

Climate and Health Clinic

Review of a novel health promotion initiative



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project working group)

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Background

The Climate and Health Clinic at the 2012 Melbourne Sustainable Living Festival was the first health promotion initiative of this kind for parties involved.

This initiative involved the establishment of a 'pop-up' clinic where visitors could come for information about the links between climate change and human health. It also involved 'roving health promoters' moving through the festival space and engaging with members of the public.

The roving Health Promoters offered people 'prescriptions' for activities beneficial to their health and the environment as well as 'referrals' to other parties where more information or services were available.

The project working group that conceived the initiative and developed the materials included the Climate and Health Alliance, Kooweerup Regional Health Service, Australian Psychological Society, and Women's Health in the North, with additional support from Deakin University School of Health and Social Development.

The Clinic had two overarching aims: firstly to raise awareness of the health benefits associated with strategies to cut emissions, and secondly to help people identify actions they could take in their own lives that would help reduce their emissions and improve their own and population health at the same time.

Process

The 'Clinic' was staffed with volunteer health promotion professionals and students who engaged members of the public in conversations about climate and health and invited people to develop their own 'prescription' for health and climate - using a tool designed by the project working group for the event.

The prescription tool ***Prescription for a Healthy Life and a Healthy Planet*** was based on four domains: **Getting Around** (looking at transport); **Home** (principally about energy use, energy conservation and energy efficiency); **Food for Thought** (encouraging people to reduce their footprint and emissions from food); and **Nature** (highlighting the health and environmental benefits from re-engaging with nature).

Each section highlighted some of the health and climate benefits in each area, and posed a series of questions to assist people in identifying where they could take action to cut emissions and improve health.

The purpose of the prescription was to create a health promotion tool that could be used by health promotion practitioners, primary health care professionals, community health practitioners and the general public to demonstrate the links between high emissions lifestyles and human health. The prescription can help to identify actions that have a dual purpose – to reduce emissions and improve health.

One source of inspiration for the prescription tool was the Lifescrpts initiative, developed by Department of Health and Ageing for general practitioners to assist people in identifying lifestyle risk factors for chronic disease. Another was the 'Green Scripts' initiative developed by the Heart Foundation in New Zealand to encourage physical activity as a means of promoting health and wellbeing.

The *Prescription for a Healthy Life and a Healthy Planet* differed from both of these examples in that it specifically identified actions that had the dual benefit of improving the health of individuals/population health while improving environmental health or reducing environmental risk factors at the same time.

The Climate and Health Clinic project working group was not aware of any other tool that is currently available for this purpose.

Data

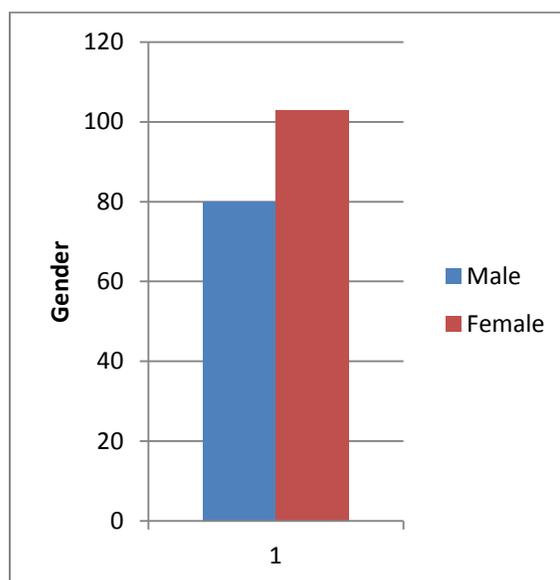
During the initiative, data was collected on: the gender of those given prescriptions; the nature of the 'prescription' issued; whether or not there was a 'referral' to another service; and any comments participants wished to make.

Due to the high volume of people being approached by the roving health promoters, and the brevity of some of these interactions, not all the details of all the prescriptions issued were recorded.

Results

Gender

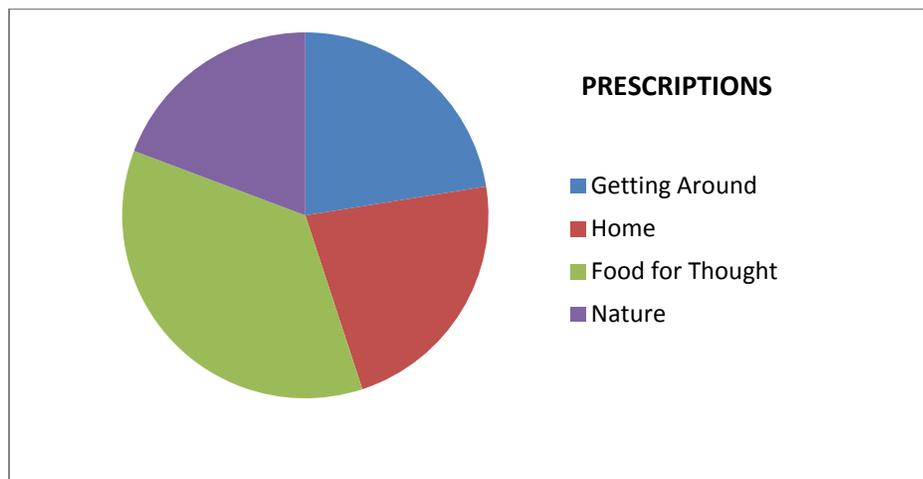
The majority of people who chose prescriptions were women (55%), with men 45% of total participants.



The clinic volunteers handed out around 500 prescriptions for people to complete themselves; around 180 people had longer consultations with the roving health promoters who assisted them to identify actions they could take in a particular area to cut emissions and improve their own health or population health.

Unsurprisingly given the context of the event, many people were already engaged in a number of sustainable behaviours; many however were unaware or were not fully cognisant of the health aspects of those actions.

The key issues for people who developed their own prescriptions in order of priority were: Food (36%), Nature (29%), and Getting Around and Home (both 22.5%).



Food for Thought:

One third of those who were interested in prescriptions in the domain related to *Food* indicated a meat free diet was their preferred method of reducing emissions and improving health. Around 10% indicated they would choose to grow their own food as a means of cutting emissions and improving health.

Other strategies identified for reducing emissions and improving health in relation to *Food* included reducing both the quantity and frequency of takeaway meals and/or substituting reusable containers for disposable takeaway packaging.

Home:

One-third of people who sought prescriptions in the area of *Home* nominated energy efficiency and reducing energy consumption as their preferred method of reducing emissions to improve health.

Almost half of those that identified specific strategies to undertake at *Home* indicated installing renewable energy systems such as solar panels was an option they would consider to reduce their emissions and contribute to improved population health.

Improving insulation and reducing air travel were other options chosen as personal prescriptions to reduce personal energy consumption and improve personal and global health.

Getting Around:

Around 30% of those who chose prescriptions in the *Getting Around* domain nominated increased use of public transport as their preferred option.

A large majority (67%) said shifting to active transport, such as walking or cycling instead of travelling by private car, was the way they intended to reduce emissions and improve their own and population health.

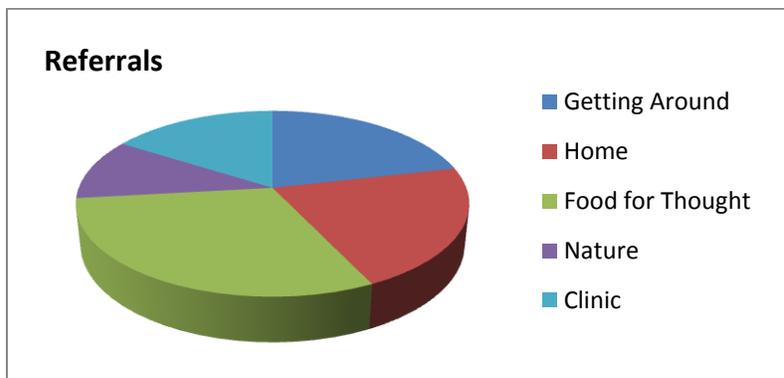
Nature:

Just over half (52%) of people indicated that increasing their time spent gardening was their own personal prescription for reducing emissions and improving health in the domain of *Nature*.

A number of respondents also indicated this would involve growing their own vegetables, an overlap with the *Food* domain, suggesting that the figure of 10% of prescriptions in the *Food* domain for growing one's own food may in fact be higher.

Referrals:

Not all prescriptions were accompanied by a referral, with approximately one-third of people who received prescriptions also seeking or being offered a referral. Around 30% of these were related to *Food*, with referrals to workshops and services involving permaculture, food sustainability, growing vegetables, and composting.



Other popular referrals (21%) were to 'green renters' services, with people seeking information about improvements to energy efficiency and energy conservation in the *Home* domain. A similar sized group (21%) of referrals was for services in relation to *Getting Around*, with referrals to bike shops/stalls constituting the bulk of these.

Around 16% of referrals were to the Climate and Health Clinic, for people to obtain more information on climate and health links and ways to reduce emissions and improve health.

Evaluation

An evaluation of volunteer experience provided insight into the effectiveness of the tool and the initiative itself.

Over 80% of volunteer health promoters thought the Clinic was successful in achieving its aim to “raise awareness of the health benefits associated with strategies to cut emissions and to help people identify actions they could take in their own lives to reduce emissions and improve health”.

Just over 44% thought the materials developed for the clinic (e.g. the prescription) was ‘very useful’ in initiating and offering a health promotion service; while another 44% thought the materials useful but thought they would benefit from further development before rolling them out more widely.

Over 70% of volunteers considered being involved in the Clinic a valuable experience personally and professionally.

Other materials considered useful to have in addition to the prescription included contact details for the Climate and Health Alliance as well as a feedback form to provide participant evaluation of the prescriptions. Several respondents suggested more posters/handouts/fact sheets about climate and health would be a valuable addition to the Clinic’s resources.

The Climate and Health Clinic also distributed materials from other agencies that were relevant to climate change and health. Those that were popular included information from the Heart Foundation on active transport; a brochure from the Australian Psychological Society on talking to children about environmental issues; and fact sheets from on Climate Change Adaptation Research Network for Human Health on the impacts of climate change on human health.

Discussion

The higher number of prescriptions issued in the domain of *Food* suggests that acting to reduce food miles and wasteful consumption in the food chain are strategies that people see as effective ways to reduce their emissions and improve health. It also appears to be an area in which people not only feel capable of taking action but are willing to do so.

This may reflect that the connections between food and health are more readily understood and provide opportunities for self efficacy through actions that can be taken at low cost and that provide tangible and short term rewards.

The popularity of strategies related to energy conservation and energy efficiency in the domain of *Home* may reflect greater levels of community awareness regarding the emissions reduction potential of these actions. The installation of renewable energy systems was also a popular option, although a number of participants expressed reservations regarding the associated upfront costs. Anecdotally many of these conversations however revealed that the health benefits associated with energy conservation strategies and the substitution of clean renewable energy for fossil fuels were much less well understood.

The readiness with which people identified strategies to reduce emissions and improve health through access to nature suggests there is widespread intuitive understanding of the health benefits of nature. It is likely that taking action to reduce emissions and improve health in this domain is inexpensive and readily accessible for many people, which may account for it being

the preferred choice for around one-third of all personal ‘prescriptions for a healthy life and a healthy planet’ issued at the festival.

Switching to public and active transport instead of driving appeared to be strategies for which both the environmental and health benefits were apparent for many participants, with this being the most popular of all actions in the *Getting Around* domain – accounting for two-thirds of prescriptions for this area.

The results of this initiative suggest that there is a gap in resources available for health professionals and the public that can assist people to identify strategies that have both environmental and health benefits. Given that positive messages are more readily received as public health messages, the positive frame associated with the identification of these strategies (ie ‘climate action is good for health’) is one that should be widely employed in educating the public about the opportunities available to reduce individual and collective environmental footprints in ways that improve personal and population health at the same time.

The information in this report provides a useful overview of the types of information that can be collected using this tool.

The results suggest that it provides a valuable tool for health promotion and awareness-raising, and help improve understanding among health professionals and the general public about the opportunities that exist for integrated strategies to achieve two positive outcomes at the same time: cutting emissions and improving health.



Limitations

It should be noted that the collection of data from participants varied widely among volunteer health promoters and therefore not all prescription strategies and personal choices were captured by the data collection tool.

Many interactions occurred in a short time frame during a busy public event and the results may not be entirely representative of the prescription choices of a wider population sample.

Consultation with the participating health promoters however suggests the results are broadly consistent with the conversations they engaged in during the period in which the Clinic operated.

No data was collected on the number of people who were approached who chose not to participate. Anecdotal evidence suggests some people initially willing to have a conversation about health and climate were not willing to discuss their own health.

Recommendations

The Climate and Health Clinic project working group recommend:

- Utilisation of this tool by health promotion and primary health/community health practitioners as a way of building community understanding about the links between high emissions lifestyles and risks to human health
- For those communicating about climate change to place greater emphasis on the health benefits of cutting emissions as a positive and empowering frame for climate communications
- Further testing and evaluation of this tool as a method of engaging people on climate and health issues and building community understanding of the need for emissions reductions

Acknowledgements

The Climate and Health Clinic project team acknowledges in particular the contributions of Aileen Thoms, Bronwyn Wauchope, Monique Decortis and Trisha Kilgour.

APPENDIX ONE

The prescription tool appears below in Figure 1:

<h2>Your Prescription for a Healthy Life and a Healthy Planet</h2> <h3>OUR PLANET, OUR FUTURE, OUR HEALTH</h3> <p>A healthy environment is essential for good health. There are many ways to reduce your environmental footprint <i>and</i> improve your health at the same time.</p> <p>This "prescription" will help you identify opportunities to improve your health and the climate.</p> <p>Which of the categories Getting Around, Home, Food for Thought, and Nature do you see as a priority area for action?</p> <h4>GETTING AROUND</h4> <p>Walking, cycling and swapping your car for alternative forms of transport can cut emissions and improve cardiovascular health and improve energy and vitality, as well as reduce air pollution.</p> <ol style="list-style-type: none">1. How do you generally get around your neighbourhood? _____2. Could you reduce your car travel by walking cycling or using public transport? <input type="checkbox"/>3. Are you a frequent flyer? <input type="checkbox"/> <p>Are there other actions could you take in relation to Getting Around for climate and health?</p> <h4>HOME</h4> <p>Replacing fossil fuels with clean renewable energy will reduce emissions and improve health by reducing harmful pollution that causes cancers, cardiovascular and respiratory disease and developmental disorders.</p> <ol style="list-style-type: none">1. Have you thought about switching to green power or installing renewable energy at home (or work, if applicable)? <input type="checkbox"/>2. Could you cut your energy use by improving energy efficiency in your home? <input type="checkbox"/> <p>Keeping your home well insulated and shaded will reduce emissions by conserving energy and will protect you and other members of your household from extreme temperature fluctuations, as well as improving your health.</p> <ol style="list-style-type: none">3. Does your home have wall, ceiling and floor insulation and green shading? <input type="checkbox"/> <p>Are there other actions could you take in relation to Home for climate and health?</p>	<h4>FOOD FOR THOUGHT</h4> <p>Buying fresh seasonal fruit and vegetables can reduce emissions by reducing the energy used for transport, processing and packaging of food. By choosing a more plant based diet you can reduce your risk of cardiovascular disease and bowel cancer.</p> <ol style="list-style-type: none">1. Could you increase the number of your weekly meals that are plant based e.g. have more meat free meals? <input type="checkbox"/>2. Do you or could you grow some of your own food e.g. salad greens, potatoes, tomatoes, and keep backyard chickens? <input type="checkbox"/>3. Do you buy locally produced and organic food without packaging or that has recycled and recyclable packaging? <input type="checkbox"/> <p>Are there other actions could you take in relation to FOOD for climate and health?</p> <h4>NATURE</h4> <p>Having access to green spaces is important for health and wellbeing. Reconnecting with nature can restore our resilience and help us tackle challenges and adapt to change. Trees and other vegetation can help draw down excess carbon dioxide, reduce harmful air pollution, and improve mental health and wellbeing.</p> <ol style="list-style-type: none">1. Could you increase the amount of time you regularly spend in your home or community or other green space? <input type="checkbox"/>2. Could you plant more trees and other plants around your home or in your community? <input type="checkbox"/> <p>Are there other actions could you take in relation to NATURE for climate and health?</p> <h4>YOUR PERSONAL PRESCRIPTION</h4> <p>Date: <input type="text"/></p> <p>List the actions you intend to take from today that would be a step in the green health direction:</p> <p>_____</p> <p>_____</p> <p>_____</p> <h4>REFERRAL</h4> <p>There are many programs and organisations that offer ways to take action on climate and health in the area/s you have identified.</p> <p>Here are some suggestions to get you started:</p> <p>_____</p> <p>_____</p> <p>_____</p>
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