



eDelphi - GreenME project

This is the Round 1 survey for the eDelphi study of the GreenME project. The aim is to design a Theory-of-Change that identifies different mechanisms that can explain how nature-based therapies may improve mental health and well-being and, more specifically mental health and well-being equity.

The approximate time for completing all answers is **20-30 minutes**.

In this survey, we included a number of open-ended questions addressing each aspect of the research question as well as sociodemographic questions. The first survey will also ask for the respondent's email address as only respondents from the first round will be invited to participate in the second round.

For further information you can see the attached documents of the invitation mail or refer to Helen.Cole@uab.cat

Thank you for agreeing to participate in the GreenME theory-of-change eDelphi survey!

* Necessària

Contact info

1

In order to invite you to participate in the second round of the survey, what is your email address? *

Demographics

2

Which of the following best describes the sector of the entity you represent/with which you are linked? You may choose more than one option. If you choose "Other", please specify. *

- ☐ Nature-based intervention provider
- ☐ Administration, including promotion or policy change
- ☐ Territory planning
- ☐ Environmental Protection
- ☐ Provision of health services including basic medical care
- ☐ Social services
- ☐ Nature conservation
- ☐ Research or evaluation
- ☐ Education, training or professional development
- ☐ Insurance company
- ☐ Finances, including funding of other programs, initiatives or organizations
- ☐ Consulting, knowledge exchange or experience exchange
- ☐ Tourism
- ☐ Communication including communication via public awareness campaigns or to the media
- ☐ Building systems or developing partnerships or coalitions
- ☐ Autres

3

What is the highest level of education you have completed? If "Other" please specify. *

- ☐ No formal education
- ☐ Primary education
- ☐ Secondary education or high school
- ☐ Post-secondary non-tertiary education (e.g., vocational training)
- ☐ Short-cycle tertiary education (e.g., associate degree)
- ☐ Bachelor's degree or equivalent
- ☐ Master's degree or equivalent
- ☐ Doctoral degree or equivalent
- ☐ Autres

4

Which age group do you belong to? *

- ☐ 18-24 years old
- ☐ 25-34 years old
- ☐ 35-44 years old
- ☐ 45-54 years old
- ☐ 55-64 years old
- ☐ 65-74 years old
- ☐ 75 years or older

5

Which gender do you identify with? *

- ☐ Woman
- ☐ Man
- ☐ Non-Binary
- ☐ Other or prefer not to reply

6

How many years of professional experience do you have in the field of nature and health? *

- ☐ Less than 5 years
- ☐ Between 5 and 10 years
- ☐ Between 10 and 20 years
- ☐ More than 20 years

7

In which country are you currently undertaking most of your work? If "Other" please specify. *

- ☐ Germany
- ☐ Italy
- ☐ Poland
- ☐ Spain
- ☐ Sweden
- ☐ United Kingdom
- ☐ United States
- ☐ Altres

8

What is your work setting? If "Other" please specify. If "Other" please specify. *

- ☐ Rural
- ☐ Urban
- ☐ Peri-urban
- ☐ Coastal
- ☐ Altres

9

What is your type of work environment? If "Other" please specify. *

- ☐ Garden
- ☐ Forest
- ☐ Blue space
- ☐ Altres

Nature-based therapy and mental health equity

As part of the GreenME project, we are evaluating **how nature-based therapies** may contribute to adult **mental health equity**.

By mental health and wellbeing equity, we mean the attainment of the **highest level of mental health and wellbeing** for all people, such that there are **no unjust or unfair differences** in the level of mental health between groups of people regardless of their personal characteristics (such as their ethnicity, migration status, age, employment status, sexual orientation or gender identity, socioeconomic status, disability, etc.).

10

We define nature-based therapy as *"a therapeutic intervention that utilizes exposure and interaction with nature to enhance individuals' health and wellbeing."*

Would you make any changes to this definition of nature-based therapy? If so, what would you change?

*

11

We will focus on nature-based therapies related to mental health and wellbeing, particularly thinking about how such therapies can contribute to adult mental health and wellbeing equity.

We consider the desired impact of nature-based therapies to be a contribution to adult mental health and wellbeing equity.

Do you agree with this desired impact? If not, how would you describe the desired impacts of nature-based therapies? *

Types of Nature Based Therapies

For the following questions, we will focus on the following types of nature-based therapies:

- **Gardening-related therapy** - any nature-based therapy that focuses on gardening activities.
- **Forest therapy/forest bathing** - any nature-based therapy that focuses on contact with a forest.
- **Blue therapy** - any nature-based therapy that focuses on contact with bodies of water.
- **Other type of nature-based therapy** - any nature-based therapy not represented in the previous three categories.

Developing our Theory of Change



Our ultimate goal is to develop our Theory of Change using this model. The model includes six the factors (context, activities, resources, etc.), each guided by a general question. Through this survey, we aim to answer the general questions to ultimately understand how **nature-based therapies** work to improve adult mental health equity.

In the following sections, we will ask specific questions related to the six factors and provide example responses to the specific questions as they relate to a *hypothetical* smoking cessation program.

Gardening-related therapy

Gardening-related therapy - any nature-based therapy that focuses on gardening activities.

12

Do you have experience or expertise relating to any type of gardening-related therapy? *

☐ Yes

☐ No

Gardening-related therapy -- Questions



Gardening-related therapy - any nature-based therapy that focuses on gardening activities.

Now we will use the above model to develop the GreenME Theory of Change as it relates to **gardening-related therapy**. The following five questions correspond to certain factors of the model (context, activities, resources, etc.).

While all questions in this section should be answered with respect to **gardening-related therapy**, to help contextualize the questions, some are accompanied by example responses that are related to a hypothetical smoking cessation program.

13

Which contextual factors affect the ability of gardening-related therapy to contribute to improved adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT Where do we work?	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES What do we do?		RESOURCES What do we use?
RESULTS What do we produce or provide?		
OUTCOMES What change do we want?		
IMPACT What do we want to achieve?		

14

For gardening-related therapy, what are the specific activities that you think improve adult mental health and mental wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
	What do we use?	
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

15

What are the resources needed to conduct a gardening-related therapy program that contributes to adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
	What do we use?	- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

16

For gardening-related therapy, what are the tangible, measurable results that can be achieved? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?			- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do?	Create a smoking cessation program with sessions run by trained counsellors	RESOURCES	What do we use?	- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants			
OUTCOMES	What change do we want?				
IMPACT	What do we want to achieve?				

17

What are the outcomes and broader, long-term impacts brought about by those results in order to achieve better adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?			- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do?	Create a smoking cessation program with sessions run by trained counsellors	RESOURCES	What do we use?	- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants			
OUTCOMES	What change do we want?	- Improved successful quit rate among participants - Increased funding to scale up the program			
IMPACT	What do we want to achieve?	Increase in the number of people who have stopped smoking through participation in the smoking cessation program			

18

Concerning mental health and wellbeing *equity*:

What are the enablers for all populations to be able to access and benefit from gardening-related therapy?

*

19

What are the challenges that may preclude some population groups from accessing and benefitting from gardening-related therapy? *

Forest therapy/forest bathing

Forest therapy/forest bathing - any nature-based therapy that focuses on contact with a forest.

20

Do you have experience or expertise relating to any type of forest therapy or forest bathing? *

☐ Yes

☐ No

Forest therapy/forest bathing -- Questions



Forest therapy/forest bathing - any nature-based therapy that focuses on contact with a forest.

Now we will use the above model to develop the GreenME Theory of Change as it relates to **forest therapy/forest bathing**. The following five questions correspond to certain factors of the model (context, activities, resources, etc.).

While all questions in this section should be answered with respect to **forest therapy/forest bathing**, to help contextualize the questions, some are accompanied by example responses that are related to a hypothetical smoking cessation program.

21

Which contextual factors affect the ability of forest therapy/forest bathing to contribute to improved adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT Where do we work?	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES What do we do?		RESOURCES What do we use?
RESULTS What do we produce or provide?		
OUTCOMES What change do we want?		
IMPACT What do we want to achieve?		

22

For forest therapy/forest bathing, what are the specific activities that you think improve adult mental health and mental wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?		- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town
ACTIVITIES	What do we do?	RESOURCES	What do we use?
RESULTS		What do we produce or provide?	
OUTCOMES		What change do we want?	
IMPACT		What do we want to achieve?	

23

What are the resources needed to conduct a forest therapy/forest bathing program that contributes to adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?		- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town
ACTIVITIES	What do we do?	RESOURCES	What do we use?
RESULTS		What do we produce or provide?	
OUTCOMES		What change do we want?	
IMPACT		What do we want to achieve?	

24

For forest therapy/forest bathing, what are the tangible, measurable results that can be achieved? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?		
	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town		
ACTIVITIES	What do we do?	RESOURCES	What do we use?
	Create a smoking cessation program with sessions run by trained counsellors		- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?		
	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants		
OUTCOMES	What change do we want?		
IMPACT	What do we want to achieve?		

25

What are the outcomes and broader, long-term impacts brought about by those results in order to achieve better adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?		
	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town		
ACTIVITIES	What do we do?	RESOURCES	What do we use?
	Create a smoking cessation program with sessions run by trained counsellors		- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?		
	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants		
OUTCOMES	What change do we want?		
	- Improved successful quit rate among participants - Increased funding to scale up the program		
IMPACT	What do we want to achieve?		
	Increase in the number of people who have stopped smoking through participation in the smoking cessation program		

26

Concerning mental health and wellbeing *equity*:

What are the enablers for all populations to be able to access and benefit from forest therapy/forest bathing? *

27

What are the challenges that may preclude some population groups from accessing and benefitting from forest therapy/forest bathing? *

Blue therapy

Blue therapy - any nature-based therapy that focuses on contact with bodies of water.

28

Do you have experience or expertise relating to any type of blue therapy? *

☐ Yes

☐ No

Blue therapy -- Questions



Blue therapy - any nature-based therapy that focuses on contact with bodies of water.

Now we will use the above model to develop the GreenME Theory of Change as it relates to **blue therapy**. The following five questions correspond to certain factors of the model (context, activities, resources, etc.).

While all questions in this section should be answered with respect to **blue therapy**, to help contextualize the questions, some are accompanied by example responses that are related to a hypothetical smoking cessation program.

29

Which contextual factors affect the ability of blue therapy to contribute to improved adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT Where do we work?	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES What do we do?		RESOURCES What do we use?
RESULTS What do we produce or provide?		
OUTCOMES What change do we want?		
IMPACT What do we want to achieve?		

30

For blue therapy, what are the specific activities that you think improve adult mental health and mental wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
		What do we use?
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

31

What are the resources needed to conduct a blue therapy program that contributes to adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
		What do we use? - Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

32

For blue therapy, what are the tangible, measurable results that can be achieved? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?			- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do?	Create a smoking cessation program with sessions run by trained counsellors	RESOURCES	What do we use?	- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants			
OUTCOMES	What change do we want?				
IMPACT	What do we want to achieve?				

33

What are the outcomes and broader, long-term impacts brought about by those results in order to achieve better adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work?			- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do?	Create a smoking cessation program with sessions run by trained counsellors	RESOURCES	What do we use?	- Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	- Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants			
OUTCOMES	What change do we want?	- Improved successful quit rate among participants - Increased funding to scale up the program			
IMPACT	What do we want to achieve?	Increase in the number of people who have stopped smoking through participation in the smoking cessation program			

34

Concerning mental health and wellbeing *equity*:

What are the enablers for all populations to be able to access and benefit from blue therapy? *

35

What are the challenges that may preclude some population groups from accessing and benefitting from blue therapy? *

Other type of nature-based therapy

Other type of nature-based therapy - any nature-based therapy that is not a gardening-related therapy, forest therapy/forest bathing, or blue therapy.

36

Do you have expertise or experience with any type(s) of nature-based therapy that is not a gardening-related therapy, forest therapy/forest bathing, or blue therapy? *

☐ Yes

☐ No

37

If yes, which?

Other type of nature-based therapy --
Questions



Other type of nature-based therapy - any nature-based therapy that is not a gardening-related therapy, forest therapy/forest bathing, or blue therapy.

Now we will use the above model to develop the GreenME Theory of Change as it relates to your specified **other type of nature-based therapy**. The following five questions correspond to certain factors of the model (context, activities, resources, etc.).

While all questions in this section should be answered with respect to your specified **other type of nature-based therapy**, to help contextualize the questions, some are accompanied by example responses that are related to a hypothetical smoking cessation program.

38

Which contextual factors affect the ability of the other type(s) of nature-based therapy you specified to contribute to improved adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT Where do we work?	- Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES What do we do?		RESOURCES What do we use?
RESULTS What do we produce or provide?		
OUTCOMES What change do we want?		
IMPACT What do we want to achieve?		

39

For the other type(s) of nature-based therapy you specified, what are the specific activities that you think improve adult mental health and mental wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
	What do we use?	
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

40

What are the resources needed to conduct the other type(s) of nature-based therapy program(s) that contributes to adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
		What do we use? - Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide?	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

41

For the other type(s) of nature-based therapy you specified, what are the tangible, measurable results that can be achieved? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
		What do we use? - Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide? - Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants	
OUTCOMES	What change do we want?	
IMPACT	What do we want to achieve?	

42

What are the outcomes and broader, long-term impacts brought about by those results in order to achieve better adult mental health and wellbeing? *

Example: Smoking cessation program provided in community pharmacies

CONTEXT	Where do we work? - Many people in town smoke despite health risks - Existing smoking cessation programs are accessed through health clinics and are underutilized - Community pharmacies have long hours and are present in every neighborhood and town	
ACTIVITIES	What do we do? Create a smoking cessation program with sessions run by trained counsellors	RESOURCES
		What do we use? - Funding - Trained counsellors - Space to hold sessions
RESULTS	What do we produce or provide? - Increase in the number of smokers enrolled in the program - Increase in the intention to quit smoking among participants	
OUTCOMES	What change do we want? - Improved successful quit rate among participants - Increased funding to scale up the program	
IMPACT	What do we want to achieve? Increase in the number of people who have stopped smoking through participation in the smoking cessation program	

43

Concerning mental health and wellbeing *equity*:

What are the enablers for all populations to be able to access and benefit from the other type(s) of nature-based therapy you specified? *

44

What are the challenges that may preclude some population groups from accessing and benefitting from the other type(s) of nature-based therapy you specified? *

Thank you!

Thank you for your participation!

Upon conclusion of Round 1, the data will be compiled and analyzed by the ToC working group. Responses for each question will be grouped and reviewed for similarity. Responses for each question will be summarized in a set of statements that we will ask you to review in few months.

45

Any other comments?

Microsoft no ha creat ni aprovat aquest contingut. Les dades que proporcioneu s'enviaran al propietari del formulari.



Microsoft Forms