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World Conference on
**Forests for
Public Health**

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valuing nature

Under the Auspices of H.E. the President of the Hellenic Republic Mr. Prokopios Pavlopoulos

A PRELIMINARY REVIEW OF FOREST CARE INITIATIVES FOR HEALTH IN ITALY

IDENTIFYING MODELS AND SUCCESS FACTORS

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SUMMARY

- DEFINITION and OUR HYPOTHESIS
- RESEARCH PROBLEM AND OBJECTIVE
- THE CONTEXT OF ITALY
- A DISPLAY OF OUR FRAMEWORK FOR DESCRIBING FOREST CARE INITIATIVES
- FUTURE RESEARCH NEEDS

IF SOCIETY CHANGES ALSO FORESTS CHANGE

FOREST USES ARE EXPANDING

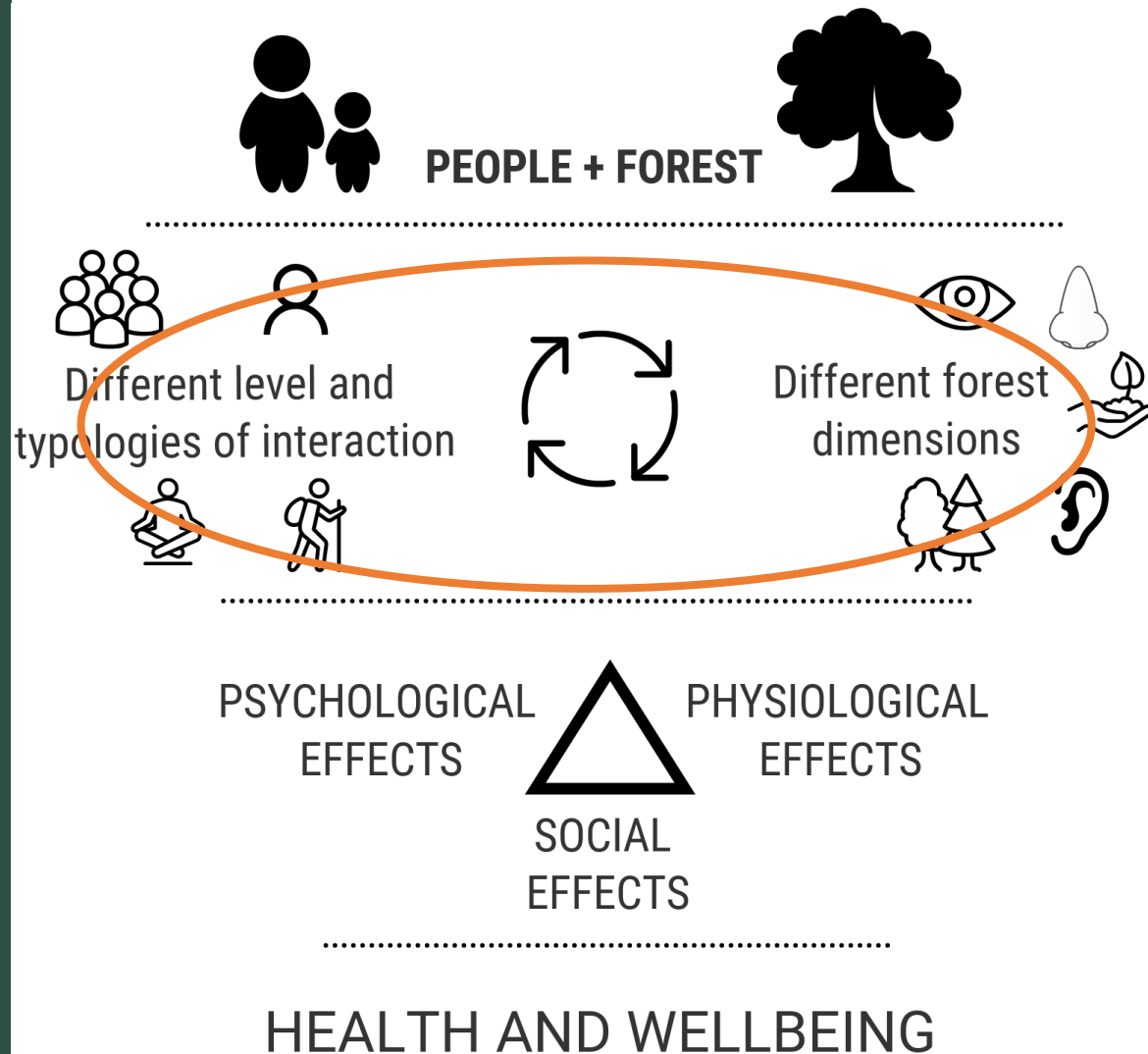
From
Regulating and Provisioning
Ecosystem Services
to
Cultural Ecosystem Services and
non-use values

Nilsson et al., 2011;
Frumkin et al., 2017



FOREST CARE INITIATIVES

ARE ORGANIZED INITIATIVES THAT USE CONTACT WITH FOREST ECOSYSTEM IN ORDER TO INCREASE THE LEVELS OF WELL-BEING OF PEOPLE



FOREST CARE INITIATIVES

-

A DOUBLE OPPORTUNITY

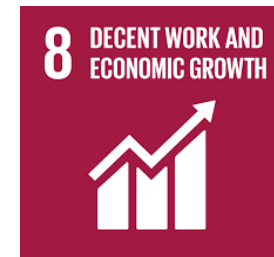
FOR PUBLIC HEALTH

a cost effective answer for increasing demand for health



FOR FOREST SECTOR

a mean of active management to **avoid land abandonment** and **support rural development** while **protecting forest biodiversity**



FORESTS IN ITALY

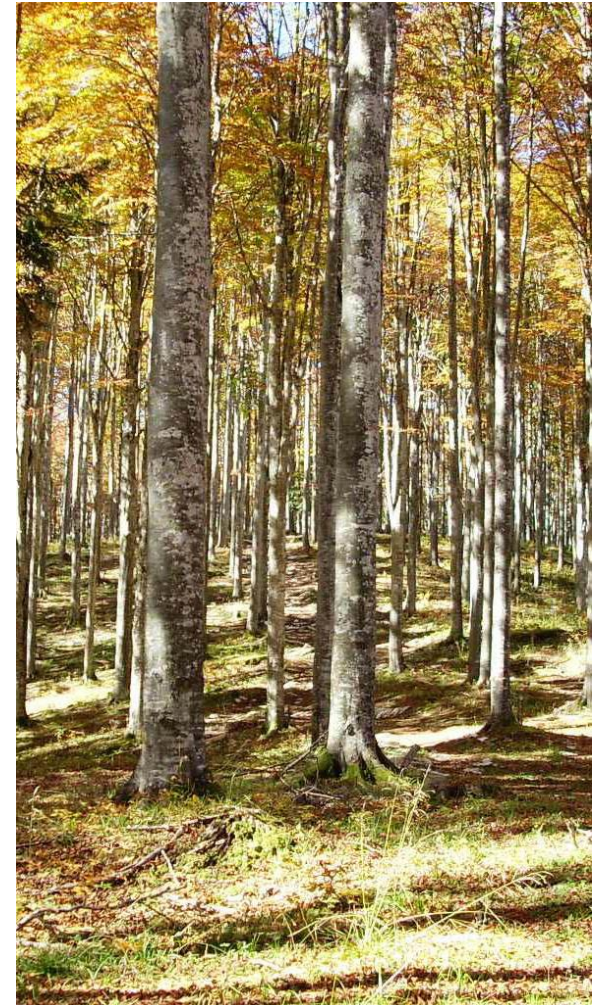
NEVER SO ABUNDANT

- Forests represent **36,4%** of total land area → 6th in EU
- Continuous expansion: + **72,6%** from 1936 to 2015

BUT ALSO NEGLECTED

- **65%** are privately owned (highly fragmented)
- The expansion is mainly due to **rural abandonment** and natural forest expansion
- Italy is a net importer of wood → **-25,9%** of businesses in the wood sector from 2008 to 2016
- **Privates have low interest in managing forests**

Source: FRA, 2015 and RAFltalia, 2019



THE OPPORTUNITY

Cultural and recreational services

620.000 people in outdoor/trekking associations

+192 adventure parks

+71 forest kindergartens

+40 forest land-art sites
(RAFIItalia, 2019)

Therapy, rehabilitation and social inclusion

Countless initiatives of forest and mountain «therapy» and wellbeing

In the pictures: Dance Well project and Accessible path for disabled people in Valle d'Aosta



OUR RESEARCH PROBLEM

Growing body of evidence of beneficial effects of contact with forest ecosystem on health and well-being

VS

GENERAL LACK OF INFORMATION ON FCIS



How health is delivered through FCIs?

SOME LEADING QUESTIONS

- How are FCIs **organized** and structured?
- Which are the **motivations** for creating a FCI and to which **needs** do they answer?
- How **forest resources** are used for these initiatives?
- Do FCIs represent an occasion for added value for the **local community** or an occasion for income for forest owners?
- There are **policies** that support, limit or missing policies for creating the enabling environment for FCIs?



OUR OBJECTIVE

Develop a modular framework for description and systematization of information on FCIs

- Different sources of information – from second hand data to semi-structured interviews
- Different type of analysis – from quantitative to qualitative/discursive
- Focus on one or more dimensions according to specific interests

Ongoing work: in
the middle of my
PhD



→ First draft of the framework

Test on FCIs for Health in Italy to have an **insight** on this growing sector, highlighting the **challenges**

FRAMEWORK' STRUCTURE

DIMENSIONS

Drivers of Change
Institutional Context
Services and
Beneficiaries

Key Elements

Services
Needs
Trigger
Linkedness
Target users

PREPARATION



IMPLEMENTATION

DIMENSIONS

Replicability

Key Elements

Monitoring
Future perspectives

LEARNING

DIMENSIONS

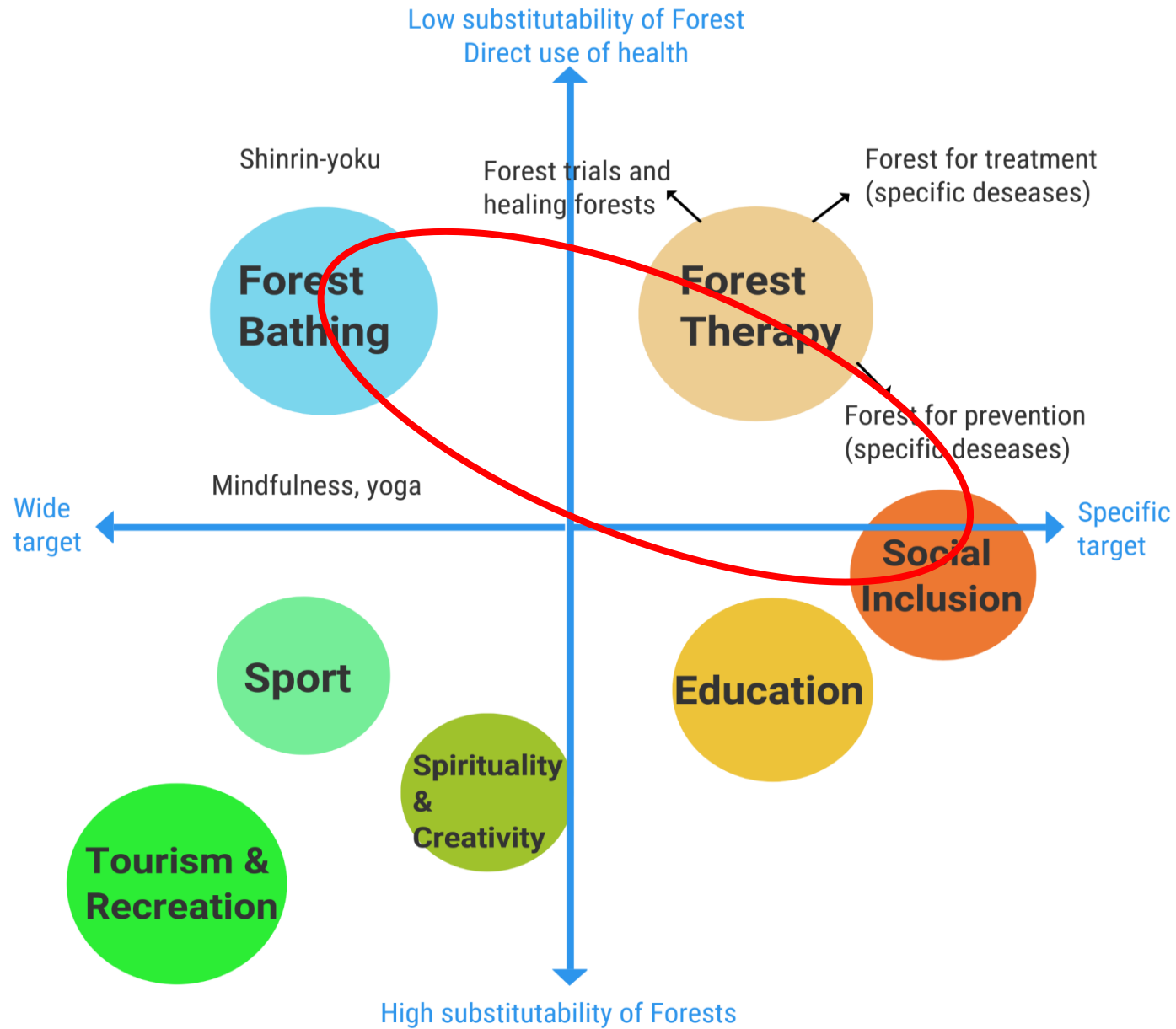
Identity
Internal Organization
Business model
Forest Use

Key Elements

Legal form
Professions involved
Business structure
Forest use
Added value for local community

PRELIMINARY CLASSIFICATION

FOCUS ON FCIS FOR HEALTH



3 examples of application with semi-structured interviews



SlowDown – Inclusion and tourism (AIPD Belluno)

<https://aipd.it/slowdown-un-nuovo-progetto-di-aipd-belluno/>

- ✓ Ran by **AIPD Belluno** section (Italian Association of Down People) in partnership with **Dolomiti Bellunesi National Park**
- ✓ **Service:** excursions for people with Down Syndrome (DS) with environmental guides and caregivers
- ✓ **Linkedness:** National park, associations and local health district
- ✓ **Needs:** socialization & quality of life of people with DS + promote sustainable and slow tourism in the Dolomites
- ✓ **Trigger:** a previously successful project



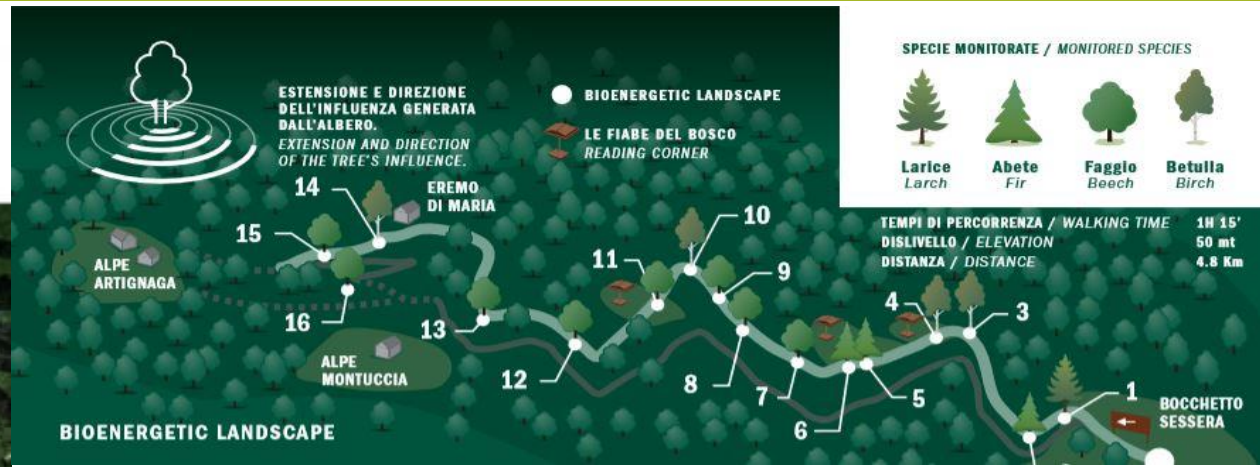
SlowDown – AIPD Belluno

Internal Structure	Non-profit organization – mainly occasional collaborators and volunteers
Target users (typologies and number)	Total 35/year People with DS + mental and physical disabilities + classmates of children with DS
Businesses structure	Source: Grant from the Park; Costs: staff; Price: fixed membership fee
Added value for local community	Social value in terms of quality of life Increased accessibility of Dolomites Park
Forest use	Active use with environmental education Free access – mixed ownership, mainly public (Park, Municipalities) Needs: accessible trails
Monitoring	Reprocess of the experience + questionnaire on mood and pleasantness of the experience



Forest Bathing

IMMERGITI. RESPIRA. RIGENERATI.
BATHE. BREATHE. REGENERATE.



Oasi Zegna – Bosco del Sorriso

www.oasizegna.com/en/sport-fun/forest-bathing-piemonte-italy_1066.html

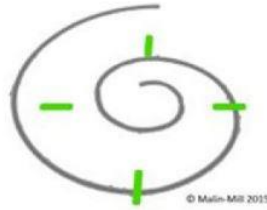
- ✓ Launched in 2012: now 3 paths of forest bathing (first in Italy)
- ✓ **Service:** Self-lead activities + specific workshops
- ✓ **Linkedness:** local tourism governance, local associations for dissemination and promotion
- ✓ **Needs:** reconnect people with nature, conserve the landscape for future generations
- ✓ **Trigger:** original mission + Bioenergetic Landscape approach

Oasi Zegna – Key Elements

Internal Structure	Philanthropic Foundation
Target users (typologies and number)	Thousands /year Tourists and visitors
Businesses structure	Costs: staff for specific workshops, fight against vandalism and promotion; Price: free (except specific activities)
Added value for local community	Tourism and satellites activities Bequest value/Landscape
Forest use	Active use for the specific bioenergy of the trees Free access – mainly owned by the Foundation Needs: bioenergetic studies, signs and panels
Monitoring	Ex-ante studies, no specific monitoring activities

Association Malin-Mill Forest Therapy

www.spiaggiadiffusa.it/stazione-di-terapia-forestale-valli-del-natisone/



Associazione
Malin-Mill
*Turismo e Sviluppo nelle
Valli del Natisone e Dintorni*

STAZIONE DI TERAPIA FORESTALE VALLI DEL NATISONE, FRIULI VENEZIA GIULIA



(Valli del Natisone, UD, Regione Friuli Venezia Giulia, Italia, Foto: Carlo Gallone)

- ✓ Ran by Malin-Mill Association (2015), studies by University of Udine from 2007 in the area for respiratory diseases
- ✓ **Service:** Preventive and integrative medicine with one-day or weekly programs + Spread Hotels;
- ✓ **Linkedness:** Local Governance, University (Medicine, Rural Economy), Local Community, Associations and schools
- ✓ **Need:** High number of population with asthma in the region, improve livelihood of mountain areas
- ✓ **Trigger:** personal need & direct experience of the project coordinator

Association Malin-Mill – Key Elements

Internal Structure	Association mainly based on volunteers, numerous partnerships and collaborations for specific activities
Target users (typologies and number)	About 50/week Tourists and people with specific pulmonary diseases
Businesses structure	Source: membership fees + research contract from the Region; Major cost: staff; Price: variable
Added value for local community	High value with the integrated offer of Spread Hotels Avoided costs for therapies and/or medicines
Forest use	Active use for its therapeutic use Free access – mixed ownership Needs: ex-ante specific studies to validate the beneficial effects of the path
Monitoring	Ex-ante studies, no systematic monitoring activities



Final Thoughts & challenges - **PLANNING**

- ✓ They work well when they're **connected** to the territory
- ✓ Respond to a broad spectrum of needs delivering **multiple services** (health, social cohesion, existence value, improved accessibility) for a **wide target** of people
- ✓ Trigger is often a key actor/meeting rather than a law/policy
- ✓ Strong **social** motivation – sense of sharing and giving something to other people



Final Thoughts & challenges - **IMPLEMENTATION**

- ✓ Various, spontaneous and independent initiatives, mainly non-profit, based on volunteers
- Embrace the vitality of the sector and guarantee common quality standards
- ✓ Growing number of Forest Bathing initiatives which are part of a wider **touristic offer** (eg. Hotels, Agritourism etc.)
- Explore this opportunity while keeping quality and sustainable management
- ✓ **Forest ecosystem** is actively used, but still **not well valued** (lack of staff qualified in forestry; no reward for owners; no attention on management or maintenance practices)
- Better understanding of the forest dimension and enhance the link with the Forest Sector



Final Thoughts & challenges - **LEARNING**

- ✓ The partnership could be both a strength and a weakness
- ✓ Lack of monitoring or reporting of effects on well-being
 - Provide evidence-based services
 - No “one fits all” solution – tailored & flexible services
 - Economic studies to advance the topic on the policy agenda



Future Research Needs

- Take into consideration the high multifunctionality of FCIs: wellbeing + tourism to protect biodiversity and support rural development
- Need of multi-sectorial studies and cooperation
- Need to better explore the economic (e.g. touristic) potential of FCIs
- How to develop a process of reward for the forest owner?



*"In every walk in Nature one
receives far more than he
seeks" J.Miur*

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