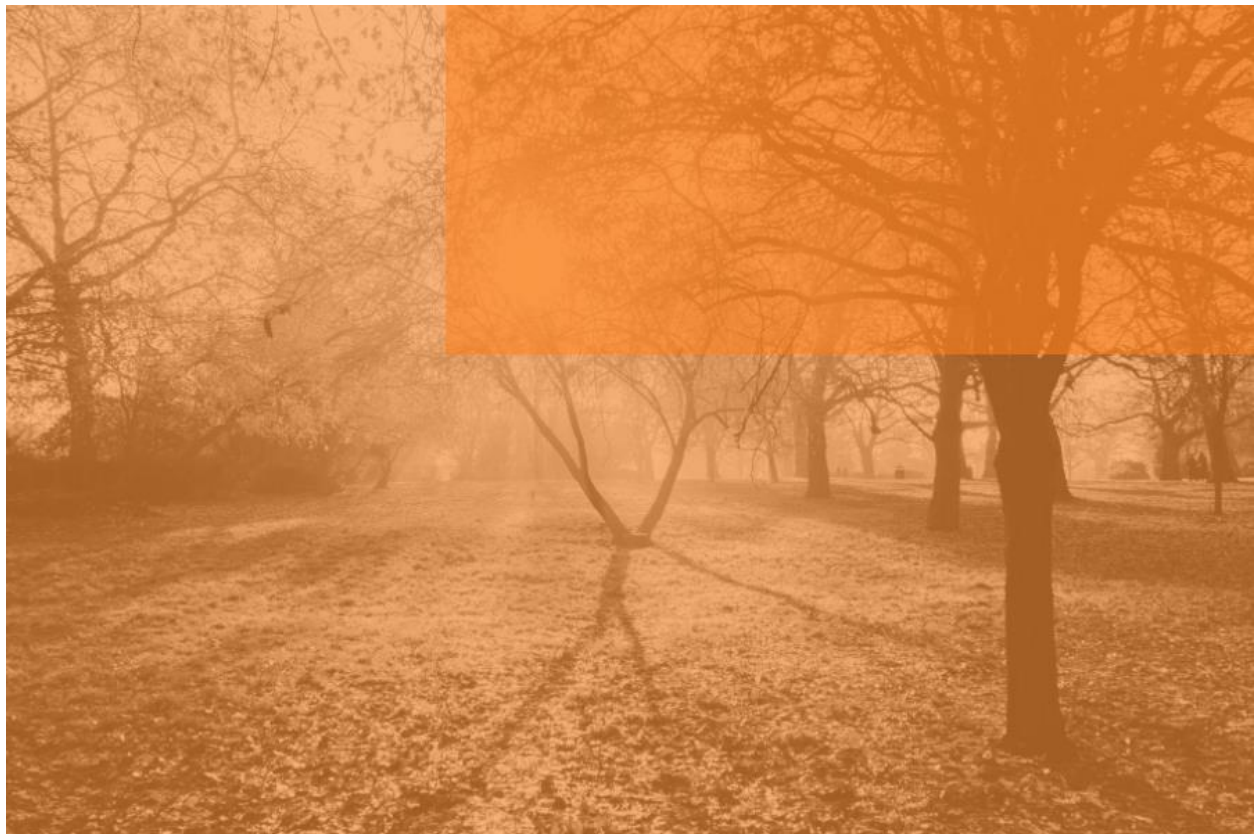


Megatrends and the West Midlands

2021:

Health and Urban Greenspace



Ros McDermott for City-REDI / WMREDI, University of Birmingham – 2021

West Midlands Regional Economic Development Institute

FOR THE WEST MIDLANDS COMBINED AUTHORITY



UNIVERSITY OF BIRMINGHAM

BIRMINGHAM BUSINESS SCHOOL



Research England



Summary

Urban greenspace typically refers to public parks, street verges, and sports grounds owned by the local council. This article argues that urban greenspace is a resource for health, and the West Midlands Combined Authority (WMCA) should ensure equitable access to these spaces with a particular focus on people hit hardest by the pandemic.

Key Policy Messages

- Urban greenspace should be valued as a crucial resource for preventative health.
- Policy makers should take care to understand equitable provision beyond proximity.
- Community engagement should take place to assess perceived barriers to accessing urban greenspaces within the WMCA region.
- Funding needs to prioritise maintenance, facilities, and services which encourage communities to use these spaces.

Introduction

COVID-19 has disproportionately impacted people of lower socio-economic status, Black, Asian, and ethnic minority groups, older people, and people with learning disabilities in the UK.¹ Universally, levels of self-reported depression and anxiety have significantly increased.² However, stressors induced by the associated lockdown measures have not been born equally: school closures and widespread job loss have disproportionately affected women on lower incomes.³

These patterns of inequality have been reflected within the West Midlands. The [Health of the Region 2020](#) report found a strong correlation between COVID-19 related deaths and area deprivation, and between COVID-19 related deaths and areas with a greater proportion of Black, Asian and ethnic

¹NHS (2020) Available at: <https://www.england.nhs.uk/about/equality/equality-hub/action-required-to-tackle-health-inequalities-in-latest-phase-of-covid-19-response-and-recovery/>

²GOV.UK (2020). COVID-19: mental health and wellbeing surveillance report. Available at: <https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-surveillance-report>

³The Lancet Infectious Diseases. (2020). The intersection of COVID-19 and mental health. doi: [https://doi.org/10.1016/S1473-3099\(20\)30797-0](https://doi.org/10.1016/S1473-3099(20)30797-0)

minority residents.⁴ [City-REDI have previously highlighted](#) how the disproportionate impact of COVID-19 on people from Black, Asian and ethnic minority backgrounds in the West Midlands can be attributed to structural inequalities in income, housing, healthcare and workplace occupation. The report also found self-reported anxiety rates have risen significantly from the previous year (21.9% up to 47.9%) with young people being particularly affected.⁵

At the same time, visits to urban greenspace have soared during lockdown, highlighting the critical importance of green infrastructure for maintaining health and wellbeing of city residents.⁶ Combining Theme A (Changing Function of Places) and B (Improving Health and Wellbeing) the WMCA should recognise the value of urban greenspace as a resource for health, and ensure equitable access to these spaces with a particular focus on people hit hardest by the pandemic.⁷ This reflects the WMCA's commitment to a radical prevention approach to tackle the health inequalities highlighted during the pandemic, as set out in the [Health of the Region 2020](#) report. Such an approach recognises how structural inequalities in accessing resources (such as a well-maintained local greenspace or private garden) influence the possibility of engaging in health promoting behavior (exercise or relaxing in greenspaces). Radical prevention focuses on distributing these resources to reduce inequalities in health.⁸

Key Trends for Urban Greenspace

Return to the local

Constraints to life under lockdown have put a spotlight on the liveability of neighbourhoods, with a renewed appreciation of local greenspaces and the role they play in maintaining [physical and mental health](#).⁹ Estate agent Benham & Reeves, surveying [priorities for London renters](#) in June 2020, found that 'Outdoor Space' had moved from 7th to 2nd place compared to 2019, while 'Close to Park or Green Space' climbed from 9th to 3rd. Similarly, two studies conducted across Europe in the period March to

⁴ WMCA. (2020). *Health of the Region 2020*. Available at: <https://www.wmca.org.uk/media/4348/healthoftheregionnov2020-final-2.pdf>

⁵ Ibid.

⁶ Klienschroth, F & Kowarik, I. (2020) COVID-19 demonstrates the urgent need for urban green spaces. *Frontiers in Ecology and the Environment*. <https://doi.org/10.1002/fee.2230>

⁷ West Midlands Combined Authority (2020). *Health of the Region 2020*. Available at: <https://www.wmca.org.uk/media/4348/healthoftheregionnov2020-final-2.pdf>

⁸ Ibid.

⁹ Scott, M (2020) Covid-19, Place-making and Health, *Planning Theory & Practice*, 21:3, 343-348, doi: 10.1080/14649357.2020.1781445

May 2020 found a surge of traffic to urban parks, with individuals walking, rather than driving to reach these spaces.^{10 11} These changes in behavior have also altered perceptions, with respondents across the two studies expressing a wish for enhanced local provision of these spaces.¹²

Salutogenic effects

In March 2020, Public Health England (PHE) published a [new review](#) synthesising compelling evidence that exposure to good quality greenspace promotes health. PHE detail a number of the specific physical and mental health benefits associated with exposure to greenspace:

- People living in greener urban environments are more likely to meet the national physical activity recommendations and less likely to be overweight or obese, with the strength of the association varying across demographic groups.¹³
- People with a greater exposure to greenspace were found to have more favourable salivary cortisol (a physiological marker of stress), heart rate and heart rate variability, diastolic blood pressure, high-density lipoprotein (HDL) cholesterol and lower incidence rates of type 2 diabetes. Across studies, the greatest benefit of greenspace exposure was found for groups with lower socio-economic status.¹⁴
- Greener environments have been shown to reduce levels of depression, anxiety, and fatigue¹⁵ with the beneficial effects greatest for socioeconomically disadvantaged groups: the gap in mental wellbeing between the most and least advantaged groups is narrower when the least advantaged have good access to greenspace.¹⁶

The health benefits within the WMCA region have been partly captured in the recent [Health Economic Assessment & Natural Capital Accounts](#) for greenspaces, managed by Birmingham City Council.¹⁷

¹⁰ Ugolini et al. (2020). Effects of the COVID-19 pandemic on the use and perceptions of urban green space: An international exploratory study. *Urban Forestry & Urban Greening*

¹¹ Klienschroth, F and Kowarik, I. (2020) COVID-19 demonstrates the urgent need for urban green spaces. *Frontiers in Ecology and the Environment*. <https://doi.org/10.1002/fee.2230>

¹² Ugolini et al. (2020). Effects of the COVID-19 pandemic on the use and perceptions of urban green space: An international exploratory study. *Urban Forestry & Urban Greening*

¹³ Public Health England (2020). *Improving access to greenspace: A new review for 2020*. pp. 38- 39

¹⁴ Ibid. p.33

¹⁵ Ibid. pp.4- 5

¹⁶ Ibid pp.51- 52

¹⁷ Hölzinger, O & Grayson, N. (2019). Birmingham Health Economic Assessment & Natural Capital Accounts. Available at: birmingham.gov.uk/cities-parks-and-open-spaces

Reduced air pollution, as well as the physical and mental health benefits provided by urban greenspace, were found to add more than 3,300 Quality Adjusted Life Years (QUALYs) to the population each year. This is estimated to provide a total health benefit valued at £4.6 billion over the next 25-year period (with continued rates of investment in these spaces).

PHE's report does not capture the additional function of urban greenspace in mitigating the harm from the [urban heat island effect](#), particularly pertinent in view of the climate crisis. Older adults, young children and people with pre-existing health conditions are particularly vulnerable to heat-wave events.¹⁸ Current predictions estimate the frequency of heat-related deaths in the UK will increase by 257% up to 2050 without climate adaptation, and these projections usually do not include the [urban heat island effect](#) (UHI).¹⁹ Recent studies have highlighted that during the heatwave of August 2003, up to half of heat related mortality in the West Midlands region can be attributed to this effect²⁰. This trend is set to continue. The Joseph Rowntree Foundation reports that a high number of neighbourhoods in the West Midlands are [particularly socially vulnerable](#) to heatwave events (Figure 10). This analysis considered the probability of future adverse heat wave events, demographic and structural inequalities in neighbourhoods, and the current availability of greenspace to mitigate against harmful temperatures.²¹

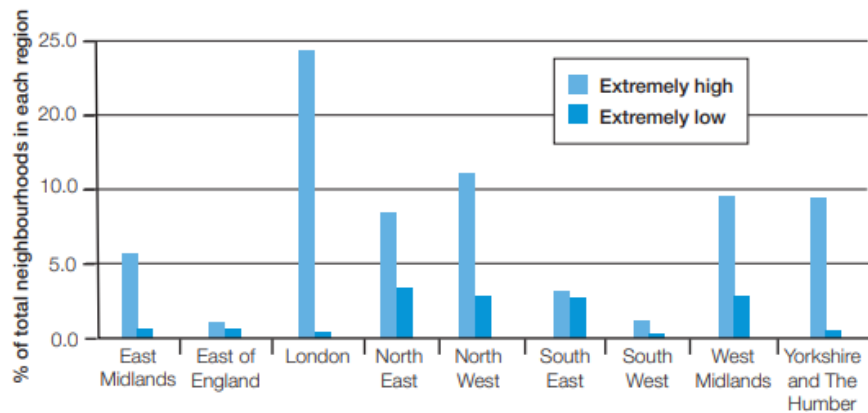
¹⁸USAID (2017). *Heat in cities: Impacts of heatwaves and measures to mitigate risk*. Available at: <https://www.preventionweb.net/publications/view/70168>

¹⁹Arbuthnott, K.G., Hajat, S. (2017) The health effects of hotter summers and heat waves in the population of the United Kingdom: a review of the evidence. *Environ Health* 16. <https://doi.org/10.1186/s12940-017-0322-5>

²⁰Heaviside C, Vardoulakis S, Cai X. (2016) Attribution of mortality to the Urban Heat Island during heat waves in the West Midlands, UK. *Environmental Health*.

²¹Joseph Rowntree Foundation (2011) *Climate change, justice and vulnerability*. Available at: www.jrf.org.uk/report/climate-change-justice-and-vulnerability

Figure 10: Proportions of all neighbourhoods in each region estimated to have extremely high or low socially derived vulnerability with respect to heat



22

There is growing evidence to suggest that urban greening is a [key mechanism](#) to reduce the UHI effect, with ‘park cool island effects’ estimated to reduce surrounding temperatures between 1.5-3.5°C (depending on density and size of greenspaces). Urban greenspaces can also provide much needed shade for relief during heat wave events.²³

Key Policy Message: Urban greenspace should be valued as a crucial resource for preventative health.

Inequitable access

Most physical and mental health benefits noted by PHE (2020) are achieved through an individual using an urban greenspace, bringing to light the issue of equitable access. Lockdown measures have spotlighted conversations in the UK around [‘have- and have nots’](#) with many arguing access to urban greenspace [is far from equal](#)²⁴. However, access is too often oversimplified, potentially leading to poorly informed policy decisions which may aggravate health inequalities, rather than reducing them. As highlighted by the Monitor of Engagement with the Natural Environment (MENE) survey, in England

²²Joseph Rowntree Foundation (2011) *Climate change, justice, and vulnerability*. Available at: www.jrf.org.uk/report/climate-change-justice-and-vulnerability

²³Public Health England (2020). *Improving access to greenspace A new review for 2020*. p. 29

²⁴Mell (2021). Access to urban parks is far from equal – fining people who travel to reach nature is not the answer. *The Conversation*.

patterns of engagement with urban greenspace consistently relate to demographics. The most infrequent users tend to be:

- Women
- Older people
- People from lower socio-economic backgrounds
- People from ethnic minority backgrounds²⁵

In line with these trends the [Birmingham Parks and Open Spaces Strategy](#) found that inner city parks were disproportionately underutilised by women, young children and people with disabilities.²⁶ Taking access as the ability to participate in public spaces²⁷, the following section details some of the factors which should be taken into account when considering equitable access.

Proximity and size

While the proximity to and size of an urban greenspace undoubtedly influence the likelihood that an individual chooses to use it, these indicators have severe limitations. When used to analyse access, these indicators are often applied to varied definitions of greenspace which has resulted in conflicting conclusions²⁸. For example, during March to May 2020, Friends of the Earth analysed [access to greenspace in England](#) taking into account garden space, and concluded that 42% of people from Black, Asian and ethnic minority backgrounds lived in the most green-space deprived areas (more than 5 minutes' walk from a greenspace smaller than 8 square metres), and that there was a strong correlation between income deprivation and limited access. The Office for National Statistics (ONS) also conducted a study during this period and reported that Black people in England are four times less likely than White people to have access to an outdoor space at home. However, drawing from the same study, the ONS reported that people in the most deprived neighbourhoods of England are almost [twice as likely](#) to be in

²⁵Boyd, F, White, MP, Bel, SL, Burt, J. Who doesn't visit natural environments for recreation and why: A population representative analysis of spatial, individual and temporal factors among adults in England. *Landscape and Urban Planning*. 2018;175:102-13.

²⁶Birmingham City Council. (2006). *The Future of Birmingham's Parks and Open Spaces*. Available at: https://www.birmingham.gov.uk/downloads/file/1061/the_future_of_birminghams_parks_and_open_spaces_supplementary_planning_document

²⁷ Simon, D. (2016). 'Accessible Cities: From Urban Density to Accessibility' in *Rethinking Sustainable Cities: Accessible, Green and Fair*. Policy Press. pp. 11-61.

²⁸Markevych et al. 2017. Exploring pathways linking greenspace to health: Theoretical and methodological guidance. *Environmental Research*, pp.301-317. Available at: <https://www.sciencedirect.com/science/article/pii/S0013935117303067>

a five minute walk of a public park (not taking garden space into account). ONS also reported that people from Black, Asian and ethnic minority backgrounds were almost as likely as White people to report that their local greenspace was within easy walking distance (86% vs 88%), concluding that access to parks is evenly distributed.

Defining access as ‘the proximity to and size of a local urban greenspace’ has the potential to worsen health outcomes if this understanding directly informs policy. Research which excludes garden space can easily lead to conclusions that minimise issues of equitable access to urban greenspace. Meanwhile, studies which do consider garden space (such as that of Friends of the Earth) call for policy makers to prioritise building new urban greenspaces in areas where there is a current undersupply. Paradoxically, this can potentially worsen health inequalities for disadvantaged communities due to a process termed ‘green gentrification’. This occurs when large investments in new greenspace increase property values in a surrounding area, displacing current inhabitants the intervention was intended for²⁹ and worsening health outcomes through housing instability and loss of social ties.^{30 31} Studies have shown that one-off large investments, particularly in previously industrial centres, produce the highest likelihood of green gentrification, with New York’s High Line park (built in 2003) as a prime example: property value around the build went up 103% between 2003-2011³².

In the UK, NESTA estimates additional property value arising from proximity to urban greenspace is over £130 billion, with this trend set to continue.³³ While there is considerable debate on how to mitigate the effects of green gentrification, without addressing wealth inequalities, arguments for ‘just green enough’ strategies have proved popular:

- Designing greenspace explicitly for the needs of the surrounding communities.
- Promoting investment in small and underutilised sites evenly distributed across the city rather than building new space as a focal point for development.

²⁹Wolch, J., Byrne, J. and Newell, J., 2014. Urban green space, public health, and environmental justice: The challenge of making cities ‘just green enough’. *Landscape and Urban Planning*, 125, pp.234-244.

³⁰ Ibid.

³¹Public Health England (2020). *Improving access to greenspace A new review for 2020*. p. 29

³²Wolch, J., Byrne, J. and Newell, J., 2014. Urban green space, public health, and environmental justice: The challenge of making cities ‘just green enough’. *Landscape and Urban Planning*, 125, pp.234-244.

³³ NESTA (2020). *Rethinking Parks: Visions to Shape the Future of Parks*. Available at: https://media.nesta.org.uk/documents/Provocation-Essays-Collection-FINAL_eJFixTY.pdf

- Resisting real estate growth coalitions and adopting anti-gentrification policies such as affordable housing or help-to buy schemes.³⁴

However, there is debate around whether these strategies work in all contexts: one study from the USA found that small investments in city centre and greenway parks with active transportation tended to foster green gentrification faster than larger investments in parks on the outskirts of cities.³⁵

Key Policy Message: Policy makers should take care to understand equitable provision beyond proximity.

Quality

Although physical barriers such as proximity, size, and transport options influence whether an individual utilises an urban greenspace, recent research has shown that perceptions of the quality of that space is a key factor affecting its use and that these perceptions are influenced by demographics.³⁶ This sheds some light on the findings of the MENE survey and can reduce health inequalities through promoting equitable access for all groups.³⁷ The quality of an urban greenspace can be defined in two ways: ecological quality, that is the level of biodiversity in the area (shown to be beneficial to positive mental health outcomes), and the conditions of space (site maintenance and amenities).

- The main mechanism shown to influence people’s use of urban greenspace is their feeling of safety³⁸. The 2006 [Birmingham Parks and Open Spaces Strategy](#) reported that fear of crime is a key barrier to use, with people perceiving vandalism as indicative of a neglected site and loss of

³⁴Wolch, J., Byrne, J. and Newell, J., 2014. Urban green space, public health, and environmental justice: The challenge of making cities ‘just green enough’. *Landscape and Urban Planning*, 125, pp.234-244.

³⁵Rigolon, A., & Németh, J. (2020). Green gentrification or ‘just green enough’: Do park location, size and function affect whether a place gentrifies or not? *Urban Studies*, 57(2), 402–420.
<https://doi.org/10.1177/0042098019849380>

³⁶Boyd, F, White, MP, Bel, SL, Burt, J. Who doesn’t visit natural environments for recreation and why: A population representative analysis of spatial, individual and temporal factors among adults in England. *Landscape and Urban Planning*. 2018;175:102-13.

³⁷Public Health England (2020). *Improving access to greenspace: A new review for 2020* p.25

³⁸CABE (2010). *Community green: using local spaces to tackle inequality and improve health*. Available at: <https://www.designcouncil.org.uk/sites/default/files/asset/document/community-green-full-report.pdf>

social control. Respondents expressed a desire for safe and good quality open spaces which are well-cared for and regularly occupied.³⁹

- These perceptions of safety are gendered.⁴⁰ Women report feeling more at risk in public space which is dark, isolated, or with obstructed visibility, and are more likely to avoid these locations due to [perceptions of the potential](#) for sexual attack even in places where risk is low. Symbolic barriers in urban greenspace such as dense, unmaintained foliage and littered sites create a perceived sense of threat, while park benches can increase feelings of safety by providing informal surveillance on the outskirts of parks.⁴¹
- Ethnographic research by Beth Collier, director of [Wild in the City](#), also highlights that experiences of safety in urban greenspace can be shaped by a person's ethnic and cultural background, highlighting how [‘people of colour have an increasing perception that green spaces are not for us’](#). Recent work by Future of London as part of the [Learning from Crisis](#) programme builds on work by [Bridget Snaithe](#) to argue that parks are often designed by, and shaped for the needs of White people. Risbeth highlights how in the UK cultural differences are often not considered in the design and provision of amenities included in urban greenspace: for example, the importance of ‘dog-free zones’ to some followers of Islam.⁴² Furthermore, as Black people are targeted disproportionately by police in the UK, they may choose to avoid urban greenspaces if they are heavily patrolled and ‘securitised’⁴³. This issue may be increasingly pertinent during the pandemic. NESTA’s recent work highlights that greater [control and surveillance in parks](#) has been justified to maintain public health and security.

³⁹Birmingham City Council. (2006). *The Future of Birmingham’s Parks and Open Spaces*. p.44 Available at: https://www.birmingham.gov.uk/downloads/file/1061/the_future_of_birminghams_parks_and_open_spaces_supplementary_planning_document

⁴⁰Richardson, E A & Mitchell, R (2010), Gender differences in relationships between urban green space and health in the United Kingdom, *Social Science & Medicine*, vol. 71, no. 3, pp. 568-575. <https://doi.org/10.1016/j.socscimed.2010.04.015>

⁴¹ Brownlow (2006). An archaeology of fear and environmental change in Philadelphia. *Geoforum*. doi: 10.1016/j.geoforum.2005.02.009

⁴²Risbeth, C (2001) Ethnic Minority Groups and the Design of Public Open Space: An inclusive landscape?, *Landscape Research*, 26:4, 351-366, DOI: 10.1080/01426390120090148

⁴³ Honey-Rosés, J., Anguelovski, I., Bohigas, J., et al. (2020) The Impact of COVID-19 on Public Space: A Review of the Emerging Questions. doi:10.31219/osf.io/rf7xa.

Key Policy Message: Community engagement should take place to assess perceived barriers to accessing urban greenspaces within the WMCA region. Funding needs to prioritize maintenance, facilities, and services which encourage communities to use these spaces.

Escalating Inequalities

Funding Cuts

Local authorities remain as the largest owner of urban greenspace⁴⁴. However, there is currently no statutory requirement for councils to ring-fence funding for greenspace, and through the years park budgets have diminished. UNISON found that more than half (59%) of local authorities reduced park budgets between 2016- 2019, with Warwickshire County Council implementing [the largest cut in one year](#), reducing its budget for parks by 87% between 2017 to 2018. In 2014, the Heritage Lottery Fund (HLF) highlighted that 45% of local authorities in the UK were considering selling parks and greenspaces or transferring their management, and 88% of park management reported reductions to maintenance and security staff (e.g., rangers) since 2010.⁴⁵

Notably, a council whose budget is under stress may prioritise the ‘well-performing’ parks in a city, creating a downward spiral where under-maintained sites are underused, and ultimately undervalued.⁴⁶ The HLF [spotlight this issue in Birmingham](#), where the parks service has had to absorb 30% cuts and the council plan to dispose of ‘under-utilised’ park land at 8-acres per annum 2016- 2020 in order to build new council homes.⁴⁷

Communities of self-interest

In the context of these funding cuts, Friends Groups have been crucial in caring for urban greenspaces in the WMCA region. There are over 6,000 Friends Groups in the UK, with Birmingham served by the greatest number. On average, an open space with a constituted Friends Group in Birmingham benefits

⁴⁴Wilson, O & Hughes, O (2011). Urban Green Space Policy and Discourse in England under New Labour from 1997 to 2010, *Planning Practice & Research*, 26:2, 207-228, doi: 10.1080/02697459.2011.560462

⁴⁵ Heritage Lottery Fund. (2016). *State of UK Public Parks*. Available at:

https://www.heritagefund.org.uk/sites/default/files/media/attachments/state_of_uk_public_parks_2016_final_for_web%281%29.pdf

⁴⁶ Ibid.

⁴⁷ Ibid.

from volunteer labour equivalent to [1.5 additional full time staff members](#) for gardening, conservation, litter picking and security, and on average £35,000 per year from funding bids for infrastructure repairs and equipment. Friends Groups and the associated network organisation [BOSF](#) have also been involved in critical work advocating for the continuation of [rangers](#) across Birmingham’s parks.

However, there are issues when gaps in greenspace maintenance are filled by volunteer labour.⁴⁸ Shared governance arrangements make vulnerable communities responsible for maintaining their own services in the absence of state support. Particularly when considering potential barriers to volunteering in a Friends Group (e.g., care burden for women, time poverty working multiple jobs and feelings of perceived ‘ownership’ of the space by another group⁴⁹) this cannot tackle the underlying structural inequalities which influence the use of urban greenspace. Furthermore, communities of self-interest can inadvertently arise around the greenspaces cared for by Friends Groups, as discussed by NESTA:

NESTA in their [Rethinking the Future of Parks](#) for 2020 project re-envisioned community participation in urban greenspace after COVID-19. In [News from Nowhere Gardens](#) a future is imagined in 2030 where the pandemic has started conversations around the importance of greenspace for health, and truly worked to address inequalities in access with ‘lottery’ style neighbourhood citizens’ panels. The vision addressed the importance of the work of Friends Groups in the maintenance of parks but highlights how they could create unintentional barriers.

“We genuinely never wanted to exclude anyone, says Jan, but it was obvious even then that we were, somehow, excluding people – or more accurately, we were gathering people around us who looked like us and thought like us”

NESTA, 2020

⁴⁸ Perkins (2010). Green Spaces of Self-Interest Within Shared Urban Governance. *Geography Compass*. <https://doi.org/10.1111/j.1749-8198.2009.00308.x>

⁴⁹ Southby, K., South, J and Bagnall, M (2019). A Rapid Review of Barriers to Volunteering for Potentially Disadvantaged Groups and Implications for Health Inequalities. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 30, p. 907–920

Effective interventions: Examples from within the WMCA region

Current projects within the WMCA region can inspire discussion around the possibilities for future interventions in our urban greenspaces. PHE (2020) highlight three intervention types which can reduce inequalities in accessing its health benefits.⁵⁰ These are:

1. Increase the amount and quality of greenspace.
2. Increase use or engagement.
3. Use targeted health interventions based in greenspace.

(1 & 3) Naturally Birmingham: Future Parks Accelerator



The 'Future Parks Accelerator' is a collaboration between the National Lottery Heritage Fund, National Trust and Ministry of Housing and Local Government.

- The funding for this project aims to support cities in building a sustainable future for the UK's urban greenspaces. Birmingham is one of 8 cities who were successful in a bid for funding and has created [Naturally Birmingham](#) as a two-year project.
- As highlighted, there are real issues with accessing good quality, local greenspace which must be turned around if these spaces are to be used by all groups to promote health. The Health and Wellbeing strand of Naturally Birmingham is currently focused on maximising the use of local greenspaces to improve health and wellbeing through a pilot of the '20-minute neighbourhood' concept. Previous projects have attempted to quantify the impact of greenspace through the health benefits delivered by social prescribing initiatives using these spaces.

⁵⁰ Public Health England. (2020). *Improving access to greenspace A new review for 2020*.p 41

- These pilot projects aim to get every department in the Council to understand the importance of greenspace to their work and develop a sustainable finance framework to invest in these spaces, redefining the contribution that the green environment makes to the city, now and in the future.

(1&2) Active Wellbeing Society



Grounded in the areas of Birmingham where inequalities are most evident, the Active Wellbeing Society works to tackle inequalities in health and promote community development, working collaboratively with communities to remove barriers to involvement. They run several projects, of which Active Communities and Active Parks (2) and Social Prescribing (3) are notable.

- [Active Communities](#) is one of 12 national pilots supported by National Lottery funding with Solihull and Birmingham Council working together to share best practice. It focuses on six key areas in deprived wards. The focus is on physical activity tied to community activism, shifting power so that communities make decisions based on their needs, making interventions much more sustainable. This has involved sports equipment loans (e.g bikes) and partnerships with [Sāhēlī Hub](#), catering to culturally sensitive needs of Muslim women through ‘women only’ health and fitness sessions which run in parks across the East of Birmingham.
- [Active Parks](#) was set up by the Council and offers a range of free physical activity classes in over 80 urban greenspaces in Birmingham. Active Parks is designed to remove barriers - it is free, easy, and geared towards beginners.
- Active Wellbeing have begun to run [social prescribing](#) initiatives with local GPs, using Social Prescribing Link workers to connect people with opportunities across Birmingham to become more physically active and promoting the use of local greenspaces.