

Biodiversity and health: exploring patient perspectives

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I do not have any conflict of interest

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Background: Biodiversity and healthcare

- **Biodiversity's health benefits recognised**
 - Physical and mental health benefits
 - Ecosystem services
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 - **Nature exposure is rarely addressed in healthcare practice as key health determinant**
 - Lack of awareness among health professionals
 - Place for nature prescriptions?
- How do patients **perceive biodiversity**?
 - Patients' knowledge and understanding of **local biodiversity vs. objective data**
 - How do patients **perceive biodiversity-health connections**?



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Methods

- **Approach:**

- Qualitative, inductive, Switzerland-Belgium (French-speaking)
- Recruitment of patients in about 10 PC practices

- **Data collection:**

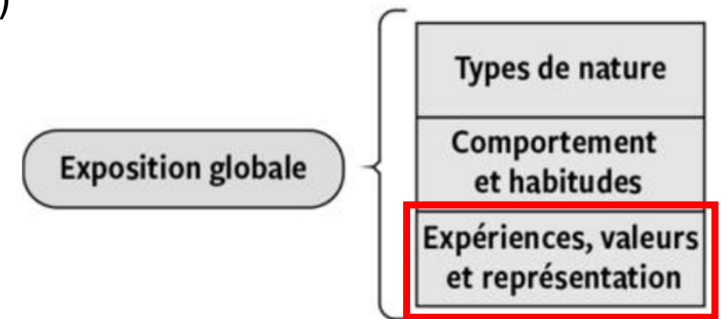
- 42 semi-structured interviews with patients (1-1.5 hours)
- 60% females, 55% > 56 y, 55% urban/semi-urban

- **Interview support tool:**

- Species/Vegetation mapping, biodiversity indices.

- **Data analysis:**

- Transcription
- Coding and thematic analysis (MAXQDA, NVivo)
- Cross-analysis (BE-CH)



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Objective measure of biodiversity

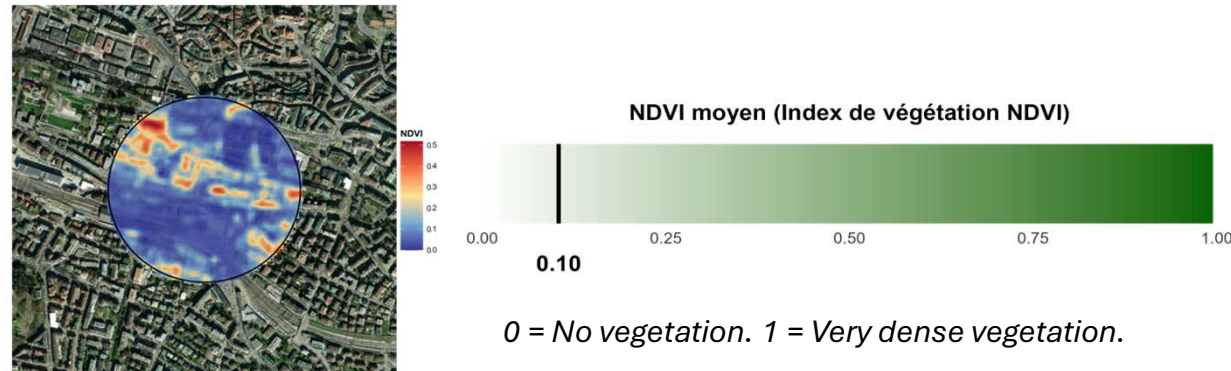
- **Study parameters**

- **300 m radius** around patients' homes
- **Comparison with 1,000 households**

- **Index used**

- Plant/vegetation density (NDVI)
- Observed species richness (citizen science monitoring sites)
- Vegetation cover (BE)
- Modelled species richness (CH)

Example of a map generated for patients, including comparative data:



Gap between patients' quote and objective measures:



Results: Patients' perceived biodiversity and nature

- **Biodiversity** is perceived as an **abstract, technical concept**, often equated with "nature", "ecology" or "environment“

*"I don't use it much. I find it really **technical**." (M, 65)*

*"For me, it's part of all the **ecological fights**." (W, 22)*

- Nature is perceived through **singular, lived experiences** across **varied types of nature** and **practices**.
- These experiences carry a **strong sensory and aesthetic dimension**.

*"In the forest, what I also **find soothing is the sound** (...) of the **water** or the sound of the **wind in the trees**, the tree screaming. I find these are **sounds that calm you down, that make you feel good**." (M, 26)*

=> 'Patients shift toward 'contact with nature,' which is more tangible and refers to concrete experiences.



Results: Patients' perceptions of links between health and biodiversity

The **most frequently** mentioned link is the positive **impact on mental health and well-being, but it operates through nature** contact rather than biodiversity itself

“Yes, I really find that when it comes to mental health and mental wellbeing, nature is... uplifting, a real help” (M53)

Link with **physical health** acknowledged but **abstract**

- **Concrete links raised occasionally:** allergies, diet, respiratory diseases

*“I have the feeling, I'm **not sure there's really a cause-and-effect link**, but I feel that **when biodiversity is doing well**, it means the whole system is doing well. And typically, **us too.**” (W. 50)*



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Key takeaways

- Biodiversity perceived as **technical and abstract** → patients shift to nature contact: concrete, sensory, experiential
- Mental health benefits most tangible → nature as self-care for well-being.

In practice

- Use sensory entry points: birdsong, landscapes, scents
- Promote self-directed practices: gardening, forest walks, wildlife observation
- Start with mental health to open onto **broader benefits** (cardiovascular, respiratory, chronic)

Next Steps :

- **Study on GPs' perspectives** (ongoing)
- **Advocate for policy**



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Thank you for your attention !

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