the early 1970s, as a then young trainee in psychiatry, I found myself in the midst of a shift in Western psychiatry from institutional to community care. I recall and regret the loss of the last of the greenhouses, farms, gardens and green spaces embedded within the grounds of large county asylums.

John Muir, a Scottish-American naturalist at the turn of the 19th century, stated, 'thousands of tired, nerve-shaken, over-civilised people are beginning to find out that going to the mountains is going home' (Muir, 1901). From small, safe, green spaces to vast wildernesses, nature has inspired, brought peace and provided space for reflection. More recently, mental health research has returned to a focus on the outdoors (Townsend & Weerasuriya, 2010). Today, there are multidisciplinary research centres that include psychologists, psychiatrists, epidemiologists, town planners and environmental scientists working together to investigate how nature is beneficial for mental health.

The thematic section of this issue of *BJPsych International* challenges the current dogma that the best intervention is the most technical and complex. It suggests that reaching back to our roots, engaging with other people in natural settings could and should be a part of everybody's routine. The first paper, by Jo Barton and Mike Rogerson, introduces the concept of nature-based interventions and outlines the evidence base. Then Dan Bloomfield reviews what makes nature-based interventions in mental health successful. Following this there are two accounts of using green spaces in mental health services, from Australia and the UK.

Green care should be prioritised as a potential solution to the current healthcare context of high demand, cost pressures and community fragmentation. Nature-based interventions do not 'cost the earth', are low carbon and are socially progressive, and therefore sustainable (Townsend & Weerasuriya, 2010). People who engage with nature-based groups can gain much wider benefits than merely symptom reduction. It is these wider benefits that move people from the sick role, which can be hard to leave for many reasons, towards a state of complete physical, mental and social well-being.

What could be a better win-win outcome than enabling those with mental illness to find the peace, well-being and sense of self-empowerment that come with being able to work with others as a community in and across green spaces? Any healthy, health-creating society will have to develop these evidenced-based, values-based interventions of natural, green or nature settings, whether this be specifically for those with mental health problems, or more likely also to involve the wider population. Mental health services across the world need to lead this rediscovery of nature-mindedness, to inspire the societies in which we live to grow and sustain the well-being of all, but especially future generations.

## References

Muir, J. (1901) *Our National Parks*. Read Books (2013).

Townsend, M. & Weerasuriya, R. (2010) *Beyond Blue to Green: The Benefits of Contact with Nature for Mental Health and Well-Being*. Deakin University, Australia. Available at [http://www.hphpcentral.com/wp-content/uploads/2010/09/beyondblue\\_togreen.pdf](http://www.hphpcentral.com/wp-content/uploads/2010/09/beyondblue_togreen.pdf) (accessed 23 April 2014).

# The importance of greenspace for mental health

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**There is an urgent global need for accessible and cost-effective pro-mental health infrastructure. Public green spaces were officially designated in the 19th century, informed by a belief that they might provide health benefits. We outline modern research evidence that greenspace can play a pivotal role in population-level mental health.**

## Mental health and greenspace

Mental health conditions are one of the main causes of the overall disease burden worldwide, at an estimated global cost of £1.6 trillion per year. Health systems across the world have not yet responded adequately to the current burden of mental disorders, and the gap between the need for treatment and its provision is wide.