

Neighborhood environment — formation of a health-saving human ecosystem

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See “**Neighborhood environment: the impact of alcohol and tobacco outlets availability on health of people living in a certain area**”
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Neighborhood environment is a term that has become firmly used by social scientists, first in the United Kingdom in 2007-2009, and then in the United States. Since the division into deprived and non-deprived neighborhoods is associated with the income level, education of residents, racial and ethnic segregation, modern researchers [1] distinguish following signs of neighborhood well-being: green space, local amenities, transport accessibility, and safety. Accordingly, the qualities of residential environment affect the degree of neighborhood satisfaction, the emotional state of people and their health. Research is being conducted [2, 3] to find out how strongly living in deprived neighborhoods is associated with poor health and early mortality. Thus, if we talk about the living environment, then the physical and social components should be considered together, since they have a complex effect on human health, for example, on the development of obesity or atherosclerosis [4-6]. Social isolation, loneliness, low physical activity [7, 8] are additional death risk factors for the elderly.

Neighborhood is a diverse set of living and non-living objects and subjects with which a person (central figure) contacts and enters into multi-level relationships on a daily basis. Accordingly, we can use the historically more similar term “communities” when describing not only *the physical component* (area of neighborhood, building density, green space and playgrounds), but also *the social* one as follows: people with whom each individual is united by a common interests (family, friends, housemates, neighbors in the area), their level

of wealth and education, accessibility for interaction, and *psychological components* (a sense of security and community, a positive aesthetic perception of residential environment, confidence in the living well-being and the absence of local technological disasters).

The residential environment forms a health-saving pattern of thought aimed at promoting health, and a model of behavior and nutrition not only in adults, but also in children — the availability of kindergarten, school, safety of playgrounds, lack of bad role models — public smoking, “tasty” smells from electronic cigarettes, drinking alcoholic beverages, abandoned rubbish (cigarette butts, empty bottles and cans) and the remains of picnics.

The review “Neighborhood environment: the impact of alcohol and tobacco outlets availability on health of people living in a certain area” by Antsiferova A. A. et al. raises a topic that is unique for a Russian reader: how does the neighborhood environment and closest social circle influence risk factors for cardiovascular disease and death? The authors reviewed the literature and selected studies from different countries that examined the density of alcohol and tobacco retail outlets. The review showed the association of the availability of such outlets and the socio-cultural characteristics of studied population with an increase in the number of road accidents and other offenses. It is also understandable that the authors are interested in conducting such studies in Russia, which can make a significant contribution to understanding the methods for conducting preventive measures in relation to the country’s population [9].

The program “Development of a comprehensive system for assessing a unified preventive environment for promoting health and healthy lifestyles at the municipal/regional level in 2021–2023” will be an im-

portant step towards longevity and mortality reduction.

Relationships and Activities: none.

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