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Creative Healthy Neighbourhoods Project: Developing the evidence base in Medway

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Background and acknowledgements

This study was part of a wider Arts Council England funded project (Medway Creative Health Place Partnership) which ran for two years from Spring 2024, and involved a number of partners delivering a creative health programme largely consisting of weekly sessions for residents in two disadvantaged neighbourhoods in Medway, Kent – Brompton and Luton. There were also other elements of the project which were programmed across Medway.

The project funder was Arts Council England and the project lead was Medway Council. The research team from University of Kent conducted a research study alongside the creative health programme delivery, exploring how residents in Brompton and Luton felt about health, wellbeing and place in their communities and the impact of creative activities. The aim of the wider project and the research was to build longer term evidence and capacity for further research and action in relation to the links between health, place and creative practice in the neighbourhoods, in particular around addressing health inequalities.

We would like to thank all the research participants and partners for their engagement with the research, including Ideas Test, Nucleus Arts, Icon Theatre, Live Music Now and Medway Libraries. Thank you to Laura Bailey (Independent Consultant) who has undertaken a policy review to inform the presentation of our findings, and to Tim Harrison (Medway Council) for engagement with the research process throughout.

Summary

a) This report details a research project which was undertaken in two Medway neighbourhoods, alongside a wider Arts Council funded programme of creative health activities.
b) The research addressed residents' wider perceptions of their living environments as well as experiences of creative health activities including drama, craft, singing and community events. It set out to establish the impacts of creative health activities on residents' feelings about health and place, build capacity for further action and research, and connect to wider health agendas.
c) Walking interviews as well as conventional interviews were undertaken with 24 research participants (residents and other stakeholders) as well as visits by researchers to creative activities, and creative mapping workshops involving 30 participants.
d) The research found that both neighbourhoods (selected because of significant health inequalities) contained both barriers and assets to healthy lives in place. Barriers included lack of social infrastructure and local environmental issues, and issues around services and housing. Assets included green and natural spaces, other aspects of the built and natural environment, community networks, organisations and informal relationships, and a wealth of 'everyday creativity' happening among residents.
e) The creative health programme provided clear benefits notably improving mental health and wellbeing, reducing isolation and providing participants' with new skills. Projects were transformative for many that took part. Ensuring engagement and access to creative health was not always straightforward due to lack of suitable spaces, difficulties in reaching participants and ensuring continuity given funding limitations.
f) The project provides insights into how creative health practices can mobilise community assets in relation to emergent health agendas and policies, including around neighbourhood health.
g) The research makes the following recommendations to the council and other service providers and stakeholders:
    - Recognise barriers and assets to health in place in Medway, via locally designed strategies which address barriers and support assets including mobilising potentials of creative, cultural and environmental resources in communities
    - Design and support programmes which enable sustained, consistent creative health activities within particular localities.
    - Establish Medway as a beacon of good practice in relation to creative, holistic and place-based approaches to improving health and wellbeing and addressing health inequalities.

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Introduction

In relation to place and health, 'ecological' and population approaches have long pointed to the importance of social and community networks, as well as wider living and working conditions, and broader structural factors as key determinants of health (Dahlgren and Whitehead, 2021). Places therefore need to be understood as comprising both material/physical infrastructures, public and commercial services, as well as psychosocial and emotional aspects, and including matters of reputation and stigma (Yashadhana et al, 2023; Macintyre et al, 2002). These aspects of place can be understood as providing both assets and barriers to healthy lives. Research on place-based health inequalities, especially by Marmot (2022) has established the need for holistic approaches to reducing inequalities.

There is an increasing recognition of the physical and mental benefits of art and creativity, with the evidence base now well established (APPG, 2017; Fancourt & Finn 2025). In relation to place, creative health practices can contribute in a number of ways to overcoming place-based health inequalities, including: mapping and uncovering these assets and barriers to health; giving voice and community power around local health issues (Ganga et al, 2025); challenging representation and stigma around place; actively building community and residents' connections with place; as well as more directly tackling social isolation, and mental and physical health and wellbeing.

A place-based approach intersects with a new interest in place-based working across policy areas, including health (NHS, 2025). 'Neighbourhood health' is emerging as the organising framework for health and care reform in England. It reflects a shift towards prevention, improving population health and addressing the wider determinants of health by bringing together the NHS, local government, voluntary and community organisations and local communities around the needs of defined neighbourhoods, and building on the strengths and assets that already exist within local places.

Medway has considerable health and wellbeing challenges and inequalities (Medway Council, 2025). Medway Council has already engaged substantially with place-based approaches, including via becoming a 'Marmot place' and hosting an NIHR funded Wider Determinants of Health Research Collaboration. Medway also has a considerable creative and cultural assets including substantial networks of creative and cultural practitioners, organisations and venues.

Within this context, the aims of this study were to:

1. Establish an understanding of residents' changing feelings and perceptions about health, wellbeing and place in their communities, and the impacts of the wider ACE creative health programme via creative participatory research and mapping

2. Develop local capacity and understanding around the links between health, place and creative practice
3. Provide models for hyper-local participatory health research, involving both interdisciplinary social science research and creative practitioners, to be disseminated via publications and digital output

The research questions were:

1. How do residents in the neighbourhoods feel about health and place in their communities, and how is this changing with the creative health programmes?
2. How can the project leave a legacy of skills, capacity and partnerships in each neighbourhood and beyond for further action and research?
3. How can the project provide learning for similar neighbourhood participatory health research?

The study was reviewed and granted a favourable ethical opinion by the School of Social Sciences Staff Review Committee at University of Kent (Ref: 1153).

Methodology

A phenomenological approach was adopted, which is essential to gain in-depth insights into subjective experiences of individuals, drawing on holistic approaches to health and place used within human geography (Yashadhana et al, 2023; Macintyre et al, 2002). Furthermore, Yin's (2009) case study design was employed to facilitate exploration of health and wellbeing, place and creativity in two case study neighbourhood communities – Brompton and Luton in Medway. The design allowed cases to be compared within and across settings to understand the similarities and differences. We adopted an explanatory case study approach.

The wider determinants of health (Dahlgren and Whitehead, 2021) were very relevant to research of this type and were therefore used as an underpinning theoretical framework to inform the data collection and analysis.

The research incorporated participatory and creative methods to elicit qualitative data, including:

- One-to-one semi-structured walking interviews with residents with the researcher taking photographs of places highlighted (an alternative was offered to those not able or willing to do a walking interview, who were invited to bring photographs if they wished to)
- One-to-one semi-structured interviews with creative practitioners to explore experiences of delivery of creative sessions in Brompton/Luton and perceived impact on attendees
- Creative participatory mapping workshops with residents and other stakeholders to collectively explore health and place issues, using visual mapping methodologies to establish priorities
- Researcher field notes based on visits to groups, observations and reflections following data collection

Image from mapping workshop in Brompton, taken by researcher

Findings

A total of 24 interviews were conducted as part of this research study. Initial walking interviews took place between February and June 2025 with 14 residents. Seven participants lived in Luton, 5 lived in Brompton and 1 lived in Luton but took part in Brompton creative activities. Follow-up interviews were conducted in October 2025 with 3 people in Luton, 1 person in Brompton (who had not taken part in an initial interview so questions were combined) and the resident from Luton who took part in Brompton activities. Additionally, 5 creative practitioners were interviewed during September to October 2025, of which 3 delivered creative health activities in Luton and 2 delivered activities in both Luton and Brompton. Two creative mapping workshops were held in community venues in Luton and Brompton in March and July 2025, involving presenting emerging findings and asking residents and stakeholder to tell us about health, place and wellbeing in their areas. These were attended by 30 participants in total, including residents, councillors and other stakeholders in the areas.

Table 1. Interviews

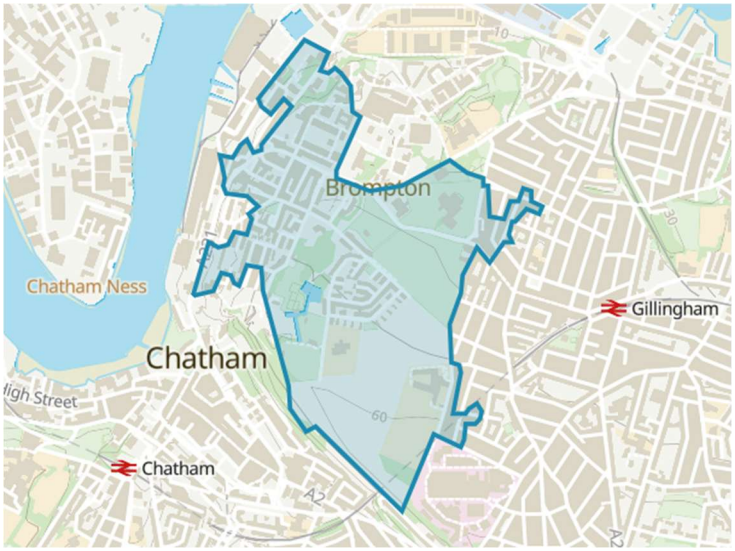
	Luton	**Brompton**	**Luton & Brompton**
Interviews with local residents (not attending creative activities)	3	5	-
Interviews with local residents attending creative activities	4	1	1
Follow-up interviews	3		1
Interviews with creative practitioners	3	-	2

1. BROMPTON

Luton and Brompton demonstrate different level of need and different challenges, and were selected as a focus for the wider project to represent different housing and population demographics (Medway Council 2023). While Brompton holds a midranking deprivation score, it is still reflective of the health and wellbeing challenges common across the wider area, with a high population of elderly residents and those with complex needs living in sheltered or social housing, requiring varying levels of social care. The area is densely packed with mid and high rise supported and social housing

including social housing operated by Medway Council Public Housing and by MSH Homes. The area sits next to an area of very low deprivation on the corner of two of Medway's main arterial roads, opposite the Chatham Historic Dockyard site. One key and unique feature of Brompton is the military base Brompton Barracks, which is a historic site and home to the Royal Engineers. There is a noticeable military presence in and around Brompton, with some areas of housing dedicated for military families.

In terms of health issues in the area, Chatham Central & Brompton Ward is worse than the overall figures (for Medway) for those registered with a GP (94.8%) and dentist (64.5%), smoking (23%) and social isolation (32%). Although it scores better for alcohol consumption (5.3%) and physical inactivity (20.5%) (Medway Council, 2025).



Brompton map

1.1 Brompton as a place

The key themes from interviews with residents of Brompton broadly align with the wider determinants of health (Dahlgren and Whitehead, 2021), which significantly influence individual and community health outcomes. These are set out below.

1.1.1 Mixed views on social/community networks and assets

Participants reported a strong sense of community in Brompton, with mentions of good neighbours and people helping each other out, although there were some elements of difference in terms of class and wealth. Brompton comprised a wide range of properties within a small area, with different communities living side by side, including military housing, Grade II listed buildings, new and renovated builds, social/council housing (mainly at Melville Court) and houses of multiple occupation.

Some participants were part of a local WhatsApp group which they found valuable for knowing what was going on and when people were in need of support. There was a local charity shop on the High Street, which was valued by many as they also offered support and advice. There was also a local community group (PACT) who met monthly and were proactive in addressing local issues, for example potholes, fixing manhole covers and street lighting and organising litter picks:

> *"When we moved to the area we joined the PACT group…a community group that meets together, talks about maybe problems that are round here and that sort of thing. So we normally have the police come, the council come, the head teacher in the primary school…so if there's any problems, we can talk about it at that."* [Resident, B002]

In our mapping workshop, 'influence and sense of control' about the neighbourhood scored particularly low, suggesting that residents didn't always feel they could have their voices heard or concerns acted on. There was also felt to be a lack of community spaces such as community centres and meeting areas. Although the Second Chance Community Centre was known to and used by some at the start of the research, by the end of the project it had been repurposed as a food bank/supermarket and could no longer be used for larger community or creative events.

Additionally, participants reported that the community in Brompton felt somewhat fragmented between military and non-military residents. The military had their own community space (The Lampard Centre), but this was not perceived to be a shared space that was open to everyone, with many residents never having been in it other than to vote during elections. The local church was also perceived as mainly for military use, which added to the sense of segregation between the two communities.

There used to be numerous pubs in Brompton, but only one remained open at the time of this study. Given that the social club on the High Street had also closed, this meant less opportunities for socialising with others. Tracie's Café on the High Street was one of the remaining community spaces, and the local owners were long-term and looked out for the community they had built there, supporting them where possible.

Pubs shut on Brompton High Street (taken by researcher during walking interview)

In addition to lack of community spaces, there was a loss of shops on the High Street, including the Post Office and local independent trades such as butchers and greengrocers, meaning residents had to drive or take public transport to the nearest supermarket. Many of the shops were now empty, which had a negative impact on the feel of the area. However, it was recognised that many amenities were in walking distance for those that were able to get to them, including the neighbouring towns of Chatham and Gillingham, Dockside Outlet Shopping Centre and, more locally, the Best One convenience store on Brompton High Street, which was useful for essentials. There were also nearby libraries in Gillingham, Chatham, and the Drill Hall Library at Universities of Medway, which offered a community membership. Medway Sports Centre was also nearby, although it was considered expensive to use by many residents.

1.1.2 Housing issues

One social housing resident reported liking their flat as it was in a much better state of repair than their previous accommodation in Chatham. However, others had less positive experiences:

> *"It was horrible when I first moved in. You have no furniture, you have nothing. Stripped bare, and it was wet. Even when I went in there, it was grey, everything was grey – a concrete jungle, a bit damp, a bit wet. It's a bit intimidating the estate when you first arrive there. You don't know anyone and no-one comes to greet you or anything…People here need help desperately. They're all sat in boxes right now crying out 'please help'."* [Resident, B005]

There was felt to be a lack of support from the local housing organisations, with one resident being in the process of setting a Residents Action Group to take up ongoing issues collectively for resolution. Although the housing association did organise meetings, not everyone could attend them at the times they were scheduled for.

Although those outside Melville Court reported knowing most of their neighbours, this was less evident for residents in the social housing, where people tended not to know each other or to mix, and residents moving in and out quite frequently made for a transient community.

Outside of Melville Court, there were reports of lots of new housing being built, including many old buildings being converted, and it was felt that more affordable housing was needed.

L-R: Grade II listed buildings on Prospect Row, renovations and new builds, social housing (taken by researcher during walking interview)

1.1.3 Valuing the local environment

Despite issues discussed above, Brompton nonetheless reportedly felt like a nice, quiet and peaceful place to live, with some participants reporting that it felt like a village and *"a hidden gem"* with no through traffic. Many participants felt a sense of pride of place and they all mentioned that they greatly valued the abundance of green and open spaces in Brompton which were *"on the doorstep"*. Such spaces provided opportunities to undertake physical activity, including woodland walks, parks, places for children to play, allotments and communal gardens. These spaces provided access to nature and wildlife, which impacted positively on mental health:

> *"With health, the fact there is so many green spaces, that there's places to walk around in, makes it so that even in winter when things are really dreary and it's easy to stay indoors and not do anything, it's nice there's options to go out…just having access to that kind of stuff is great for your mental health overall."*

[Resident, B001]

Woodland areas in Brompton (taken by researcher during walking interviews)

There were some reports of litter and dog mess in the area, which could spoil the local environment, but were being addressed to some extent by the PACT.

Some of these local assets could also be difficult to access for those with mobility issues, and some places felt unsafe after dark, such as the Great Lines. Additionally, some of the land in Brompton was owned by the Ministry of Defence and was out of bounds and, in some places such as an old reservoir, potentially dangerous. There were also reports of underutilised spaces, such as a local tennis club with courts that were not widely known about or accessible and felt like a wasted resource.

The rich local history with Brompton being a military area, the old buildings, old fashioned street lamps and frequently seeing soldiers and cadets around made it a unique and interesting place to live for residents.

1.1.4 A sense of safety

Overall, participants felt that Brompton was a quiet and safe place to live, which impacted positively on wellbeing. Many brought up the shocking stabbing of a uniformed soldier in July 2024, pointing out the location of the incident during walking interviews. This understandably left residents feeling shocked and shaken, and they were quick to point out that nothing like that had happened in the area previously and that this was *"a bit too close to home"*.

There were reports that the local police officer was well known and very proactive in

addressing local issues, and that they were also a valued member of PACT group. Historically, Melville Court had been an area of noise and antisocial behaviour, as well as some ongoing issues with drugs, but it was felt that crime rates had improved over the years, partly due to the responsive police officer.

Despite the pockets of issues, Brompton felt like a safer place to live and to walk at night compared to neighbouring Gillingham and Chatham where crime rates are higher. Other issues around safety that were mentioned included issues with lack of street lighting and a lack of pedestrian crossings and traffic signs, which had resulted in some car accidents.

1.1.5 Mixed views of healthcare services

As is the case more widely in the NHS, participants reported difficulty with getting appointments with their GP and perceptions were generally quite negative. There were mixed views of the local practice in Brompton as well as the pharmacy, with some people preferring to go outside of the area and others who do use the local services valuing how close they were to their home. Brompton was also felt to be very convenient located within walking distance of Medway Hospital.

1.1.6 Opportunities for education

There was positive feedback regarding the local primary school in Brompton, which had a Forest School as well as a garden developed by volunteers, which was used for lessons with the children in growing plants and vegetables. This had a positive impact on children, their parents and the wider community. The school was also used for local community events and the headteacher was involved in the PACT group.

Mid Kent College and the Universities at Medway campus were also in walking distance of Brompton, meaning there were lots of educational opportunities nearby.

1.1.7 Good transport links

Brompton was felt to be a convenient location for transport links with plenty of options buses and being located in between two train stations. However, it was pointed out that public transport was expensive so people often preferred to walk if they were able to.

1.2 Culture and creativity in Brompton

1.2.1 Access to culture and creativity

Participants commented on the rich local heritage and history close by, including the Royal Engineers Museum, the War Memorial at Great Lines, Lower Lines and Fort Amherst, the latter of which can be accessed on foot via Brompton and hosts free live

music events in the summer at the amphitheatre. Such places had a positive impact on physical health and mental wellbeing.

> *"At some point you go, I've got to get out, what can you do? And then round here, if you get out you are kind of in a way inevitably drawn to the Lines. You know, that open space there that we've got with the monument up the top, and view over Chatham on top of the hill, Fort Amherst, then you see over the river. And the you see Rochester and you see the spire and the cathedral, you know? Maybe tomorrow I'll take a walk down there. And that's what started it for me."*
> [Resident, B005]

However, it was mentioned that there was a lack of creative opportunities in the area with many groups (such as a craft café and Second Chance Community Centre) having shut down or been repurposed. Additionally, it was difficult for residents to find information about what activities did exist in the immediate and surrounding areas.

1.2.2 Existing creative activities and skills in Brompton

In the research we wanted to explore the idea of 'everyday creativity' in our neighbourhoods, defined as an approach which 'recognises originality and purpose in a wide range of practices in people's daily lives' (Johnson & Monney, 2026). Brompton residents reported a variety of creative activities that they already took part in and enjoyed in their own time, highlighting a creatively diverse and skilled community.

Baking	Crochet	Knitting	Singing/choir
Calligraphy	Diamond art	Movement	Theatre/set design
Carpentry	Drawing/art	Music	Urban sketching
Comedy	Dress making	Photography	Wreath making
Crafts	Gardening	Planting (community)	Writing
Creating installations	Illustration	Sewing	Zine making

Photograph of urban sketching done by participant (taken by researcher during walking interview)

1.3 The Creative Health Place Partnership Programme in Brompton

Interviews were conducted with residents who did and did not attend the creative activities and the creative practitioners delivering them. Additionally, the research team visited creative sessions and made notes on observations and discussions. This data was combined to highlight a number of key themes, which are set out below.

Of the five delivery partners involved in the Creative Health Medway Place Partnership Programme, only two delivered activities in Brompton:

- Nucleus Arts delivered weekly Craft & Chat and Messy Play sessions, initially at Second Chance Community Centre in Brompton, but later moving to Gillingham Library when SCC was repurposed
- Ideas Test initially delivered a series of early evening sessions at Second Chance Community Centre which included a wellbeing fair, a film night and digital/virtual reality sessions. Following these, they took a community-led approach to hosting a Halloween event, which was developed and delivered by the local community and involved monthly evening meet ups at the local café

Both delivery partners aimed to address health inequalities in general so they were open to all, but also had more specific aims of reducing social isolation and supporting vulnerable people. The other three delivery either had issues with engaging the community, finding venues or time/capacity and so chose to focus solely on Luton. This

highlights the difficulties of establishing creative health practices in areas with low provision, and echoes the challenges uncovered by residents in terms of a lack of community/social spaces in the area.

1.3.1 Health and wellbeing outcomes - Brompton

Interviews with Brompton residents and creative practitioners highlighted a number of health and wellbeing outcomes resulting from participating in creative activities. For those who had attended activities delivered as part of the Creative Health Medway Place Partnership Programme, the below outcomes were reported:

- ***Improved mental wellbeing*** – creative sessions reportedly helped participants with improving or maintaining mental wellbeing, including keeping them grounded, finding joy and achievement in both the process and the finished result, creating a positive distraction and providing a sense of purpose:

  "Oh my god, if I didn't have art, especially with the current climate in my job, I think I would be over the edge…It helps to keep me grounded." [Resident, B001]

  "This is what you need sometimes to quieten the mind and everything else. You switch your head off because you get so involved in what you're doing, whether it's just digging or whatever. And you're not thinking about anything else except for what you're doing." [Resident, B003]

  "I feel bad if I haven't done something creative every day…It feels like I've done something instead of rotted." [Resident, B006]

- ***Reduced isolation*** – there were reports that the creative sessions were sometimes the only thing that attendees did that week, so they gave them a purpose and reason to leave the house. This therefore reduced isolation for those who did not go out much and those living alone or not working. In many cases, attending the creative sessions also led to participants finding out about other groups and opportunities, which again helped to address experiences of isolation

- ***Peer support, social and community connections*** – participants met new people through the creative sessions, including neighbours in some cases. This improved their sense of community and connection. Participants also felt supported by each other, as well as the creative practitioners who were able to help with signposting and resolving certain issues outside of the group

  "Some feedback we've heard from the Brompton sessions is that people were enjoying meeting neighbours that don't they normally meet. So, for instance, if

you lived in Melville Court you might not be interacting with people up in the old barracks housing and vice versa. And some people had never been into the local cafe before. So it's definitely people making connections, making new connections in their community." [Practitioner, P002]

- ***Creating opportunities to learn new skills*** – there were reports of skill sharing and teaching others via the creative sessions, either through bringing in external organisations and individuals, or learning from others in the group. Many participants discovered new activities, including as diamond art and paper folding, as well as rediscovering things they used to enjoy, including embroidery and using fantasy film

1.3.2 Reasons for non-engagement

When participants who did not engage in creativity were asked why, there were a variety of reasons:

- Those not attending the Creative Health Medway Place Partnership Programme:
  - ***Lack of awareness*** - many participants had simply not heard about the creative sessions, further highlighting that there could be issues experienced with finding out what was going on in Brompton
  - ***Lack of time*** – some participants lacked the time to attend classes as they were working or involved in other projects
  - ***Lack of interest*** – the activities on offer were not something that was enjoyed or relevant for everyone (e.g. Messy Play sessions are only for people with children)
- Those undertaking creative activities at home/in general:
  - ***Lack of access*** – there were reports that the majority of creative opportunities were in Chatham and Rochester, and not much was on offer in Brompton. Some participants mentioned the closure of the 'Crafty Café' in Brompton, which was co-owned by local residents but was not making enough money

1.3.3 Facilitators of creative health

Feedback from attendees and creative practitioners provided insight into the facilitators of creative health in Brompton.

- ***Harnessing existing community assets –*** when Nucleus Arts had to stop delivery of sessions at Second Chance Community Centre, they moved to Gillingham Library, and this resulted in higher attendance. Similarly, when Ideas Test connected with the owners of the local Tracie's Café and obtained their buy in to the Halloween event, they offered the space out of hours for monthly meet-ups and were able to encourage their regular customers to attend, which helped build trust and resulted in higher engagement in the activities. This included

those living in Melville Court, who were previously not regularly attending Brompton sessions

- ***Skilled practitioners –*** experienced and empathetic facilitators of the activities ensured that creative opportunities were offered without pressure or expectation, they could support those who were struggling with mental health issues (and managed this from a safeguarding perspective), listened and responded to the needs of the group members and provided freedom and flexibility to try new things at a pace that suited attendees:

  "It gave me the space to talk if I wanted to talk or not talk if I didn't…That was time just for me." [Resident, LB008]

  "We had a guy who just came in one day and were were like, we've embroidered this thing, do you want to give that a go? And then he just went, Yeah! And he just started doing it and it's brilliant. Never embroidered before, he didn't even ask us how to do it, he just did it. And I think it was just more that like permission to try." [Practitioner, P001]

- ***Local and consistent offering*** – it was appreciated that activities were being offered locally, rather than in neighbouring areas as was historically the case, and that sessions ran all through the year, including school holidays

- ***Free to attend*** – the fact that sessions were delivered free of charge, and that refreshments were included was valued and ensured activities were inclusive

- ***Welcoming environment –*** an inclusive and friendly space and a warm welcome from facilitators helped people to feel relaxed

- ***Budget*** – having the budget to use for a public creative health event enabled Ideas Test to pay both local residents involved in work for the Halloween event and external practitioners to collaborate and to be remunerated for their time

1.3.4 Barriers to creative health

Feedback from attendees and creative practitioners provided insight into the barriers to creative health in Brompton. The barriers experienced in Brompton contributed to only two of the five delivery partners delivering sessions in the area.

- Barriers experienced by creative practitioners included:
  - ***A lack of suitable and accessible venues*** to delivery activities, further exacerbated by the repurposing of Second Chance Community Centre during the course of the programme
  - ***Challenges with wide promotion of activities and attracting attendees*** – despite posting on social media, flyering houses and putting up posters in community venues, many people were reportedly still unaware of the

new creative sessions, which led to a lack of engagement with and uptake of activities. This was particularly the case in Brompton (especially with residents of Melville Court) where attendance was initially low
    - ***Obtaining ongoing funding to sustain delivery*** of the groups impacted on practitioners as well as residents

- The main barrier experienced by attendees of sessions was the ***lack of continuity of sessions*** (i.e. when the funding finishes, the sessions stop) and they therefore depended on volunteers to sustain them or having to find other things to fill the gap the sessions left:

  "[When the group was finishing] I had a little word with several of the women that were going there, just sort of sussing out what they would be doing. So there was a lady there that had a disabled son, I think he's in his 40s or something, but that was her little outlet. So she was saying, I won't have anything now…Many didn't have a reason to come out again on a Friday, they'd lost their purpose…You've actually got them over the threshold and now built their confidence, but you're going to really put them back in their house again…Sometimes I think you need a 'moving on' session." [Resident, LB008]

1.3.5 Creative practitioners on the delivery of creative health activities

Feedback from the creative practitioners involved in the Creative Health Medway Place Partnership programme is incorporated into the previous sections, although there were some additional points worthy of note in terms of the delivery of creative health activities, which are covered here.

For Nucleus Arts, it was the first time they had delivered creative activities in Brompton, and for Ideas Test their work in the area was previously limited. This made promotion and engagement challenging. For Nucleus Arts, attendance picked up following the move from Second Chance Community Centre to Gillingham Library, which was technically outside of Brompton but adjacent to the area. It also brought new people to the Craft & Chat and Messy Play sessions, although the majority of people who attended at the first venue did not continue to attend when it moved, despite the close proximity of the two venues. Ideas Test staff felt that it would be preferable to start with a broad and inclusive topic given that Brompton was a previously 'cold' area for them, which led to the successful formation of a planning group for a Halloween event.

In terms of the impact on sense of place, this was not readily observable by creative practitioners on the attendees of sessions, but it did improve their own sense of place in terms of getting to know new people (and being surprised at the amount of creative individuals in the area), new venues and learning more about the history and heritage of the area. Creative practitioners also questioned the exclusion of the military from the target audience in Brompton, since they were an important part of the area and it could

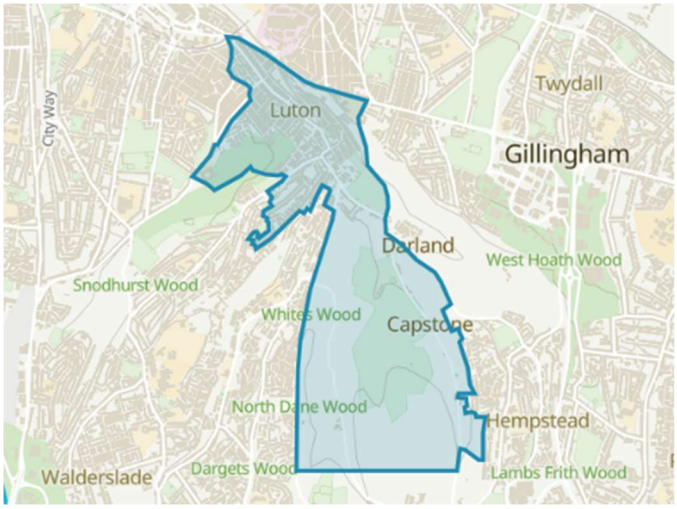
potentially have encouraged integration of these mostly separate communities.

Finally, in terms of the impact of delivering creative health sessions, practitioners reported that their interactions with and support of attendees positively impacted on their wellbeing, although there were also challenges experienced, including the stress of taking on the emotions of others.

2. LUTON

Luton and Brompton demonstrate different level of need and different challenges, and were selected as a focus for the wider project to represent different housing and population demographics (Medway Council 2023). Luton is dominated by private tenancies, has large numbers of families and has some of the highest levels of inequality and deprivation in Medway and in the country. Notably Luton has a 16% unemployment rate, significantly higher than any other ward, a high level of loneliness, and ethnic minorities are 1.4% more likely to experience isolation. The area is almost entirely made up of rows of small Victorian terraces running in parallel to one of Medway's major arterial roads.

In terms of health issues in the area, Luton Ward is worse than the overall figures (for Medway) for those registered with a GP (90.5%) and dentist (59.0%), COVID vaccinated (75.2%) and smoking (25.3%). Although it scores better in terms of long-term health conditions and anxiety levels (Medway Council, 2025).



Luton map

2.1 Luton as a place

The key themes from interviews with residents of Brompton broadly align with the wider determinants of health (Dahlgren and Whitehead, 2021), which significantly influence individual and community health outcomes. These are set out below.

2.1.1 Housing and associated environmental issues

The most commonly reported place-based comments in relation to Luton were in relation to housing and rubbish, which resident perceived to be interlinked. There were many houses of multiple occupation (HMOs) in Luton, overcrowding, related noise

issues, lots of transiency and unethical landlords. There were also lots of vacant, boarded up buildings in a state of disrepair. Furthermore, it was suggested by a few people that many transient migrant populations had moved to the area, and they did not usually have the necessary infrastructure to support them which further exacerbated issues. Although new housing was being built, it was felt by many that most of it wa not affordable for local people. These issues impacted on the physical and mental health of those living in Luton them and it also resulted in another big issue with increasing levels of rubbish:

> *"We have way too many HMOs. This is part of it [points to fly tipping in the street]. The dumping starts because people are given, you know, a very short space of time to get out of their home because they're being moved from the HMO. And so stuff gets dumped on the street, and then people who are driving through think well it's a shit tip anyway so let's just chuck our stuff out."* [Resident, L001]

As well as fly tipping, general rubbish and litter was also a much cited issue in the area, including in parks and car parks and on pavements. This negatively impacted on the sense of pride in place that Luton residents felt.

In the later follow-up interviews, there were some comments from residents that the volume or rubbish seemed to have gone down in recent months, which was very welcome. One of the delivery partners (Ideas Test) had started doing some awareness raising and litter picks, so it could be that this was starting to be noticeable to others.

L-R: Litter at Shoppers Car Park, boarded up building and fly tipping on Castle Road, rubbish on Luton Road (taken by researcher during walking interview)

2.1.2 An unsafe place to live?

All participants highlighted a high level of crime and anti-social behaviour in Luton, and many felt that it was not a safe place, particularly after dark. Amongst the issues, there were reports of people selling and taking/overdosing on drugs (with a particular recent increase in the use of the street drug Spice), street drinking, shoplifting, groups of people congregating and creating disturbances, and issues with neighbours and noise. The main areas of concern included Luton Road itself, Pig Alley, Castle Road, Shipwrights Avenue and the newly opened Sunrise Foyer (supported housing for young people aged 18-25).

> *"We have had one murder in the tower block and a lady was killed in a shop on Luton road by the arches. The tower block was about drugs and the other one we don't know why…Drugs are easily available coke and weed. Many locals smoke it like it's a cigarette. The tower block is often raided by the police."* [Resident, L006]

> *"I think a lot of the crime around here is antisocial, but also a lot of it seems to happen in the home. And again, you can't hypothesise, but it wouldn't take much of a jump to think places with this much alcohol, you get a carry out or whatever and take it home, and you've had too much and something kicks off. We've seen, four years ago we had a police siege at one house that was about 20 doors down from us, and it went on for hours."* [Resident, L001]

> *"The other day, this fella was just leaning all over a car. That was only in the road down from us and that was at midday. He'd obviously, well somebody said 'he's off his face'…I was like, 'help help I don't know what to do with this man'… I suppose there's a thing almost as though it's common now so, you know, don't bother about it. It's not so out of the ordinary. But for me, it stood out like a sore thumb and yet I work with people who abuse substances. But I didn't really want to see it in the middle of the day, a person in that state. You get it everywhere. I mean, apparently that was Spice that he was on. But you can just smell cannabis everywhere, coming out of windows, as you walk along the road. Such differences of the strengths as well."* [Resident, LB008]

Two participants also mentioned a racist sticker campaign in the Luton Road area, and although attempts had been made to remove the offensive stickers, many remained, and this contributed to the feeling of unease in the area. In follow-up interviews, the erection of numerous St George's and Union Jack flags (part of a wider campaign at the time) had led to further negativity:

> *"And all these flags that have gone up, which has got nothing to do with being patriotic. It's not even subtle racist statements. And I find that really*

> *disappointing and very sad…. There was a bloke putting up two flags in the tower block on Shipwrights, and I'm thinking it's got nothing to do with patriotism and everything to do with racism or xenophobia. And it's really disappointing. There is still so much hatred"* [Resident, L006]

With Luton Road being such a busy thoroughfare, there were also reports of numerous pollution, low air quality and traffic accidents.

> *"We had a van…drive into the front of our house. He was speeding, before the restrictions, he was speeding, he clipped the wing mirror of someone coming the other way and swerved and went straight into our wall."* [Resident, L001]

Despite the clear safety concerns, there were signs of hope and positivity for participants. Recently, the installation of surveillance cameras in Pig Alley seemed to have helped reduce some of the crime and fly tipping. Traffic calming measures had also resulted in some reduction in the number of vehicle accidents.

Some participants felt that Luton did not live up to its negative reputation, and felt stigmatised for living in the area.

> *"Everybody seems to go a bit hard on Luton and, yeah, it has massive issues obviously, but that doesn't mean it's worthless. And somehow that's how it's spoken about…So there's this idea that any kid that lives in Luton is underprivileged and underfunded - and yes, we have a lot, way beyond the national average. But that's not everybody's experience."* [Resident, L001]

At the workshop, the stigma associated with the area was felt to be one of the most difficult aspects of living there, negatively impacting health, wellbeing, and connection to community. There was also a sense of a lack of agency among local residents, that they were often told what to do, and not listened to by the council and authorities.

2.1.3 Mixed views of social/community and local assets

Many participants reported the loss of local shops and independent businesses, including the post office, bakers, butchers, plumbers, pubs and charity shops. This decreased opportunities for social interaction. However, in terms of community assets in Luton, various meeting/event venues and welcoming spaces were mentioned including Luton Library, the Magpie Centre, All Saints Community Project and Church, Christ Church, Invicta Social Club, the local barber shop, Bowen motorbike shop and the rug shop. Arches Local has been a 'Big Local' community group in the area that has brought engagement opportunities and improvements to the living environment.

Similar mixed views were held about local amenities. In terms of access to food, it was felt that local convenience stores had limited stock, and residents had to drive or get public transport to the nearest supermarkets. There was also an abundance of unhealthy takeaway food options, off licences and establishments selling vapes in Luton. However, the school and Arches Local did provide a Fit & Fed programme for children in the school holidays, which was valued.

Whilst some participants reported that Luton was a segregated community, in that they didn't know their neighbours or that people from different cultures and backgroudns kept to themselves, others appreciated its diversity and acceptance, and a sense of community, which had a positive effect on their wellbeing.

> *"Pretty much people do keep themselves to themselves around here. We are polite enough, but I've not really had, I've not really made the type of friends where you go around and have a cup of tea."* [Resident, L006]

> *"We have a Greek Belgian couple on one side and a Romanian couple, a Romanian woman, on the other and then there's a Slovakian couple over the road. And yeah everybody has their differences, but they're all residents of Luton and we get on as is needed."* [Resident, L001]

> *"[There are] a lot of trans people in the Luton area. It's relatively safe for things like that. If we'd gone the other way, we'd have passed three people I know who are transgender and that's their homes, kind of thing - they're happy here. They're left alone. And that has massive a psychological effect on you wellbeing."* [Resident, L002]

2.1.4 Valued green spaces alongside local environmental issues

As with other themes, there were mixed views about the surrounding environment in Luton. On the one hand, access to green spaces was greatly valued as providing opportunities for physical activity, including Millennium Green, long public footpaths through Daisy and Coney Banks, children's playgrounds, basketball courts, a wildflower meadow, allotments, Luton Recreation Ground and nearby Capstone Country Park.

> *"[Coney/Daisy Banks] is just a nice place to go and just feel like you're in the countryside when everywhere else is just so urban…It's one of my sort of tools to deal with my depression, which is quite recurring, and I find walking does help that somewhat."* [Resident, L003]

> *"Nature and the environment is really important, because if you're living in a flat, you know, with awful people and it's all druggies around you and that, you've*

> *come away from that and don't want to be doing that anymore, you know. And yet you're also frightened to go out on your own because you've also suffered with, I don't know, psychosis or whatever, to have someone that's going to support you with that and just bring you somewhere local, but you feel you can do that. It's amazing really."* [Resident, LB008]

Rain gardens, which are flood reduction initiatives where shallow planted depressions collect rainwater run off and allow it to soak into the ground, had been installed on Luton Road. Efforts had also been made to plant new trees (led by Arches Local), which reportedly had a positive effect on both individual and community wellbeing, as well as demonstrating the possibilities for positive change in the area:

> *"These trees here are [Arches Local] funded. So there's a picture of me standing possibly at that tree because I helped plant them. So there's all of these trees - there's 1, 2, 3, 4, 5,6. What's interesting is that Arches Local planted these trees along here and they did some along Luton Road, but it's the residents who have planted the daffodil bulbs around them, and they're really pretty in the Spring."* [Resident, L004]

However, the local environment of Luton was negatively impacted by the aforementioned rubbish, fly tipping, pollution and noise, particularly on and around Luton Road. Access to green spaces was also limited to some due to the steep streets in the area and them not being located centrally. For example, not everyone knew about Daisy and Coney Banks, which were described as "*tucked away*" and "*hidden gems*". Furthermore, some residents were even unaware of Millennium Green despite living in the area for many years. Participants also felt that more green spaces and trees were needed in the area to mitigate some of the environmental concerns.

L-R: Views at Coney Banks, Capstone Country Park, Millennium Green (taken by researcher during walking interviews)

2.1.5 Mixed views of healthcare services

As was the case in Brompton, and more widely in the NHS, participants reported difficulty with getting appointments with their GP, with not enough GPs available to meet local demand, and perceptions were generally quite negative, particularly by those from underrepresented groups. However, those who experienced mental health issues or illness reported being happy with the care they received by local services.

Additionally, there were negative experiences of the local pharmacy, with three participants stating that they chose to go outside of Luton for their prescriptions.

As with Brompton, local residents also appreciated the local proximity of Medway Hospital to Luton.

2.1.6 Opportunities for education

The local primary school was generally well liked and valued, and of particular note was that it was *"at the forefront of arts and cultural opportunities for children"* due to engaged teaching staff and links with local arts organisations, such as Nucleus Arts and Ideas Test. Reports of the primary school were broadly positive.

There was also mention of the various senior schools in close proximity to Luton, as well as Mid Kent College and the Universities at Medway campus.

2.1.7 Transport concerns

Residents reported that free on-street parking was widely available in Luton, although it could be a challenge to find a space given the dense local population. Luton Road was a major bus route, so there were plenty of options for public transport, although this did lead to concerns about the impact of pollution from the busy road on health, and also public transport was expensive for some people. There were suggestions that there needed to be investment in safer environments for walking and cycling. 'Pig Alley', which ran parallel to Luton Road, provided a quieter alternative, however many did not consider it a safe place to walk, especially after dark.

2.2 Culture and creativity in Luton

2.2.1 Access to culture and creativity

Participants commented on the variety of creative opportunities in Luton on offer for people to engage in, including for young people, such as Arches Local, initiatives such as Luton Lights (delivered by Ideas Test), Rainbows Over Medway (for LGBT+ young people), youth theatres, activities at Luton Library and Nucleus Arts. All participants also commented on the introduction of murals in Luton, which were commissioned by Arches Local and depicted local stories and people. The murals had a positive impact in terms of enhancing a sense of pride of place, learning new stories about Luton, brightening up the area, promoting connection between neighbours and other community members, improving access to high quality art and *"putting Luton on the map"* .

> *"We've also seen quite a few people outside of Medway coming into this area to see the murals. It's been interesting how the murals have engaged local residents and also those that are not familiar to Medway, or specifically to Luton. For many outside, so to speak, they wouldn't see a reason to come to Luton. They might go to the Dockyard or the cathedral, or the usual suspects as I call them, but Luton is slowly, I wouldn't call it a destination, but certainly becoming a place that it's got an offering, both to residents and visitors. But it's also helped try and start shaping a new identity for Luton…people are taking photos and taking a bit more interest in the area."* [Resident, L002]

Participants also commented on the sense of history and place of Luton, such as its strong connection with Chatham Dockyard and its naval history, access to Fort Luton, and mentions of there being trams going along Luton Road at one stage.

Luton murals (taken by researcher during walking interviews)

2.2.2. Existing creative activities and skills in Luton

Luton residents reported a variety of everyday creative activities that they already took part in and enjoyed in their own time, highlighting a creatively diverse and skilled community.

Air dry clay	Festivals	Playing instruments	Sewing
Colouring	Gardening	Podcasting	Singing
Comedy	Knitting	Printing	Song writing
Crafts	Latch hook	Producing music	Stained glass
Crochet	Music	Quilting	Theatre
Drawing	Painting	Radio presenting	Visiting exhibitions

2.3 The Creative Health Place Partnership Programme in Luton

Interviews were conducted with residents who did and did not attend the creative activities and the practitioners delivering them. Additionally, the research team visited creative sessions and made notes on observations and discussions. This data was combined to highlight a number of key themes, which are set out below.

All five delivery partners involved in the Creative Health Medway Place Partnership Programme delivered activities in Luton:

- Nucleus Arts delivered weekly Craft & Chat sessions for adults at the Magpie Centre and weekly Messy Play sessions for parents and children at Christ Church Hall. They also hosted a local exhibition at their art gallery at the end of the project to showcase the creative outputs of the sessions

- Ideas Test delivered a series of community meet ups to discuss and develop ideas to improve the local area, resulting in a campaign to tackle litter issues
- Icon Theatre hosted a weekly meet up at the Magpie Centre called 'Hug in a Mug', which started off as a social gathering with jigsaw puzzles and progressed into group games, and then moved into a room in the All Saints Community Project every other week where the group took part in games that encouraged improvisation
- Live Music Now delivered three cohorts of the Lullaby Project for parents and babies in local family hubs
- Medway Libraries delivered an intergenerational storytelling initiative, however it did not start in time for any of the attendees to be able to participate in the research or for any researcher visits to take place, so it is not included in the findings

Amongst the health inequalities that the delivery partners aimed to address, they ranged from no particular inequalities (with an 'open to all' approach), to reducing social isolation, improving the local environment, working with vulnerable people and improving mental health (perinatal mental health in particular).

In contrast to challenges with delivery, the fact that all five delivery partners were able to establish activities in Luton highlights the relative ease of which new creative health sessions can be set up that is already 'warm'. Local organisations and funding has historically been focussed on improving health and wellbeing in Luton, given its deprived status.

2.3.1 Health and wellbeing outcomes - Luton

Interviews with Luton residents and creative practitioners highlighted a number of health and wellbeing outcomes resulting from participating in creative activities. For those who had attended activities delivered as part of the Creative Health Medway Place Partnership Programme, the below outcomes were reported:

- ***Improved mental wellbeing –*** creativity reportedly helped participants with improving or maintaining their mental wellbeing, including increased empowerment and confidence, whether that was being able to leave the house and socialise, from receiving validation and praise for creative outputs, having their voice heard, feeling a sense of pride or accomplishment, providing a positive distraction or practicing mindfulness, i.e. *"being in the present moment"*. Creativity was also reported as being therapeutic and cathartic in enabling people to express themselves and their emotions:

  "It's something where I think you can just escape for a little while and just let your mind flow…I can just take time away." [Resident, L005]

"There's a lot of I think confidence that has been gained by people which I think does link to sort of mental health as well. And people are confident either in being able to share their own skills, but also in just maybe being around other people." [Practitioner, P001]

- ***Reduced isolation*** – there were many reports of Luton groups reducing isolation for those who did not go out much and those living alone or not working, providing a sense of purpose and *"something to get out of bed for"*. As with Brompton, in many cases, attending the creative sessions led to participants finding out about other groups and opportunities, such Art Junction – a new community creative drop-in space in Chatham, which again helped to address experiences of isolation:

  "Yeah, [the group] is nice. I love doing jigsaws. You don't really often get that where you get involved and you do quizzes and games and stuff. We don't get enough of that, you know…It's just nice to have, I mean I sit indoors and just stare at the same four walls and I just think it's not doing me any good, just sitting indoors talking to myself." [Resident, L007]

  "We've had people really go from not necessarily being able to potentially leave the house or even kind of get into a place for themselves because of various different health or mental health reasons, to then some people even now facilitating their own sessions, like running their own sessions for us and doing workshops. So there's been massive journeys." [Practitioner, P001]

- ***Peer support, social and community connections –*** there were many reports of participants meeting like-minded people, establishing new friendships, feeling supported by those who were in a similar situation, and even meeting up outside of the creative sessions. Participants also benefited from being part of a group who were learning or doing something together, which they found motivating:

  "There's quite a few that have made friends and that have play dates now with their little people…there's been a range in terms of journeys which is really nice because then they're all kind of mingling and none of them are, you know, it's still hard work no matter what way you did it. You're still looking after a little person, so they're all going through the same issues. So a lot of teething chat and just general stuff and support group stuff." [Practitioner, P005]

  "We've got adults who have made friends. They said, We didn't have a network

before and now we've got a network of people and they've brought then other friends to it." [Practitioner, P001]

- ***Providing a safe space –*** the creative sessions were felt to be a safe space in that people were accepted as they were and were free to engage in a way that they were comfortable with. They also provided opportunities to gently push participants out of their comfort zones to do something new, whether that be joining a new group or making suggestions for or leading activities (see Case Study 1):

  "[Name] was saying she's quite a perfectionist outside of things, so she just wanted to make one of her pages really messy, and she did. And I said, Well that's good because that's a safe space for you to do it – this book is nobody else's business, it's yours and how you want to express yourself, so it's okay that it's messy. And what's nice for me is that hour and a half that we are there, everybody seems happy and they're in a safe space." [Resident, L006]

The below case study was put together to highlight the story of one participant who experienced profound mental health and wellbeing outcomes as a result of taking part in their own creative activities and the creative sessions.

Case study 1: Improved mental health and wellbeing for Participant A (Nucleus Arts)

During their first interview, 'A' shared that they were grieving the loss of their spouse only 3 months previously. They also reported being quite socially isolated and not knowing many people in the local area:

> *"Pretty much people do keep themselves to themselves around here. We are polite enough, but I've not really had, I've not really made the type of friends where you go around and have a cup of tea. I'm sure other people have, but I've always struggled with that."*

A was very keen on arts and crafts but had stopped being able to indulge this this whilst their spouse was unwell. Therefore, when they heard about the Craft & Chat group being hosted at the Magpie Centre by Nucleus Arts, they were pleased to have a reason to leave the house. Despite finding this very difficult and being in the depths of bereavement, they recognised that creativity helped them to cope during difficult times:

> *"I've stopped thinking that I have to do it because, you know, I'm going to be some master artist. It's more the case of I'm doing it for me. This is about me and expressing myself creatively in a way that I enjoy…I don't know what I would do without those things to go to. I really don't."*

A mentioned that the facilitators of the Craft & Chat group encouraged members to come up with ideas for activities, and that they had the idea to create canvases along the theme of 'I Am Enough'. This opportunity empowered them to take the lead and share their ideas and

knowledge about self-esteem, as well as the group members in recognising their own self-worth. Their creative outputs formed part of an end of project exhibition hosted at Nucleus Art's Halpern Gallery and some were later displayed at the Magpie Centre, where they remained a permanent fixture.

During the follow-up interview, A shared that although the funding had come to an end and the Craft & Chat group had officially finished, they and other group members felt it was very important to continue meeting and creating together. They had formed a strong group of regular attenders and formed close bonds, and so A decided to step forward to continue running the group as a volunteer, with the support of a keen member of the disbanded Brompton group and another volunteer connected to Nucleus Arts. Although A was a little apprehensive about taking this on, in terms of their lack of experience of running such a group and their need to maintain a balance between leading yet still wanting to create their own art, they felt very well supported by the All Saints/Magpie Centre staff and others. This quote highlights how far their confidence and wellbeing had progressed since the start of the year and what this opportunity meant to them:

> *"I never would have in my wildest dreams thought I would be volunteering with something that I love doing…As far as my grief goes, it's really helped…I feel my husband would be very proud of me, what I've achieved. Sadly I wouldn't be in this position had he not died. But I feel I've come a long way from where I was in January after he passed away. And it's through art that I've found my feet and I have literally found my people…I have a purpose."*

As well as the positive outcomes for the resident, this case study highlights one way in which the barrier of the funding ending can be overcome, if volunteers can be provided with support, both practical and personal, to sustain them, although adequate resourcing is no doubt still required.

2.3.2 Reasons for non-engagement

When participants who did not engage in creativity were asked why, there were a variety of reasons:

- Those attending the Creative Health Medway Place Partnership Programme:
    - ***Lack of awareness*** **-** many participants had simply not heard about the creative sessions, highlighting that there can be issues experiences with finding out what is going on in Luton (as was the case in Brompton)
- Those undertaking creative activities at home/in general:
    - Some of the creative health ***opportunities were felt to be gendered***, e.g. one male participant who was interested in knitting and crochet said that they did not tend to join groups as they are usually all women, and they would prefer to attend a mixed or male group

2.3.3 Facilitators of creative health

Feedback from residents and creative practitioners provided insight into the facilitators of creative health in Brompton.

- ***Harnessing existing community assets –*** practitioners who delivered sessions at the Magpie Centre found that this worked really well as the venue was local and trusted, and they were also very supportive of new groups. Those running the space mentioned the groups to their customers, including those attending the MEGAN Group which was located there and provided peer support for individuals experiencing mental health issues. The groups running there were seen as a valuable addition to existing services, and their endorsement helped encourage people to give the groups a try. The Magpie Centre had also put some of the art work made by the Craft & Chat group on display there, which was positive for both creative session attendees as well as the wider public visiting this space. Such support was felt to be the case at other venues across Luton:

  "There are some good businesses that have done their bit and are continuing to provide connections for the community and almost acting as a foundation for that to happen." [Resident, L002]

- ***Skilled practitioners –*** as was the case with the Brompton sessions, participants commented that they appreciated creative opportunities being offered without pressure or expectation. Practitioners took the approach of building relationships and trust at a slow pace, starting off with small, low key activities, providing encouragement, helping attendees feel settled, and listening and responding to the needs of the group. For example, some sessions were felt to be too short by attendees so they were extended by delivery partners.

  Personal skills of practitioners, such as being empathetic and personable, were important, as were more practical skills such as safeguarding. One practitioner reported that they had attended training about using a trauma informed approach, and they implemented this throughout the sessions, which was particularly important when working with vulnerable people

- ***Creating opportunities to learn new skills*** - as well as the core facilitators, delivery partners also invited external visitors, when the timing was appropriate, to offer additional ideas and skills to members. For example, Icon Theatre invited TV writers to a session who introduced attendees who taught them valuable new skills:

"They were professional writers and we did some creative writing and like, you know, sometimes you just need someone to show you the formula to how to start writing. I found that really useful. And so I wrote my first little monologue, and then when I read it out they were like, Oh wow it's like stand-up comedy. And I was like, Oh, cool that's what I was going for. So yeah, I've got one little monologue, it's basically one joke, but yeah I can use that formula and then make other stories up." [Resident, L007]

- ***Free to attend*** - the fact that sessions were delivered free of charge, and that refreshments were included (including free dinner provided in the case of Ideas Test sessions) was valued and ensured activities were inclusive

- ***Welcoming and safe environment*** – creating a safe and supportive space to enable people to engage regardless of how they were feeling, was felt be important:

  "Even if somebody was having a really bad day, like some people would say, we just made ourselves get up out of bed and come here because we knew that even if we didn't do anything, we'd get a cup of coffee and somebody would just be nice to them and let them sit there, you know. And they'd probably end up doing something anyway and having a nice time doing more than they expected." [Practitioner, P001]

2.3.4 Barriers to creative health

Feedback from attendees and creative practitioners provided insight into the barriers to creative health in Luton.

- Barriers experienced by creative practitioner included:
  - ***A lack of evening venues*** – although there were far more options for venues in Luton than in Brompton, there were not many that were open in the evenings, when those working or with other commitments were more likely to be able to attend. The main option was the Invicta Social Club, which was used by Ideas Test, and although they were happy to provide the space, they were not engaged in the activities themselves nor did they support the promotion of them in the way that day time venues did (e.g. the Magpie Centre and Luton Library)
  - ***Lack of engagement*** – despite Luton being an area here many creative health activities had previously taken place and delivery partners had established links with organisations and residents, some reported that it was still difficult to get people out of their houses, and often took repeated efforts and conversations to encourage people to attend, as well

as to continue returning to sessions. It was suggested that it was difficult to reach everyone, even when posting flyers through doors and using delivery partner websites and social media. As well as this, delivery partners had put posters in community hubs and GP surgeries and placed details in local community newsletters. Generally, it was felt that promotion of the sessions needed to be repeated and ongoing and via a variety of places in order to attract as many people as possible

    - ***Obtaining ongoing funding to sustain*** delivery of the groups impacted on practitioners as well as residents
- As with the Brompton sessions, the main barrier experienced by attendees of sessions was the ***lack of continuity of sessions*** (i.e. when the funding finishes, the sessions stop)

2.3.5 Creative practitioners on the delivery of creative health activities in Luton

Feedback from the creative practitioners involved in the Creative Health Medway Place Partnership programme is incorporated into the previous sections, although there were some additional points worthy of note in terms of the delivery of creative health activities, which are covered here.

For many of the delivery partners, it was the first time they had delivered sessions in Luton, so they appreciated the opportunity to promote creative health and connect with a new community. They commented on the fact that despite the sessions being offered locally, many attendees did come from outside of the area, which was not the intention and made it less place-based, but they were very much welcomed to join the group.

Practitioners felt it was important that activities were participant led, and they regularly asked attendees what they would like to do and what they felt comfortable with, and were responsive and flexible to feedback. This was aided by the approach that facilitators were *"part of the group"* so sessions were collaborative rather than a hierarchical 'them and us' structure:

> *"There was no pressure on it being, you know, we're going to be talking and you've got to talk. It was up to people how much they wanted to engage…we've got a lot of anxiety and other different mental health problems and things like that within the group, we wanted it to really be led by them."* [Practitioner, P004]

In terms of the impact on sense of place, this was reported by creative practitioners as having improved since they had met new people (residents and practitioners) in Luton, discovered new venues and connected with the community there.

In terms of the impact of delivering creative health sessions, practitioners reported that their interactions with and support of attendees positively impacted on their own wellbeing, although there were also challenges experienced, including the impact of taking on the emotions of others.

> *"I've been a project manager in Medway on arts and culture for about 15 years, but this one stands out as something I've never experienced. One that everyone benefits from really beautifully - the venues love it and it's gorgeous for them, and the project manager loves it and gets a lot out of it. The women absolutely love it and the children love it and the musicians love it. Like everyone grows from this."* [Practitioner, P005]

> *"You have to kind of emotionally kind of get ready for that session to kind of be like, okay I'm in this headspace where I'm ready to receive whatever might come up. And you have your professional kind of boundaries and what's appropriate and what's not appropriate."* [Practitioner, P001]

To conclude the research findings section, the below case study was put together to highlight the story shared by a practitioner regarding how the incremental approach to building relationships and confidence impacted on attendees, as well as the resulting impact on them.

Case study 2: Impact and outcomes from the perspective of the creative practitioner (Icon Theatre)

Icon Theatre initially started delivering weekly 'Hug in a Mug' sessions in the Magpie Centre café where attendees were invited to sit and chat over a cup of tea/coffee, there were jigsaw puzzles to do together and attendees were asked about other creative activities they were interested in, which were then provided. Following a period of a few months, once people felt comfortable, an additional practitioner was introduced who started by leading group games and activities which encouraged people to think on the spot, such as quick drawings based on two words. Gradually, the group moved to a bigger space in All Saints Community Centre (behind the Magpie Centre) on alternate weeks where they sat in a circle of chairs, instead of round a table, and were invited to 'play' and have fun acting out scenarios, when what they were actually doing was improvisation without realising. Below are some extracts of the interview transcript with practitioner:

> *"Each week playing those types of games and things like that, the confidence built and the people that used to sort of hold back a bit would engage more and more. And then before you know it almost, we're then doing improv and they don't even realise that that's what they're doing. But they're acting and they're on their feet…each week surprises me more and more. Those that you just thought you'd never see get fully involved are. And it's just amazing…There's a participant that comes along who has anxiety, and when they first come and sat around the table, they would literally be physically shaking and you'd barely get a hello from them. And from when I first met*

them to now is just incredible. So they still suffer with anxiety, but obviously we've learnt who they are and what helps them. But they are there every week…It really surprised us the other week because they came into the hall and then was up on their feet taking part in an improv scene, and never did I ever think that they would take part in that. They have a laugh and a joke around the table but when we said, you know, we're going to start doing some like bigger games, you know, up the scale a little bit they was like, Oh no I'm not acting. But then they were up and we couldn't believe it."

"[A new participant] said it was just so nice to sit and watch everything that was going on, it almost took me out of myself for a bit…he said, I had such a distraction, I was not focusing on my pain. He was like, I'm so glad that I pushed myself because I was in so, so much pain today. I wasn't going to come, but I told myself, you've got to get out of the house."

Being part of the group and joining in on the activities as well as leading the group also had a positive impact on the wellbeing of the practitioner:

"It genuinely did boost my mood, because I've started the day feeling quite low energy and low mood, but I always look forward to going to the sessions. I'm still a human, but I've also got a job to do. But yeah, like I think it does each week, it does perk me up a bit and just being around people and just watching these people grow is just so rewarding…you get to feel like you've made a difference in someone's life."

When interviewing a resident who attended this group, it was interesting to see the experience from their perspective and how attending the group had helped improve their confidence:

"The group really has helped me, especially as there's a lot of improv as well. You're thinking on your feet and that gets your brain moving…It's the best sort of group therapy that I've had in a long time…you sort of come out of yourself…no-one is judging you, this is a safe place and there's no wrong answers…before if I was sat in groups someone would say, any volunteers? And I would just sit there and put my head down, like, don't pick me. But now I'm just like, Pick me pick me pick me!"

Conclusions and Recommendations

An holistic view of assets and barriers to health in place

This research has developed a fine-grained, emplaced understanding of the barriers and assets to leading healthy lives in two Medway neighbourhoods. There were obviously differences between the two areas, but also similarities. Key barriers include

- loss of social and community spaces (including closure of pubs),
- local environmental concerns and subsequent image of the area (particularly in Luton),
- issues of housing, support and services.

Key assets include

- local green spaces which were hugely valued by many participants,
- aspects of the built environment, culture and history,
- infrastructures of community and connection, including community, organisations and initiatives and more informal kinds of neighbourly support,
- everyday creative practices and skills among residents

Within this context**, creative health activities should also be understood as a key asset which can contribute to health in itself, but can also play an enabling role in 'mobilising' other assets** (Mughal et al 2022) such as green spaces, the built environment and history, creating new infrastructures of community and connection, and enhancing creative practices among residents.

Recommendation: Recognise barriers and assets to health in place in Medway, via locally designed strategies which address barriers and support assets including mobilising potentials of creative, cultural and environmental resources in communities

Impact and practices of creative health

There was no doubt that the creative health projects were beneficial to participants who included individuals with high levels of mental and physical health challenges. Creative health projects were found to

- **Improve mental wellbeing and health**
- **Reduce isolation and provide feelings of safety**
- **Foster new community connections**
- **Provide new skills and opportunities**

These impacts were clearest where participants had attended consistently over the project period, and had been able to access activities in appropriate local spaces. It

was not fully possible to assess the how creative health practices had changed perceptions of place for participants over time, largely because of difficulties of re-recruiting participants for follow up interviews. This could be connected to participant vulnerability and shifting patterns of engagement with the creative health programme.

The research provided insights into some of the difficulties of facilitating access and engagement with creative health opportunities, including ensuring awareness (especially where organisations were new to neighbourhoods), finding appropriate spaces and continuity given funding constraints. The programme also offers insights into the skills and resources need to run creative health projects successfully from a practitioner perspective. Overall it was found that health and wellbeing impacts were not necessarily connected to particular art forms or creative practices (eg drama, singing, craft) as they all offered opportunities for individual and collective expression and enjoyment. Practices could be seen to connect with the 'five ways to wellbeing; (NEF, 2008) - Connect, Be active, Take notice, Keep learning, Give – this provides an evidence-based framework for improving mental health and wellbeing.

Instead success with creative health was more about approaches to facilitation and resourcing, including a flexible and iterative approach which responded to the needs of participants, building trust and relationships over time.

Recommendation: Design and support programmes which enable sustained, consistent creative health activities within particular localities.

Opportunities within emergent health agendas

As noted at the start of this report, current health policy is encouraging a focus on neighbourhood-based, preventative working. This meant thinking beyond services and clinical spaces, and taking an holistic, asset-based approaches to community and public health. Medway Council and health structures are already involved in a number of streams of health policy that take this approach, including via the Marmot Place framework, the Wider Determinants of Health Research Programme and the Neighbourhood Health pilots. Drawing on good practice and lessons from elsewhere, there is an opportunity for Medway to become a pioneer in creative, holistic, place-based health approaches. These should include creative health but also the wider aspects of natural and built environments and community infrastructures which residents found beneficial for their health and wellbeing.

Recommendation: establish Medway as a beacon of good practice in relation to creative, holistic and place-based approaches to improving health and wellbeing and addressing health inequalities.

References

All Party Parliamentary Group (2017) Creative Health: the arts for health and wellbeing, available at https://ncch.org.uk/uploads/Creative_Health_Inquiry_Report_2017_-_Second_Edition.pdf

Dahlgren, G. and Whitehead, M. (2021) The Dahlgren-Whitehead model of health determinants: 30 years on and still chasing rainbows. *Public Health*, 199, pp. 20-24. https://doi.org/10.1016/j.puhe.2021.08.009

Fancourt, D., & Finn, S. (2025). The role of the arts in supporting our minds, bodies, brains, and behaviours: updates and progress since the 2019 WHO health evidence network synthesis report on arts and health. In *Routledge Handbook of Arts and Health* (pp. 40-53). Routledge.

Ganga, R. N., Davies, L., Wilson, K., & Musella, M. (2025). The social value of place-based creative wellbeing: A rapid review and evidence synthesis. *Sociology of Health & Illness*, *47*(1), e13827.

Johnson, H. F., & Van Monney, N. (2026). Towards democratizing research: Introducing the 'everyday creativity model' as a guide for community-engaged, participatory research practice. *Methods in Psychology*, 100276.

Macintyre,S., Ellaway,A., Cummins,S. (2002) Place effects on health: how can we conceptualise, operationalise and measure them? *Social Science & Medicine*, 55(1), pp.125-139. https://doi.org/10.1016/S0277-9536(01)00214-3

Medway Council (2023) Medway Arts Health and Wellbeing Place Partnership Bid needs analysis

Medway Council (2025) Medway Health and Wellbeing Survey – Ward Analysis Ward analysis | Medway Council

Marmot, Michael. "Public health and health inequalities: a half century of personal involvement." *Journal of Public Health* 44.Supplement_1 (2022): i23-i27.

Mughal, R., Thomson, L. J., Daykin, N., & Chatterjee, H. J. (2022). Rapid evidence review of community engagement and resources in the UK during the COVID-19 pandemic: how can community assets redress health inequities?. *International Journal of Environmental Research and Public Health*, *19*(7), 4086.

NEF (2008) Five ways to wellbeing. https://neweconomics.org/2008/10/five-ways-to-wellbeing

NHS (2025) Fit for the Future: ten year health plan for England. Available at https://www.england.nhs.uk/long-term-plan/

Yashadhana, A., Alloun, E., Serova, N., de Leeuw, E., Mengesha, Z. (2023) Place-making and its impact on health and wellbeing among recently resettled refugees in high income contexts: A scoping review. *Health and Place*, 81. https://doi.org/10.1016/j.healthplace.2023.10300

Yin, K.R. (2009). Case Study Research and Applications. Design and Methods. (6th Edition) Sage