Improving mental health by improving life in the city

Improving the context in which people live can improve their mental health, as shown by some of the research-based examples below, taken from the Mental Wellbeing Impact Assessment, 2011.¹ Addressing these issues can help to improve wellbeing, even if cause and effect are interwoven – mental illness is likely to make people more vulnerable to homelessness, and being homeless may be a contributory cause of mental ill-health, for example.

	Research findings:	Possible action:
Environment,	People living with a high level of street	Maintain/improve
development	'incivilities' such as rubbish, noise and graffiti	environment in
and housing	are twice as likely to report anxiety and 1.8	residential streets.
ananoosing	times more likely to report depression.	
	More amenities and fewer 'incivilities' are	
	associated with 32% lower rates of anti-	
	depressant prescriptions after controlling for	
	socio-economic status.	
	Crowding, poorly maintained or damp	Decent homes for all.
	housing are all associated with a higher risk of	
	depression.	
	Homeless people experience 40 – 50% higher	Mitigate possible
	levels of mental health problems than the	increase in numbers of
	general population.	homeless following
		changes to benefits
		system.
	Lack of places to stop and chat, lack of	Neighbourhood
	recreation facilities and green spaces are	regeneration, access
	associated with a higher risk of depression.	to green spaces.
	There is some evidence that exposure to	
	green space is protective against mental	
	illness.	
Community	Improved housing has an impact on	Address concerns
safety	perceived safety as well as actual crime.	about safety as well as
sarery		neighbourhood crime.
	Association between poor mental health and	
	neighbourhood disorder such as vandalism,	
	high perceived threat from crime.	
Planning	Residents on busy streets have less than one	Reduce traffic on
Ŭ	quarter of local friends compared with those	residential streets.
	living on similar streets with little traffic.	
	Streets with little traffic have three times the	
	number of 'gathering spots'.	
	People living in walkable, mixed use	Reduce car-

	neighbourhoods are more likely to know their neighbours, participate politically and trust others than people living in car-oriented suburbs.	dependence and increase pedestrian- friendly streets.
Communities	Social participation is strongly associated with good mental health. Having three or less close relatives or friends predicts future probability of common mental health disorders, even when a history of mental ill- health is adjusted for. Life satisfaction is linked with commitment to family, friends, social and political involvement.	Continue to strengthen neighbourhood and community networks and to provide opportunities for social engagement, volunteering and cultural participation.
	Employment generally improves wellbeing, and volunteering or engagement in schemes such as timebanking or social prescribing (such as arts on prescription) have also been shown to improve participation and hence wellbeing.	
	Evaluations from the previous government's NRF/NDC areas demonstrated benefits to health and wellbeing of individual residents mostly around social capital, quality of life, mental wellbeing and improved feelings about health services and of their 'neighbourhood' increasing with levels of engagement.	Maximise opportunities for those most at risk to buy/access affordable healthy food.
	A good diet protects against depression and high consumption of processed foods is associated with a higher risk of depression.	
Education	Low educational attainment is a lifelong risk for common mental health problems, with a 50% reduction in risk of depression for those with the highest qualifications; the effect is particularly strong for women. Better daily and long-term academic performance in children who eat breakfast. Lifelong (adult) learning enhances self- esteem and social interaction.	Support breakfast provision at schools. Support opportunities for lifelong learning especially for those with risk factors for mental ill health.
Arts & Leisure	Participation in arts improves wellbeing, health and can support recovery from mental ill-health.	Enable participation in arts, leisure and physical activities by those most at risk of
	Regular physical activity is associated with	poor emotional health.

	lower rates of depression and anxiety across all age groups and also enhances emotional well-being.	
Financial inclusion	While cause and effect may be entangled, people in lowest income quintile have a threefold risk of mental illness; debt is associated with a threefold risk of common mental illnesses and a fourfold risk of psychosis.	Continue to address financial inclusion and financial management skills.
	Improving financial capability reduces the risk of anxiety and depression by 15%.	

¹ Cooke A, et al. Mental Well-being Impact Assessment: A toolkit for well-being. 3rd ed. London: National MWIA Collaborative; 2011.