

Sample Literature Review Summary Table

Author/citation	Type of study	Sample	Data collection approach	Limitations	Key findings
<p>Branas, C, Cheney, R, MacDonald JM et al.</p> <p>A difference-in-Differences Analysis of Health, Safety, and Greening Vacant Urban Space</p> <p>American Journal of Epidemiology November 11, 2011</p>	<p>Decade long Randomized trial specifically analyzing vacant lots and using detailed geographic and temporal data that permitted at least some level of causal inference through a quasi-experimental difference-in-differences design.</p>	<p>Across 4 sections of Philadelphia, 4,436 vacant lots totaling over 7.8 million square feet were greened from 1999 to 2008.</p> <p>Control lots from 2 eligibility pools were randomly selected and matched to greened lots.</p>	<p>“before” and “after” outcome differences among treated vacant lots were compared with matched groups of control vacant lots that were eligible but did not receive greening treatment.</p>	<p>A more rigorous matching protocol may have improved analysis</p> <p>Household health survey (used for health data) only conducted biennially and had low response and not designed for small area analysis – so findings pertaining to health are suggestive</p> <p>Knowledge of how exactly the greening of vacant lots works to change health and safety remains limited.</p>	<p>1) vacant lot greening was associated with consistent reductions in <b>gun assaults across</b> all 4 sections of the city and consistent reductions in <b>vandalism</b> in 1 section of the city.</p> <p>2) vacant lot greening was associated with residents’ reporting <b>less stress and more exercise in select</b> sections of the city.</p> <p>3) once greened, vacant lots <b>may reduce certain crimes and promote some aspect of health</b></p>
<p>Maas, J., Verheij, R.A. et al.</p> <p>Morbidity is related to a green living environment. Journal of Epidemiology and Community Health: 2009, 63(12), 967-973</p>	<p>Explorative study</p>	<p>Morbidity data from electronic medical records of 195 general practitioners in 96 Dutch practices, serving a population of 345,143 people.</p>	<p>The percentage of green space within a one kilometer and three Kilometer radius around the postal code coordinates was derived from an existing database and was calculated for each household. Multilevel logistic regression analyses were performed controlling for demographic and socio-economic characteristics.</p>	<p>Data does not take small green spaces in the living environment into account. Gardens and small-scale green spaces, such as street trees and green verges are not considered in the study.</p> <p>Because of the cross-sectional design of the study, it is not possible to make strong inferences about the causality of the relations that were found.</p>	<p>The <b>annual prevalence rate of 15 of the 24 disease clusters was lower in living environments with more green space</b> in a 1 km radius. The relation was strongest for <b>anxiety disorder and depression</b>. <u>The relation was stronger for children and people with a lower socioeconomic status.</u> The relation was strongest in slightly urban areas and not apparent in very strongly urban areas.</p>

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